Active Travel Strategy

February 2010
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Getting the right mix of modes of transport for local trips matters. Walking or cycling can be a quicker and lower cost alternative to the car or public transport for many short trips, and are often the easiest ways for most of us to get more physically active.

More walking or cycling for short journeys has benefits for individuals in terms of their health – they are more likely to achieve a healthy weight and to have better mental well-being. There are benefits for communities too with safer and more pleasant streets, better air quality and lower carbon emissions, and reduced congestion.

Levels of cycling and walking in England have, however, declined significantly in the last 30 years and we have some of the lowest rates of cycling and walking in Europe. There is potential to make billions of pounds of savings to the economy through more active travel: other countries like the Netherlands have achieved this and we should do the same.

Obesity and physical inactivity rates in this country are too high - and with the issues of climate change, congestion and environmental damage in the mix, it is clear that we need to take action now. That is why we need to get more people walking and cycling more often and more safely - so that they can live healthier and happier lives.

We have an unmissable opportunity offered by hosting the London 2012 Olympic Games and Paralympic Games to inspire more people to make a commitment to physical activity. We want to deliver a lasting health legacy from the Games, getting 2 million more adults active by 2012/13.

So we have put walking and cycling at the heart of our transport and health strategies. Working closely with forward-thinking local authorities, we have been able to demonstrate beyond doubt the public health benefits of active travel, the impacts that targeted investment can have in increasing walking and cycling, and what the key factors for successful programmes are.
That means walking and cycling can increasingly be at the heart of local transport and public health strategies and plans. With this strategy we want to support local health and transport partners in working together to make walking and cycling the preferred modes of local transport for the 21st century.

Sadiq Khan MP
Minister of State for Transport

Gillian Merron MP
Minister of State for Public Health
Executive summary

1. Cycling and walking are a very simple way for people to incorporate more physical activity into their lives and are very important for increasing access to jobs and services for many people. When replacing trips by car they can also help reduce emissions and ease local congestion.

2. We have, however, some of the lowest rates of walking and particularly cycling in Europe. Only 2% of trips in England are cycled, but in the Netherlands the figure is 26%, and some towns and cities across Europe have even higher levels. We know we can do better: 18% of trips in Cambridge are cycled, London has seen cycling double in less than a decade, and Darlington have achieved a 13% increase in walking and 113% increase in cycling in just three years.

3. Poor health and obesity, congestion and accessibility, and the environment all present significant challenges for national and local government. At a time when public finances are coming under increased pressure, we cannot ignore the potential of low-cost, sustainable measures like walking and cycling to contribute to tackling these challenges. In particular, as we are in the grip of an obesity epidemic, we cannot afford to miss the opportunity to get more people walking and cycling. The evidence is clear: integrated walking and cycling programmes in Local Transport Plans can get more people active and deliver significant benefits, offering high value for money.

4. We are already investing £140m through Cycling England to get more people cycling more often and more safely, and also investing in walking programmes. We are working with forward thinking local authorities, the NHS and the third sector to provide real-world examples of how investment in relatively low-cost walking and cycling measures can deliver a wide range of benefits.

5. That means that there is a wealth of evidence and good practice that local authorities and the NHS can use to develop their own walking and cycling programmes in their Local Transport Plans (LTPs). With local authorities developing the next round of LTPs, the NHS cannot afford to miss the opportunity to ensure that local transport policies maximise the health benefits that walking and cycling can bring.
1. Vision

Our vision for active travel

1.1 Cycling and walking are great for health and accessibility, and when replacing journeys by car they can also reduce congestion and emissions. We want to see more people cycling and walking more often and more safely. With about two-thirds of the journeys we make under five miles, we believe walking and cycling should be an everyday way of getting around.

1.2 We have, however, amongst the lowest levels of cycling and walking in Europe. We need to turn that around, so that we can reap the benefits which other countries have achieved through active travel for individuals, business and the wider economy.

1.3 More active travel can bring business benefits – a healthier, more active workforce means reduced absenteeism and increased productivity, and reduced congestion means better journey time reliability. It can benefit less active groups in particular – walking and cycling are simple, low-cost and effective ways for some of the most inactive people in society to incorporate physical activity into their daily lives. And it can be good for the environment – journeys made on foot or by bike rather than car will reduce emissions, and can make for a more pleasant local environment.

1.4 That is why Building Britain’s Future committed the Government to develop an Active Travel Strategy and National Cycle Plan which is being led across Government by the Department for Transport (DfT) and the Department of Health (DH). Through this strategy we will be aiming to:

- Promote better public health and well-being by increasing levels of physical activity, particularly among the most inactive people in our society;
- Increase accessibility and reduce congestion;
- Improve air quality and reduce carbon emissions.

We will seek to do this by making key destinations more accessible by active modes of travel and encouraging a greater take up of active travel. We also aim to contribute to our wider road safety outcomes, by reducing
the risk to cyclists and walkers of death and serious injury per km travelled in road traffic accidents.

The National Cycle Plan: the Decade of Cycling

1.5 The Government is already making substantial investment in active travel, including £140m over three years for Cycling England. This includes a contribution of £15m from DH in recognition of the health benefits of active travel. However, we need to do more. To kick this off we are making this the Decade of Cycling. We want cycling to be the preferred mode of local transport in England in the 21st Century, and over this decade our ambition is to see:

- Local authorities introduce 20mph zones and limits into more residential streets (and other streets where there are many pedestrians and cyclists), making streets safer and more attractive for cycling and walking.
- Access to Bikeability for every child who wants it, creating a generation of new, safe cyclists.
- Every major public sector employer signed up to the Cycle to Work Guarantee.
- Cycle parking at or within easy reach of every public building.
- Sufficient secure bike parking at every rail station.

Our vision for walking

1.6 Walking is a natural, accessible and essential transport mode. Journeys made by car or public transport will typically include a walking component in order to reach the final destination. Some urban centres with high population density lend themselves perfectly to walking, which can provide a predictable, often shorter, journey time than other modes of transport, particularly for journeys of less than a mile.

1.7 Walking also represents a vital transport mode for certain demographic groups, for example the young, or older people who may no longer be able to drive, for example because of visual impairment.

1.8 Our plans to get more people walking more often are founded on two pillars:

- Wherever possible creating an environment in which walking is safe, convenient and enjoyable.
- Encouraging people of all ages to find their feet through programmes like Walking for Health, 2012 Active Challenge Routes, Walk Once a Week (WoW) and web-based walking route finders.

1.9 Encouraging people of all ages to find their feet through programmes such as Natural England’s Walking for Health, in particular, will give people the
chance to re-evaluate walking opportunities in their local environment and provide them with the confidence to undertake short journeys on foot. Similarly, *Walk Once A Week* is helping to stimulate a new school travel culture by encouraging parents and pupils to walk to school at least once a week. This could be for all or part of the journey to school.

**What would success look like?**

1.10 Looking at what is happening in other countries gives an indication of what can be achieved with the right mix of measures and a long-term, consistent strategy. The vision is already a reality in many places around Europe. The Netherlands has achieved a trip mode share for cycling of 26%, and not at the expense of walking either – they walk more too.

![Figure 1.1 The Netherlands demonstrates how cycling can be a mainstream mode of transport](image)

Sources: National Travel Survey, DfT and Statistics Netherlands.

1.11 The city of Groningen has used spatial planning policy to promote cycling for decades, ensuring that major public buildings, employment sites and residential areas are located within distances that can be easily cycled. This has been complemented by a traffic and transport policy that has been designed around cycling, walking and public transport, resulting in a remarkable 40% trip mode share for cycling. Throughout the Netherlands provision for cyclists has been integrated into everyday life – and not just for local trips. Cycle hubs at major stations enable as many as 40% of rail users to access the station by bike.
So why is the Netherlands so different from England?

1.12 Contrary to popular opinion, it’s not the weather – annual rainfall in Amsterdam is higher than it is in Manchester, and it’s colder in winter. The answer is more that central and local government in the Netherlands have consistently integrated cycling into transport and planning decisions for decades to create an environment and culture where cycling is the natural choice for many journeys.

1.13 For decades, like the UK, cycling levels in the Netherlands were declining as car use grew. In response to the oil crises of the 1970s, amongst other things, the Netherlands took a conscious decision to develop planning and transport policies that favoured cycling over the car. Since then cycling has remained at the heart of planning and transport policies.

1.14 The Netherlands is not, however, an isolated example. Around the world, major cities are waking up to the potential of walking and cycling. In Copenhagen 36% of trips to work or school are cycled and by 2015 they aim to increase this to 50%. Paris launched its innovative and popular Velib cycle-hire scheme in 2007. London is following suit with its own scheme in Summer 2010, and is planning a network of cycle superhighways. And elsewhere in the UK places as diverse as Cambridge and Hull have successfully reached or maintained high cycling levels.
1.15 Even in the USA, where for so long the car has been perceived as king, the New York Department of Transportation has recently completed a three-year programme of cycling measures that added 200 miles of bike lanes and seen a 45% increase in commuting by bike, while the ‘Plaza Programme’ has enabled not-for-profit organisations to apply to re-claim streets that are underused by vehicles to turn them into vibrant pedestrian plazas.

1.16 Although this is a strategy for England, we are working closely with the devolved administrations to ensure that we can share best practice and promote measures that support our shared objectives.
2. Context

Be Active, Be Healthy,\(^1\) published by the Department of Health in February 2009, establishes a new framework for the delivery of physical activity aligned with sport for the period leading up to the London 2012 Olympic and Paralympic Games and beyond. It also sets out a breakdown of the estimated healthcare-related costs of physical inactivity to illustrate the potential gains to be made by investing in the promotion of healthy, active lifestyles. The economic burden of inactive lifestyles is huge. There are significant costs to the NHS in treating long-term conditions arising from inactive lifestyles as well as the wider costs to the economy from sickness absence and premature death of working age people. The average healthcare cost of physical inactivity is around £5m per year for every PCT in England.

The challenges we face

2.1 Poor health and obesity, climate change and poor air quality, congestion and accessibility and road safety are all significant challenges for local and national government. The analysis undertaken for the Cabinet Office Strategy Unit’s study of urban transport showed that the measurable costs of urban transport of congestion, road accidents and poor air quality are each in the region of about £10 billion per annum. Walking and cycling can have a positive impact on all of these, and in particular make a positive contribution to tackling the cost of inactivity and obesity.

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\(^1\) Be Active, Be Healthy – A Plan for Getting the Nation Moving, Department of Health (2009)
Table 2.1: Comparison of the wider cost per annum of transport in English urban areas (£ billion, 2009 prices and values),
PMSU Urban Transport Study 2009

<table>
<thead>
<tr>
<th>Cost category</th>
<th>All urban areas with population &gt;10k</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excess Delays (2009)</td>
<td>£10.9 billion</td>
</tr>
<tr>
<td>Accidents (2008)</td>
<td>£8.7 billion</td>
</tr>
<tr>
<td>Poor Air Quality (2005)</td>
<td>£4.5 – £10.6 billion</td>
</tr>
<tr>
<td>Physical Inactivity (1998)</td>
<td>£9.8 billion</td>
</tr>
<tr>
<td>Greenhouse Gas Emissions (2003)</td>
<td>£1.2 – £3.7 billion</td>
</tr>
<tr>
<td>Total</td>
<td>£38 billion – £48 billion</td>
</tr>
</tbody>
</table>

Physical activity and health

2.2 Healthy Weight, Healthy Lives – the cross-Government strategy for obesity is clear – we are in the grip of an obesity epidemic. At the core of the problem is an imbalance between ‘energy in’ – what is consumed through eating and ‘energy out’ – what is used by the body, including energy used through physical activity. We simply cannot afford to do nothing. The Foresight report made clear, we are facing a public health problem that is comparable with climate change in both its scale and its complexity.

2.3 Based on the new self-reporting measures in the Health Survey for England (2008) two-thirds of adults in England do not meet the Chief Medical Officer’s (CMO) recommendation for physical activity, and almost as many are classed as overweight or obese – without action nine out of ten adults and two-thirds of children could be obese by 2050. While there has been some improvement in physical activity levels since 1997, around 27 million adults are still not getting the recommended amount of activity. And it gets worse with age: only 20% of men and 17% of women between the ages of 65 and 74 meet the CMO’s recommendations. We are also aware that people tend to over-report their physical activity levels, backed up by new measures included in the Health Survey for England that show a significant discrepancy between self-reported and objective measures of physical activity.

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2 Figures in parentheses state the year in which the impacts were measured or forecast.
If you include direct costs to the NHS (the treatment of long-term conditions and associated acute events such as heart attacks, strokes, falls and fractures), and lost productivity to the wider economy (from sickness absence and premature death of people of working age), in total this costs the country in the region of £9.8bn a year.

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5 Health Survey for England.
The Chief Medical Officer’s 2004 report ‘At least five a week’ established the following recommendations for health-enhancing physical activity:

- Children and young people should achieve a total of at least 60 minutes of at least moderate intensity physical activity each day.
- For general health benefits, adults should achieve a total of at least 30 minutes a day of at least moderate intensity physical activity on five or more days of the week.
- The recommendations for adults are also appropriate for older adults. Regular physical activity is particularly important for the maintenance of mobility and independent living.

**Accessibility and congestion**

2.5 We need reliable, efficient transport networks in our towns and cities. However, increasing car use on a constrained road network is impacting on reliability and increasing congestion, and the forecasts are for it to get worse. In most of our towns and cities there is little room to add capacity to the road network, and there are significant cost and environmental implications. Therefore we need to consider how we make the best use of the road space we have already.

**Climate change**

2.6 Climate change is the most serious environmental threat we face. The Climate Change Act has set a target to reduce UK greenhouse gas emissions by at least 80 per cent by 2050. With 21% of domestic greenhouse gas emissions coming from transport, of which 58% come from the private car, road transport has a major contribution to make.

2.7 The UK Low Carbon Transition Plan (LCTP), published in July 2009, sets out a route-map towards 2020 for the UK’s transition to a low-carbon economy. The Government’s Low Carbon Transport strategy, published alongside the UK LCTP, sets out the Government’s plans for reducing emissions of greenhouse gases from the transport sector. The measures in the strategy, together with existing policies, should mean that transport emissions are 14% lower in 2020 than in 2008. The strategy includes details of the measures the Government has taken to raise awareness of low carbon travel options and invest in initiatives to promote cycling and walking.

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The local environment

2.8 There is a strong link between poor air quality and poor health and premature mortality – it is estimated that it reduces life expectancy in the UK by an average of 7–8 months.

2.9 Emissions from road transport are a major contributor to poor air quality, notably particulates and nitrous oxide. It is particularly associated with congestion, where high levels of traffic and stop-start conditions combine to create local concentrations of harmful pollutants. More than 200 local authorities across England have declared air quality management areas where concentrations of harmful pollutants exceed European legal limits, the majority of which are associated with road transport.

Safety

2.10 Our roads are now among the safest in the world, but cyclists and pedestrians remain particularly vulnerable road users. Aside from the effect that casualties have on individuals and their families, pedestrian and cyclist casualties are a significant burden on local health services. Furthermore, safety concerns are often cited as a reason why people do not cycle or, for example, allow children to walk to school meaning that they are missing the opportunity to do more physical activity and improve their health.

7 DfT Analysis.
3. The potential of active travel

3.1 We want cycling and walking to make a contribution to delivering a number of wider government objectives:

- Improving people’s health and wellbeing through more active lifestyles.
- Maximising access to jobs and services without increasing congestion.
- Reducing carbon emissions from transport and supporting our climate change targets.
- Reducing harmful emissions and improve local air quality.
- Making for more attractive, safer places and communities, and ensuring greater access for everyone to local services.
- Promoting enhanced mobility and independence for vulnerable groups, such as older people and those with disabilities or limiting long-term conditions.

3.2 Of course walking and cycling are not options for all journeys – but they are for many journeys under 5 miles that are currently made by car. Many shorter car journeys could easily be made on foot or cycled, and there is potential for walking and cycling to be integrated into longer journeys – for example on rail – to support mode shift from the car to lower carbon forms of transport. Walking or cycling more journeys that are currently made by car would reduce emissions and improve air quality, particularly in congested ‘stop-start’ conditions associated with the rush hour in towns and cities.

3.3 Regular physical activity of moderate intensity, such as walking or cycling, can bring about major health benefits and an improved quality of life. People who are physically active reduce their risk of developing major chronic diseases – such as coronary heart disease, stroke and type 2 diabetes – by up to 50%, and the risk of premature death by about 20–30%. In short, regular physical activity can help all of us to lead healthier and even happier lives, irrespective of age.
"For most people, the easiest and most acceptable forms of physical activity are those that can be incorporated into everyday life. Examples include walking or cycling instead of travelling by car....."

At Least Five A Week: the Chief Medical Officer's report on physical activity, 2004

3.4 The recommended level of activity for adults can be achieved by 30 minutes walking or cycling five times a week, and by embedding activity into our daily lives – e.g. through cycling to work or walking to the shops – it is more likely to be sustained. Active travel in the working age population is a particularly appealing route to those who find money and time barriers to taking more physical activity. Even walking and cycling to meetings when at work can bring real health benefits as well as often being as quick and more reliable than driving.

3.5 For older people, walking is particularly effective in maintaining independence and good health. Adopting a physically active lifestyle can add years to life for previously inactive older people and significantly enhance mobility and balance, as well as reduce the risk of falling and hip fracture. In addition to improving physical health, walking or cycling promotes social interaction, which leads to an improved sense of well being and quality of life.

3.6 In many congested towns and cities cycling can be as quick an option for commuting as any other option, it is often more reliable, and can make for a more productive workforce. A sustained shift in commuting patterns towards cycling would make an impact on traffic levels and congestion, improving journey reliability for other road users and reducing emissions.

3.7 Currently, however, we have some of the lowest levels of walking and cycling in Europe:
The potential of active travel

Figure 3.1 Estimated share of journeys (trips) made by bicycle

<table>
<thead>
<tr>
<th>Country</th>
<th>Share of Journeys</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Netherlands</td>
<td>26%</td>
</tr>
<tr>
<td>Denmark</td>
<td>19%</td>
</tr>
<tr>
<td>Germany</td>
<td>10%</td>
</tr>
<tr>
<td>Austria</td>
<td>9%</td>
</tr>
<tr>
<td>Switzerland</td>
<td>9%</td>
</tr>
<tr>
<td>Belgium</td>
<td>8%</td>
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<tr>
<td>Sweden</td>
<td>7%</td>
</tr>
<tr>
<td>France</td>
<td>5%</td>
</tr>
<tr>
<td>Italy</td>
<td>5%</td>
</tr>
<tr>
<td>Czech Republic</td>
<td>3%</td>
</tr>
<tr>
<td>Ireland</td>
<td>3%</td>
</tr>
<tr>
<td>Great Britain</td>
<td>2%</td>
</tr>
</tbody>
</table>

Figure 3.2 Kilometres walked per person per year (2000)

The UK has the second lowest walking levels of all EU countries

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8 European Best Practice 2006 Update – Atkins 2006.
3.8 Over the past few decades increasing prosperity, car ownership and demand in particular for longer trips has seen car mileage grow and demand for rail travel increase to its highest level since 1945. However, trips by walking and cycling have been in long-term decline:

- Cycling levels have been in long-term decline, to the point where only 2% of trips are cycled.
- The number of walking trips has also been in decline, although overall distance travelled is largely unchanged, suggesting that when walking, people are taking fewer but longer trips.

3.9 It is also the case, however, that many trips that could be made on foot or by bike are currently being taken by car:

- 66% of trips are less than 5 miles (a distance which can many people could cycle in half an hour); more than half of these are made by car.
- 22% of trips are under 1 mile (about 20 minutes’ walk), 20% of which are made by car.

Research from the three Sustainable Travel Demonstration Towns shows that between a quarter and a third of such trips could be easily made by alternative means, including walking and cycling.

3.10 Some towns and cities in England have, however, managed to buck the national trend, seeing walking and cycling levels increase or maintaining a high mode share of local transport trips. The mode share of cycling in Cambridge is an estimated 18%. Darlington’s sustainable travel and cycling demonstration projects have seen walking increase by 13% and cycling levels by 113%.

<table>
<thead>
<tr>
<th>Table 3.1: Approximate mode share of cycling (2008)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambridge</td>
</tr>
<tr>
<td>York</td>
</tr>
<tr>
<td>Derby</td>
</tr>
<tr>
<td>Stoke-on-Trent</td>
</tr>
</tbody>
</table>

3.11 This means we are missing a major opportunity to improve health, the environment and accessibility. The evidence is clear: active travel policies work. The outcomes of the Cycling Demonstration Towns are very promising. The first phase of the programme, from 2005 to 2008, saw six towns across England receive funding to support ‘European’ levels of cycling funding. Research carried out for Cycling England suggests:

- The towns have achieved growth rates for cycling similar to the most
cycle-friendly European cities, and also matched the growth seen in London.

- Cycling has increased by an average of 27% in the six towns. Alongside an increase in the proportion of adults cycling, there was also a 10% reduction in the number of people classified as ‘inactive’.

- The proportion of children cycling to school either every day or once or twice a week soared by 126% in the schools where the six Cycling Demonstration Towns invested most heavily.

Evaluation of the Sustainable Travel Towns project has demonstrated a significant shift from the car to more sustainable modes – including walking and cycling – and the potential for active travel policies to deliver significant health benefits and very high value for money.

3.12 Active travel schemes are often also much lower cost and simpler to deliver than other transport schemes. They are more easily scaleable, and have shorter delivery times, meaning they can be adapted to suit changing circumstances or uncertain levels of funding.

3.13 It is clear from sustainable travel and cycling demonstration towns, and from other countries with high levels of active travel, that it requires a coherent programme of targeted and complementary measures addressing a range of barriers and opportunities to deliver a change. Darlington showed that by aligning sustainable travel and cycling programmes they were able to deliver a real step-change in cycling levels.
Sustainable Travel Towns

The DfT launched the Sustainable Travel Towns project, which ran from 2004–2009 in Darlington, Peterborough and Worcester. A total of £15m was invested over the lifetime of the project, £10m of this from the DfT.

The towns implemented a programme of measures to increase the use of sustainable travel modes and reduce single occupancy car use, including a range of both ‘hard’ (infrastructure etc) and ‘smarter choices’ measures.

The results have been very positive, indicating, for the three towns taken together, the following (from 2004–2009):

- Car driver trips per resident fell by an average of 9%.
- Car driver distance per resident fell by 5–7%.
- Bus trips per resident increased by 10–22% from 2004–2008.
- Cycle trips per resident increased by 26–30%.
- Walking trips per resident increased by 10–13%.
- Most schools demonstrated a decline in the number of pupils travelling to school by car (approximately 11–15% reduction).

This is all in the context of a national decline in bus use, cycling and walking during the same period (and only a minimal decrease in car use).

The conclusion from the study indicates that the programme was very successful in reducing travel by car, and increasing the use of other modes. It also suggests that the programme offered very high value for money (implied benefit-cost ratio after including environmental, consumer benefit, and health impacts) is very high, probably of the order of 20 or higher.
Why don’t people walk and cycle more?

There are a number of barriers to people walking and cycling more. They can be physical barriers, but they can also be personal – ingrained habits or perceived barriers. Most people know that more physical activity and a healthier diet is good for them, and that walking and cycling are an easy way to keep healthy. Despite this, however, simply having a car often means it becomes the choice for many short, everyday journeys.

Of course, it is more than just habit. Many people are deterred from making some trips on foot or bike because they have over-estimated the distance, difficulty or time involved. Many adults haven’t cycled since they were at school and don’t feel confident or safe getting back on a bike. Concerns about personal security make many people feel uncomfortable going out for a walk after dark, or allowing their children to walk home from school.

The barriers are also physical: the location and design of our most common destinations – e.g. employment and education sites, retail parks or leisure centres – can make people favour the car. Too often they are located on the edge of town and are too far to walk, or located on busy main roads that can be difficult to cross. Sometimes, while there is ample car parking there is nowhere safe to lock bikes, or no storage and shower facilities for cyclists.

The design of streets can also act as a barrier to walking or cycling. Cycle lanes can be poorly maintained, incomplete, or too narrow to allow comfortable cycling. Pavements which have gaps in them – or which are narrow at some points can put people off walking. Roads, particularly with heavy or fast moving traffic, can be noisy or intimidating and a significant barrier for pedestrians and cyclists. Walking is the most common form of physical activity for older people yet older people cite uneven pavements as one of the main reasons why they don’t walk more. Sometimes even safety measures designed into junctions can restrict pedestrian movement, actually making it easier to drive. It can even be as simple as signage for those on foot or bike not being as good as for the motorist.
Ultimately, however, one of the major barriers to more walking and cycling is that their full potential and benefits are not always fully appreciated by decision makers involved in local and community planning projects. This can result in a missed opportunity to deliver higher value for money schemes that support a wider range of objectives for communities individuals and the nation at large.
4. Our programme for promoting active travel

4.1 We believe that central government should lead from the front. We are working with partners across central and local government, the health and education sectors, voluntary organisations, employers and public transport operators to promote more people walking and cycling, more often and more safely. We are working to ensure that partners have the evidence they need to make the case for active travel policies, that the local environment allows people to make the active travel choice with confidence and in safety, and working with key groups and trip destinations to promote active travel as a mainstream mode of personal transport.

Cycling England

4.2 In January 2008 the DfT published *A Sustainable Future for Cycling* outlining an expanded programme of investment in cycling and giving Cycling England a budget of £140m over three years, including a £15m contribution from DH. Cycling England is a specialist body dedicated to getting more people cycling, more safely, more often. It is funded by the DfT and DH, and backed by key Government departments. It brings together
technical advice and expertise, and facilitates communication across Government, NGOs and the cycling community to enable a co-ordinated, joined up and cost effective approach to delivery and sharing best practice.

4.3 Working with young people is an important part of Cycling England’s programme, including Bikeability training and cycling to school. They also support 18 Cycling Cities and Towns, and provide technical support and advice for local authorities on cycling programmes.

4.4 Bikeability has been designed by leading experts in the fields of road safety and cycling to give children and parents the skills and confidence to cycle safely and well on today’s roads. It consists of three levels:

- Level 1 teaches basic cycling skills off-road, aimed at 7–9 year olds.
- Level 2 adds on-road training aimed at 10–11 year olds.
- Level 3 is aimed at older children and adults and includes tackling more difficult road features such as roundabouts.

Cycle training is a critical element of encouraging more children and adults to cycle. This year we are funding Bikeability training for 200,000 children and are on track to meet our target of 500,000 children reaching Bikeability level 2 training by 2012. Our ultimate ambition is that every child who wants Bikeability training should be able to access it in their local area, and Cycling England and DfT will continue to work closely with local authorities, school sports partnerships and others to enable this to happen.

4.5 Cycling England are also investing £50 million in the 18 Cycle Cities and Towns, matched by a further £50 million being invested by the local authorities themselves, to transform cycling levels. This brings levels of investment in these places in line with many of our European counterparts (roughly around £10 per year for each resident). The authorities’ programmes are a mix of infrastructure measures – such as high quality cycle lanes, advanced stop lines and cycling parking – and “soft” measures such as marketing, training and information.

4.6 Cycling England also fund a number of pilot projects under the headings Finding New Solutions: The Journey to Work and the Role of Leisure. “The Journey to Work” is looking to see what large public sector employers, such as universities and hospitals, can do to get more of their staff (and visitors) cycling to and from work, and showing how NHS Trusts can work with smaller businesses to increase numbers of people cycling. “The Role of Leisure” is using leisure destinations where people who might never consider it can be targeted and introduced to cycling with a positive safe experience – with a follow up package of measures to help them towards more everyday cycling back at home.
4.7 Cycling England are working with DfT to develop a sustainable national online cycle trip planner within Transport Direct which will allow novice and experienced cyclists to plan cycle friendly journeys throughout Britain at the click of a mouse. This will help promote cycling as a real alternative to other modes of transport such as car and public transport and unlock one of the key barriers to cycling; knowing where it is safe and easy to do so.

4.8 People will be able to search for the quickest, quietest or most recreational and easiest to navigate cycle routes between their starting point and destination. By including the National Cycle Network, not only will the journey planner cover routes within our town and cities, but will also cover routes between them. In time the aim is to provide an integrated, multi-modal trip planner which can provide a truly door to door route.

4.9 Cycling England are also working with the rail industry to help realise the potential for people to access rail stations on bicycles through the Cycle Rail Integration Taskforce: anyone passing through Cambridge station can see how much potential demand there is for cycling to stations. By putting the needs of cyclists at the heart of their rail network and station design, the Netherlands has enabled as many as 40% of rail users to access major stations on bikes, with cycle hubs at stations capable of providing top of the range facilities for thousands of cyclists.

4.10 In September 2009 DfT announced:
- £5m for fully supervised European-style cycle hubs, offering a range of facilities for cyclists including secure covered parking, cycle hire, information, retail and repair at 10 stations.
Active Travel Strategy

- £3m for over 4500 additional cycle park spaces at nearly 350 stations across the country and £2m which will improve cycle access in and around rail stations.

- £4m from Cycling England to support 4 train operators to improve cycle facilities on their networks so that they become flagship ‘Bike ‘n’ Ride’ train operating companies, including more parking and bike hire schemes.

Going forward we will be using the rail franchising process to ensure that the potential of integrating cycling with the rail network is maximised: **our ambition is to have sufficient secure bike parking at all stations.**

Sport England

Sport England is putting over £24m over the next four years into developing cycling at the grassroots level across local communities. This investment will build the foundations of sporting success, by creating a world-leading community sport system of clubs, coaches, facilities and volunteers, which will make it easier for people to participate in cycling.

A co-ordinated approach to physical activity and sport is important to allow individuals to set their own sporting, lifestyle and health goals that are relevant to their everyday lives. By growing the opportunities for cycling, Sport England is helping to make the links between the everyday commute and Olympic success.

As people become more physically active and more confident in their cycling ability, Sport England is widening access in sport to allow the casual weekend cyclist to graduate to membership of the local cycling club. And by making sure more people are satisfied with the aspects of cycling that are important to them, Sport England is ensuring that people stay cycling – and, for those that have the ability, it is developing the right talent support systems so that more talented cyclists move into elite competition.

Sport England aims to have one million more people doing regular sport, as part of the cross-Government target of getting two million more people physically active by 2012/13. By encouraging more cycling in every community and at every level, and by building on the inspiration provided by the nation’s top cyclists, there is a unique opportunity to leave a lasting legacy for cycling that can reach well beyond the 2012 Games.

Promoting walking

4.11 The Department of Health is also supporting a major programme of walking which we hope will make a significant impact towards achieving the 2012 Legacy Action Plan target of 2 million more adults active by 2012/13. In Be Active, Be Healthy we announced a partnership with Natural England to
support a significant expansion of the Walking for Health programme and to strengthen links with primary care and other partners. Walking for Health encourages people to enjoy their local natural spaces and benefit their health by taking part in local volunteer-led health walks. Walking for Health supports over 590 local health walk schemes and DH is funding a fourfold expansion of the programme.

4.12 The Department of Health is also committed to working with Walk England and local communities to support and encourage communities to develop a total of 2012 Active Challenge Routes across England, close to where people live and devised and developed by those sharing in the Olympic vision. Markings and signage will be used to identify one-mile routes, serving as the basis for an individual, walking-based fitness test\(^\text{11}\) and linking to local NHS promotion of walking.

4.13 These programmes are designed to encourage those people who are currently inactive, or are at particular risk of inactivity, to become more active. The aim is that people will realise the health and wellbeing benefits of walking more and will move on from these programmes to incorporate physical activity into their everyday lives, including active travel.

\(^{11}\) The Rockport Fitness Walking Test offers an indirect assessment of an individual’s VO\(_2\) max based on their weight, age, time taken to walk one mile and pulse measurement.
Walking for Health

Natural England’s Walking for Health (WfH) is a national project which aims to encourage people, particularly those who take little exercise, to take regular short walks in their communities. WfH is the largest national body promoting and setting the standards for led health walks. Health walks provide a wide range of benefits to both individuals and communities in terms of improved physical and mental health – for example, regular walking has proven positive effects on heart health, type 2 diabetes, blood pressure, weight management, stress and depression. Health walks can also lead to more independent walking, safer communities and reduced car use.

Health walks have particular and unique strengths: they are free, very low-risk, require no special equipment and are not age restricted. Health walks are accessible to virtually everyone and are designed to enable those who are sedentary – eg through ill-health or social isolation – to become and to remain more active in an enjoyable and sociable setting. Walkers are encouraged to progress from beginner health walks to intermediate and higher level walks as well as independent walking. Most health walks routes are within the local community and/or can be reached by public transport. WfH scheme accreditation and walk leader training mean that GPs and other health professionals can have confidence in referring patients to local health walk schemes.

www.wfh.naturalengland.org.uk

3M Aycliffe, a manufacturing plant in the North East, established health walks for staff six years ago when it became clear that there was a recognised need among the workforce for physical activity.

“Instead of telling people what they need to do in terms of health, we send out a comprehensive questionnaire to all staff every three years and ask people what health promotions they would like. We get a high percentage of returns and, from these, we decide what the priorities will be for the next three-year period. At present we are concentrating on five areas of which one is physical activity.”

Martyn Harvey, Physical Activity Champion, 3M Aycliffe

On behalf of 3M Aycliffe, Martyn worked closely with the WfH regional team to devise and promote three walks of differing lengths around the plant. Led health walks were put on every Friday lunchtime. A map of the walks was produced and all who expressed an interest were also given a book detailing 14 walks in the locality.
“It did raise the profile of walking as a route to fitness and some who had not been walkers before took it up. The staff on shifts can only walk in their own time after work but we know many of them have made good use of the walks book.”

Martyn Harvey, Physical Activity Champion, 3M Aycliffe

Although the organised health walks are now over, they have helped to establish a permanent ‘culture’ of walking within the plant. Daily lunchtime walks of 30 minutes or so are commonplace, new staff see them as part of what’s available and it would seem that healthy walking at the plant has become self-sustaining.

“When the led health walks ended, we went back to all those who had taken part and it became clear that those who could were still walking during the working day and many were following the routes in the book with their family and friends at other times. Several people who have retired from 3M Aycliffe have joined the local health walk scheme.”

Pat Hardy, Occupational Health Nurse, 3M Aycliffe

Walking, on its own or combined with bus/train travel, is one of the options encouraged on 3M’s annual, well-supported Sustainable Transport Day when staff at the plant are encouraged to give up their cars for the day.

Children, young people and the education sector

School travel plans

4.14 Promoting and increasing active and sustainable travel to schools and other educational establishments is a core part of our active travel strategy. With the Department for Children, Schools and Families (DCSF), DfT is supporting local authorities to increase sustainable travel to school through the joint ‘Travelling to School Initiative’ set up in 2003. Through the Initiative, DfT and DCSF are providing £7.5m per year to local authorities to enable them to employ school travel advisers who work with schools to help them develop and implement school travel plans and other school based walking and cycling initiatives. DCSF is also providing small capital grants to schools to help them implement the plans. DfT and DCSF are committing more than £140m through the Initiative. By encouraging more active travel by children we believe that we can also encourage habits that last a lifetime, so that over the long-term there would be less need to encourage adults out of their cars and into walking and cycling.

4.15 The Initiative has made considerable progress with more than 81% of schools having a travel plan at the end of March 2009. However, the ambition remains for all schools, including independent schools, to have a plan, and to ensure that existing plans are reviewed and updated regularly,
so that they remain as effective as possible. Funding will continue to be made available to local authorities in 2010–11 and they are being encouraged to use this to ensure that school travel plans address all pupils’ travel needs (journeys to/from school at normal start/finish times; journeys to attend pre-and after-school events and journeys made during the school day to attend activities at other locations) and those of teachers.

4.16 The information contained in school travel plans informs an authority’s ‘Sustainable Modes of Travel Strategy’ which the Education and Inspections Act 2006 requires it to produce. The Strategy provides an opportunity to assess the travel and transport needs of all children and young people and to consider how transport infrastructure can be planned to meet their individual travel needs, whilst maximising the potential to promote and utilise sustainable and active modes of travel. The publication of the Strategy summary provides the opportunity to promote sustainable travel options to parents so that they can make informed travel choices when choosing a school.

4.17 The new 14–19 education reforms present challenges in terms of transport, particularly in rural areas, which the Government recognises. Overcoming these challenges, in a sustainable way to give young people real choices and an equal chance to gain the skills needed to be successful in the 21st Century, must be a priority. The development of the Sustainable Modes of Travel Strategy is an opportunity to explore the options for delivering travel solutions for the 14–19 learners. Most areas are already working to minimise the need for movement of Diploma learners and are actively exploring alternatives to transport but where transport is necessary they are promoting a wider range of transport choices including cycling and walking. It is an opportunity to influence a generation reaching driving age about the value of active and sustainable alternatives.

4.18 Through Cycling England DfT is funding improvements to infrastructure which will include at least 250 safer links to approximately 500 schools.
Our programme for promoting active travel

Change4Life

Change4Life is a groundbreaking social marketing campaign launched by the Department of Health in January 2009 designed to help us all ‘eat well, move more and live longer’. Change4Life is much more than a healthy living campaign. It aims to be a practical, supportive movement across all walks of society, which acknowledges the pressures of modern life that we all experience. Obesity is a major problem which, potentially, affects us all, but we can’t tackle it on our own. In its first year, over 400,000 families joined the Change4Life movement, as well as 25,000 local supporters and 183 national organisations. A continuously fielded tracking study indicates that over a million mothers claim to have changed something in their children’s lifestyles as a result of Change4Life.

Over three years, the campaign aims to build the biggest societal movement this country has seen. The Government, NGOs, industry, schools, the NHS, community groups, families and individuals can play a part in promoting and supporting healthier, more active lifestyles. Ultimately, people have to take responsibility for their own diet and physical activity levels. However, as part of the wider drive to tackle obesity, Change4Life aims to change attitudes in order to change behaviours. More information can be found at www.nhs.uk/change4life

Change4Life has a number of sub-brands and toolkits designed to promote physical activity, including walking and cycling:

walk4life

The Walk4Life toolkit is full of tips and games to help families get active in their local area through walking more – whether for leisure or as part of their daily routine such as travelling to school or work.

bike4life

Bike4Life aims to get families on their bikes as a way of getting up and about and spending time together in the fresh air. The Department of Health has produced the Bike4Life toolkit which includes tips and information to help families get out and about on their bikes and to help them feel safe on the road. Bike4Life also aims to get people cycling or walking short journeys instead of taking the car.
The Cycle to Work Guarantee

4.19 The Cycle to Work Guarantee is a major new joint initiative between DfT and DH aimed at transforming the numbers of people who cycle to work. By signing up to the guarantee, employers undertake to provide a series of simple, relatively low-cost measures that can make a real difference to their workforce.

4.20 Hundreds of organisations have signed up already, including some of the country’s largest and most successful businesses, central and local government departments and many NHS Trusts, and we will be working with Business in the Community and partners in Government to bring the benefits of the Guarantee to as much of the workforce as possible.

The Cycle To Work Guarantee

- Secure, safe, and accessible bike parking facilities for all staff who want them;
- Good quality changing and locker facilities for all staff who want them;
- Offset the cost of cycling equipment through the big tax savings of the ‘Cycle to Work scheme’;
- Free bike repair for cyclists on or near site;
- An implementation plan including targets for take-up, training and incentives to cycle.
Cycling to work: GlaxoSmithKline (GSK)

GSK are one of the world’s leading research-based pharmaceutical and healthcare companies, with 3200 employed at their West London headquarters. Cycling has been put at the heart of staff benefits, healthy living and GSK’s contribution to reducing CO₂ emissions and improving the environment.

The features and incentives introduced include:

- A Bike Miles scheme for vouchers redeemable at a bike shop.
- Access to professional bike maintenance during work time.
- Cycle parking located in a prime position.
- State of the art changing facilities.
- Guide to Safer Cycling produced for staff.
- Bicycle User Group established.

Through a consistent approach to cycling, partnering with others, such as WiZZBiKE and Cyclescheme, GSK has set themselves up as an exemplar of what can be achieved by businesses promoting cycling:

- The number of registered cyclists commuting to work increased by 70% in the first year.
- 15% of staff are now registered cyclists.

They also found providing for cyclists saved them money – their facilities and incentives cost per cyclist are only 20% of the cost of providing a car parking space.
Promoting active travel in the NHS

4.21 We are also working with Mike Farrar, the newly appointed NHS Sport, Physical Activity and Health Champion, to encourage all NHS Trusts to sign up to the Cycle to Work Guarantee and publicise good practice amongst those Trusts who successfully promote active travel amongst their workforce.

4.22 The NHS is the single biggest employer in Europe with around 1.3 million employees. Active travel has an important part to play in improving the health and wellbeing of staff across the NHS as well as easing the impact of large NHS facilities upon local congestion and the wider environment. The NHS accounts for 5% of all road traffic in England and travel is responsible for 18% of the NHS carbon footprint in England. Reducing car usage, either travelling to NHS sites or on NHS business, represents a big opportunity to improve the health of the NHS workforce and reduce the NHS’s carbon footprint.

There are some very simple steps that the NHS can take to promote active travel for its workforce: SWELTRAC (the South and West London Transport Conference) has developed a series of specific place-to-place cycle route guides linking major NHS sites in the region. The maps are a key component in encouraging staff to cycle to work and when travelling between sites. For further information see: www.sweltrac.org.uk/publications.html

4.23 The NHS Health and Wellbeing Review, led by Dr Steve Boorman, was set up to investigate and improve the health and wellbeing of NHS staff, and their health and wellbeing provision at work. The final report and the DH’s response were published on 23rd November 2009. The report sets out a comprehensive set of recommendations for improvement in the provision of health and well-being across the NHS. It shows that NHS organisations that prioritise staff health and well-being perform better, with improved patient satisfaction and better outcomes for patients, as well as higher levels of staff retention and lower rates of sickness absence. It highlighted the need for the NHS to put in place better support mechanisms for staff health and well-being, including opportunities to live healthier lifestyles, and DH is working with NHS Trusts to help them develop local health and well-being strategies for their staff. The report highlights the need for NHS Trusts to develop active travel strategies for their staff as part of a wider investment in health and wellbeing.

12 Taking the Temperature – Towards a NHS Response to Global Warming (NHS Confederation, 2007)
14 NHS Health and Wellbeing – Final Report (Dr Steve Boorman/Department of Health, November 2009)
Let’s Get Moving: the physical activity care pathway

4.24 In September 2009, the Department of Health launched the physical activity care pathway ‘Let’s Get Moving’\(^{15}\) which represents a significant opportunity for PCTs to implement a more structured evidence-based approach to the promotion of physical activity. Let’s Get Moving provides a physical activity care pathway which can be used by primary care practitioners to systematically recruit patients and screen for inactivity using a validated questionnaire. Patients identified as not meeting the Chief Medical Officer’s recommendations for physical activity will be offered a brief intervention which:

- Takes a patient centred approach to highlighting the health benefits of physical activity.
- Works through key behaviour change stages, and
- Concludes with a clear physical activity goal set by the patient, identifying local opportunities to be active.

4.25 Let’s Get Moving represents a very effective means for primary care professionals to promote active travel as one of the activities that patients may choose to build up their activity levels as part of a healthy lifestyle. Physical activity goals will of course vary from patient to patient but it is clear that Let’s Get Moving can act as a key driver to the reduction of physical inactivity among those at greatest risk.

Building the evidence base

4.26 At the core of our strategy is the ability to demonstrate real world examples of where targeted funding and strategic leadership can deliver reduced environmental damage and congestion, better health and road safety through integrated programmes to promote walking and cycling. To that end we are undertaking evaluation of the Cycling Cities and Towns and Sustainable Travel Demonstration projects. This is providing valuable evidence not only on the effectiveness of the measures in increasing levels of walking and cycling, but also on what these mean in terms of achieving objectives and, crucially, value for money.

\(^{15}\) http://www.dh.gov.uk/en/Publichealth/Healthimprovement/PhysicalActivity/DH_099438
Darlington: A Sustainable Travel and Cycling Demonstration Town

Darlington was awarded both Sustainable Travel Town and Cycling Demonstration Town status by the DfT. Under the Local Motion branding, Darlington used this funding to develop a broad based programme of sustainable and active travel measures to encourage a shift away from car use to alternative modes.

Particular aspects of the programme included cycle promotion in schools; extensive child cycle training; and a large increase in cycle parking provision at schools and elsewhere, coupled with infrastructure measures to create a city centre ‘pedestrian heart’ and development of seven radial cycle routes.

Every year at the beginning of “Bike Week” Darlington held a ‘Festival of Cycling’ in the largest park in the city. Regular cycle-rides and guided walks designed to appeal to different groups were complemented with walking and cycling maps. They even offered free bike loan and training to get people started.

This was complemented by a large-scale personal travel planning programmes and travel awareness campaigns, as well as engaging with key destinations (e.g. schools and employment sites) to promote walking and cycling.

Results coming back are impressive, indicating there have been significant rises in walking and cycling in Darlington, with cycling increases of up to 113% and walking increases of up to 13%. Walking distance increased by up to 20%. There was also an increase in active travel to school of 2–8%.
Our programme for promoting active travel

4.27 DH is working with the World Health Organisation (WHO) Regional European Office and UK partners, including the Outdoor Health Forum, to fund and develop a Health Economic Assessment Tool (HEAT) for walking, which will provide comprehensive justification for investment in walking, to sit alongside the existing WHO HEAT tool for cycling. The published tool will be available from September 2010.

4.28 We will be looking at other ways of improving our evidence base. Critically, while we know much about the attitudes and satisfaction of motorists, and rail and bus passengers, we know less about those of non-motorised road users. Yet knowing this will be critical to understanding the success of the strategy – we need to know if our actions are making an environment where people feel more comfortable, safe and secure about making the choice to walk and cycle. Therefore, we will in future collect and publish evidence on public satisfaction on walking and cycling conditions to understand better the views of people about the provision for walking and cycling in their areas.

Working with the third sector

4.29 We are fortunate that in developing walking and cycling policies, we have the resources of a large, committed and skilled third sector. Organisations such as Sustrans and the Cyclists Touring Club, Living Streets and Walk England alongside many local groups, have been working in partnership with central and local government for many years to deliver the National Cycle Network, cycle training, walk to school programmes and walking maps to name but a few. DfT are currently working closely with Sustrans partners in order to create up to 144 jobs for young people as part of a programme of maintenance on the National Cycle Network.

4.30 These groups, alongside many more local organisations, are a valuable source of support, advice and expertise for areas looking to develop active travel plans. Living Streets, for example, have produced ‘Supporting Local Delivery’ which provides an overview of how they can help public and private sector organisations to create quality places where people want to walk (www.livingstreets.org.uk).
The National Byway

The National Byway is a 4,500-mile sign-posted cycling route round England and parts of Scotland and Wales, using existing quiet roads and rural lanes which carry only 2% of the national average traffic level. In addition to the main route, there are 50 circular Loop rides.

The heritage, natural environment and community are its focus. When fully operational, the National Byway will inject more than £100 million a year into the rural economy from 8 million journeys annually by an expected 3 million people.

The National Byway is funded by a series of private/public partnerships and commercial sponsorships as well as through charitable donations. Companies, local authorities, National Lottery and grant-making Trusts have all contributed towards its establishment and completion, now scheduled for spring 2012.
The safety question

Our roads are now among the safest in the world, but cyclists and pedestrians remain particularly vulnerable road users. Aside from the effect that casualties have on individuals, pedestrian and cyclist casualties are a significant burden on local health services. Safety concerns can also be a barrier to more cycling in particular, preventing people from enjoying the benefits it can bring them. It can also, however, act as a barrier to walking for older or disabled people who have reduced mobility, for example.

We know speed is a crucial factor in road safety. Most walking and cycling takes place on the kinds of local streets where high speeds for motor vehicles are inappropriate, and we know people value low vehicle speeds in the streets where they live.

We have committed in our road safety strategy consultation to revising our guidance to local authorities to encourage them to introduce over time 20 mph limits or zones into their streets which are of a primarily residential nature and in streets where pedestrian flows are particularly high, such as around shops or schools where they are not part of any major through route. This is aimed not only at reducing pedestrian and cyclist casualties, but also at making streets more pleasant to walk and cycle in. Our ambition is for 20mph zones and limits across most residential streets.

And while casualty reduction is a priority, there should be no question of improving safety through discouragement of walking and cycling, given the longer-term benefits of this for our health and environmental goals. That is why we have proposed in our Road Safety Strategy consultation a target to reduce the combined rate of killed or seriously injured (KSI) pedestrians and cyclists per 100 million kilometres walked and cycled by 50 per cent.

Does the safety risk of cycling outweigh the health benefits?

The answer is, quite clearly, no: the actual risk of cycling is tiny. There is one cyclist death per 33 million kilometres of cycling, while being sedentary presents a much greater risk. Over 50,000 people die in the UK each year due to coronary heart disease related to insufficient physical activity, compared to around 100 cyclists killed on the road. Research suggests that safety risks are outweighed by the health benefits by a factor of around twenty to one.

But we know we can do better. Giving cyclists the skills to negotiate traffic with confidence alongside creating a better road environment can deliver better health and improved safety. Cyclists can also make themselves safer by following the advice in the Highway Code and wearing high visibility fluorescent and reflective clothing and helmets. And fewer cars and more pedestrians and cyclists can make the roads safer for all users.
5. Supporting better local delivery

5.1 While there are excellent examples of success across the country, the national picture on active travel is one of stability after a long period of decline. If we are to improve public health, reduce emissions and tackle congestion, we need to do more. Central government will take the lead where it can, but to realise the full potential of active travel will take joined up thinking and delivery at a local level as well.

5.2 DfT already provides over £1.3bn capital funding per year for small-scale transport improvement and maintenance programmes – alongside Formula Grant from Dept of Communities and Local Government – but historically local authorities have chosen to spend relatively little of this on supporting active travel. Where investment has been made, too often this has been in a piecemeal fashion rather than integrated effectively into a wider sustainable transport plan and co-ordinated with health and social objectives. This means that we are not realising the full potential of active travel to reduce local area carbon emissions and help the UK meet its climate change targets.

5.3 In an increasingly budget-constrained world, Local authorities will have to do more with less, focusing on low-cost, high value measures that can support a number of objectives. With new Local Area Agreements and Local Transport Plans due to start in April 2011, the latter looking as far as 25 years ahead, there is an unmissable opportunity for health and transport professionals to work together to make sure cycling and walking are a core part of their area’s plans.

5.4 The DfT LTP guidance recommends that local authorities strategically align LTPs with wider strategic priorities, while Creating Strong, Safe and Prosperous Communities requires closer coordination and joint working by local authorities across partners. The Local Strategic Partnership (LSP) has a key role to play in bringing partners together to identify and articulate the needs and aspirations of local communities. The LSP is in a position to strategically influence and improve communities’ quality of life and to promote improvements to the built environment that meet people’s needs, including promoting safer and more attractive streets and opportunities for active travel.
It is essential that local authorities take account of the aims and objectives of the full range of other departments and stakeholders to ensure effective delivery. Local Transport Plans, and the plans and activities which underpin them, should be created in consultation with the LSP and effectively joined up with other plans and strategies. For example, this would mean working with the local Children’s Trust partnership to ensure Local Transport Plans and active travel strategies are aligned with Children and Young People’s Plans.

Local Area Agreements

Walking and cycling can make a significant contribution to a wide range of LAA targets, including:

- NI2: People who feel that they belong to their neighbourhood.
- NI8: Adult participation in sport and active recreation.
- NI55: Children in Reception Year: overweight and obesity levels.
- NI56: Children in Year 6: overweight and obesity levels.
- NI120: All-age all cause mortality rate.
- NI121: Mortality rate from all circulatory diseases at ages under 75.
- NI137: Healthy life expectancy at 65.
- NI139: The extent to which older people receive the support they need to live independently at home.
- NI167: Congestion – average journey time per mile during the morning peak.
- NI175: Access to services and facilities by public transport, walking and cycling.
- NI186: Per capita reduction in CO2 emissions.
- NI198: Mode of travel to school.

The evidence points strongly to the effectiveness of active travel measures and we expect local authorities and PCTs to be taking a strategic approach to maximising the potential of walking and cycling.

5.5 Since 1 April 2008, local authorities and PCTs have been under a statutory duty to produce a Joint Strategic Needs Assessment (JSNA). This will establish the current and future health and wellbeing needs of the local population, leading to improved outcomes and reductions in health inequalities. It is DH, however, who sets the strategic direction and priorities for the NHS in the NHS Operating Framework. In the 2010/11 Operating Framework, published on 16 December 2009, there is a strong emphasis on prevention and a specific reference to promoting physical activity:
“Implementing the Let’s Get Moving physical activity care pathway will enable PCTs to identify adults who do not currently meet recommended activity levels and support them in being more active. PCTs, working with local authorities, are encouraged to promote activities that improve the health of all sections of the populations they serve, such as schemes to promote physical activity, building on and complementing 5-A-DAY activity and interventions such as the school fruit and vegetable programme.”

5.6 In January 2008, the National Institute for Health and Clinical Excellence issued guidance on promoting and creating built or natural environments that encourage and support physical activity. Many of the recommendations in the guidance are relevant when developing local transport plans – specifically, the guidance recommends that transport planners should ensure pedestrians, cyclists and users of other modes of transport that involve physical activity are given the highest priority when developing or maintaining streets and roads.

5.7 The guidance offers the first national evidence-based recommendations on how to improve the physical environment to encourage physical activity. It demonstrates the importance of such improvements and the need to evaluate how they impact on public health. www.nice.org.uk/Guidance/PH8

There is broad public support for measures to promote active travel. The vast majority of adults agree that everyone should be encouraged to walk to help their health (97%), help the environment (94%) and to ease congestion (92%). So there is a real opportunity to make the case for active transport not just to transport officers, but to planners, businesses, health professionals and other key decision makers.

5.8 There are many practical examples of how action at a local level to support active travel can support our objectives: increasing physical activity and improving public health, improving accessibility and tackling congestion, reducing carbon dioxide and improving the local environment, improving road safety. A full list of available supporting guidance and resources can be found at the end of this document.
London 2012

The Olympic Delivery Authority (ODA) is encouraging walking and cycling to help London 2012 meet its aim of being the most sustainable Games to date and set the standard for future large-scale events. It is encouraging walking and cycling to all events in the lead-up to 2012 and is aiming for 100% of spectators to get to the Games by public transport, or by walking or cycling.

The ODA is investing £11.5m in improving walking and cycling routes and promoting active travel, including 80km of walking and cycling route improvements within London, and 20km outside London, to be delivered by December 2011.

The ODA has estimated that around 5% of spectators could walk or cycle to the Olympic Park and River Zone venues during the Olympic and Paralympic Games. On the peak day at the Olympic Park, this could mean around 10,000 spectators walking all the way to the venue and more than 4,400 cycling.

These walking and cycling routes will create an important legacy for around the Olympic Park and other Games venues providing a low-cost, healthy and sustainable way for local people to access their place of work, homes, venues and green spaces long after the closing ceremony of the Games.
Getting the built environment right

“We need to remember that however people reach town centres, the main purpose of their journey – shopping, meeting friends, sightseeing – is actually achieved on foot. Yet too many of our streets and urban spaces have been given over to road traffic, at the expense of pedestrians and deliveries and we need to restore the balance for town centres to prosper.”

Getting Into Town: A guide for improving town centre accessibility.
British Retail Consortium

5.9 One of the most important ways of encouraging more active travel is to get the built environment right at the outset. Planning Policy Guidance Note 13 sets out the statutory provisions and guidance on planning integrated, sustainable transport for new developments. When preparing development plans and considering planning applications, it makes clear that local authorities should:

- locate day to day facilities which need to be near their clients in local centres so that they are accessible by walking and cycling, and
- accommodate housing principally within existing urban areas, planning for increased intensity of development for both housing and other uses at locations which are highly accessible by public transport, walking and cycling.

Local and regional development plans, spatial plans and transport plans will be subject to Strategic Environmental Assessment (SEA) and it is key that health is actively considered in these assessments. SEA is an EU requirement enshrined in UK law by the Environmental Assessment of Plans and Programmes Regulations 2004.

5.10 LTPs require an SEA which needs to address the full range of potential health impacts and consider the significance of the plans for the health of the local population. Promoting active travel should be a key consideration in this assessment, and local authorities will need to ensure that local health partners are engaged in the SEA process. In parallel DH are commissioning a review of evidence of the impacts of transport on health for use in the next round of LTPs. This will inform the development of support and training materials in SEA. These and other related resources will be available from the HIA Gateway website, www.hiagateway.org.uk

5.11 Cycle and pedestrian facilities are a cost effective way of meeting sustainable travel and accessibility objectives of new developments, and should be a priority for local planning authorities when considering agreements with developers. Engagement between planners and developers at an early stage will make it easier and more cost
effective to integrate walking and cycling into the design of new developments.

5.12 Effective planning of services which reflects the needs of those arriving on foot or bike can be important to increase accessibility and social inclusion, as well as encouraging more active travel and we believe that the public sector should lead on this. **Our ambition is for cycle parking at or within easy reach of all public sector buildings.** It is also important that people have somewhere safe to park their bike at home: The ‘Code for Sustainable Homes’ awards points for new homes which have somewhere secure to store a bike.

Local delivery of health, wellbeing and social care objectives from a spatial perspective

The Department of Health and Department for Communities and Local Government have jointly commissioned the collection of evidence to assess how effectively the Government’s health, wellbeing and social care objectives are being delivered locally from a spatial perspective. This will involve a review of current legislation and national guidance (Planning Policy Statements, Planning Policy Guidance and Circulars) to determine the extent to which they prioritise health and social care outcomes, and an assessment of how these are reflected in regional spatial strategies and local development plans. The work will also examine the linkages between sustainable community strategies, local area agreements and development plans, and the extent to which these, when taken together, effectively deliver health and social care outcomes on the ground in local communities. It will also give consideration to the capability and capacity in the system and what might be needed to improve it.

The outcome of this work will be a series of recommended actions that Government could take to support better delivery of its health, wellbeing and social care objectives, focusing on the health and wellbeing delivery chain, including its spatial component.

5.13 **Manual for Streets** is an award winning DfT, CLG and Welsh Assembly Government document which focuses on the design of lightly-trafficked residential streets. Many of its principles may, however, also be applicable to other types of street such as high streets and lightly-trafficked lanes in rural areas. The Manual emphasises the need to design streets as social spaces and represents a step change in design guidance encouraging more active travel by putting pedestrians and cyclists right at the top of the road user hierarchy. We are working with partners to develop further guidance extending the principles in the Manual to other streets, which is planned for publication in autumn 2010.
New Road was created in the 18th century and is at the heart of Brighton’s Cultural Quarter, providing direct access to world famous destinations including the Pavilion, Lanes and North Laine area, Jubilee Library, Theatre Royal, The Dome and Brighton Museum.

The ambience of New Road was comparatively utilitarian. Despite relatively low volumes of through traffic, it was a typical example of an area originally designed to prioritise vehicles rather than people. The area was dominated by a wide carriageway and associated clutter that left little room for people to enjoy what the area had to offer. New Road has been transformed from a traffic-dominated, underused street into one of the most popular urban spaces in the city.
Oxford, Oxfordshire County Council

To improve road safety and encourage walking and cycling, Oxfordshire County Council have recently introduced 20mph limits throughout all the residential roads and main road suburban shopping areas in Oxford city to complement the existing 20mph limit in the city centre.

A comprehensive informal consultation found overall 61% of residents in favour and majority support in every area. Most of the roads already had an average speed of 20–24mph, but the Council supported and raised the profile of the scheme, by deploying portable Speed Indicator Devices and temporary “It’s 20 for a reason” posters on key routes. The cost of signing and introducing the scheme was around £300,000.

The Council is considering introducing physical improvements in 3 locations on major routes where the current accident rate is high. Designs will reduce speeds and enhance the environment for vulnerable road-users.

Many towns and cities – for example Oxford and Portsmouth – have already introduced 20mph speed limits across residential streets. DfT has committed to revising its guidance to local authorities to encourage them to introduce over time 20 mph limits or zones into their streets which are of a primarily residential nature and in streets where pedestrian flows are particularly high, such as around shops or schools where they are not part
of any major through route. **Our ambition is to see local authorities introduce 20mph zones and limits into more residential streets.**

5.15 Of course, creating a supportive environment for active travel is not just an urban issue, rural areas will have their own issues for pedestrians and cyclists. Journey lengths might seem prohibitively long, or higher traffic speeds on rural roads might make pedestrians and cyclists feel more vulnerable. There are also opportunities in rural areas, however: **Rights of Way Improvement Plans can support more active travel through improving access for cyclists and pedestrians.**

5.16 In many areas of the country the pathways associated with green and blue corridors (i.e. canals and waterways) provide readily accessible safe and attractive walking and cycling routes. However, we believe that considerable scope exists to improve and extend this network. We therefore encourage local authorities, where appropriate, to consider their further development and the creation of new routes as part of their development planning process.

### Active travel for better health

> One in four people in England said they would become more active if they were advised to do so by a doctor or nurse.\(^{17}\) The average patient will visit their GP about four times a year, with 78% of people consulting their GP at least once during the year.\(^{18}\)

5.17 As both the largest single employer in Europe, and a provider and commissioner of services, the NHS can play a key role in promoting active travel. With walking and cycling being an easy way for many people to get more active and improve their health, PCTs and local transport teams should be working closely to ensure that local transport plans support local health objectives.

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\(^{17}\) Health Survey for England 2006.

\(^{18}\) [www.rcgp.org.uk/patient_information/what_is_general_practice.aspx](http://www.rcgp.org.uk/patient_information/what_is_general_practice.aspx)
Active travel in the NHS

Liverpool Primary Care Trust (PCT) and Liverpool City Council have signed a formal agreement to make Liverpool a Cycling City. The Cycling Alliance aims to improve quality of life and create a healthy, low carbon city for the future. The City partners now hope that others will join the alliance so that Merseyside councils and PCTs can work with businesses, universities and cultural and sporting agencies to bring renewed commitment to cycling. The agreement sets out to generate a 10% increase in trips made by bike before the end of March 2011. It aims to secure support from more than 100 organisations by the end of the city’s Year of Health and Wellbeing 2010.

Liverpool NHS Primary Care Trust and Liverpool & Sefton LIFTco are locating healthcare facilities according to pedestrian access. The equitable provision of healthcare facilities across the city followed a survey of residents that identified an optimum 15-minute maximum walking time to any health centre. A network of new treatment centres are being sited across the city within 15 minutes’ walk of every residential address. www.lshp.co.uk
Nottingham City PCT – promoting cycling for health

Nottingham PCT has been working closely with the local authority for many years to promote cycling, including initiatives aimed at NHS employees; work to influence the local transport plan; and more recently as one of Cycling England’s Cycling and Health Innovative Pilot Projects. The PCT project delivers a wide range of promotional activities in conjunction with Ridewise, a local cycle training company. These include cycle training for members of priority community groups; free loan bikes; promotional activities and offering free cycle training for NHS staff. The unique aspect of the project is that it enables NHS staff to refer people into the scheme.

Clients have been signposted to the scheme from a wide range of community health professionals including Health Trainers; Physical Activity Advisors; Exercise Referral Instructors; YMCA staff; Healthy Minorities team. The project has exceeded its two year training target in the first 11 months, and has introduced people to cycling from a wide range of backgrounds.

5.18 Under the Walk4Life banner, NHS Camden, together with Walk England, has produced five easy to follow walking maps that people can use to help them explore the area and get fit at the same time. The Active Steps programme in Sutton is an excellent example of how health and transport sectors can work together to deliver more active travel. DfT and Walk England have also collaborated to produce guidance on walking maps which can be found at: www.dft.gov.uk/pgr/sustainable/walking/maps.pdf
5.19 Think Feet First is a campaign launched by NHS London designed to inspire people to stop and think about how they make short journeys – in particular, whether journeys they normally make by car or public transport could be made on foot. Think Feet First was launched with a London-wide poster campaign highlighting how walking – even short distances – can benefit health. The campaign also worked in partnership with Natural England to provide Walking Ambassador road shows in a number of London boroughs highlighting opportunities for people to join 195 Think Feet First led walks. Further information is available at www.thinkfeetfirst.com
Active Steps: NHS Sutton and Merton, funded by Transport for London and delivered in partnership with Sutton Council

Only 10.7% of Sutton residents currently meet the government recommendation of 30 minutes of moderate physical activity five times a week. Active Steps is a groundbreaking initiative to increase the physical activity levels of Sutton residents, whilst reducing the number of short car trips.

Over a 12-week support programme service users can explore their ambivalence around their travel choices, discuss barriers to change, and agree goals using Motivational Interviewing with a trained NHS travel advisor.

Users are given a free support guide and pedometer to help them monitor their activity levels and achieve their goals. Local cycle and walking routes are promoted and each user is entitled to free cycle training, backed up by motivational text messages or postcards each week.

Although it is an intensive programme, the evidence is that Active Steps has worked-out of 1,085 residents engaged:

- 97% of service users report being more physically active.
- 60% report a permanent change to the way they travel.
- 85% feel generally healthier.
- 46% have lost weight.
- 55% report an improvement in mental wellbeing.

Active Steps is now being linked to the local NHS checks; a programme to identify those at greater risk of cardio-vascular disease and offer preventative interventions.

5.20 Local authorities can also promote mass participation events to get more people to try out walking and cycling. Many towns and cities in England and across Europe have joined in with In Town Without My Car Day. On 22 September every year, town centre streets close to cars and lorries, and open up for people to enjoy walking, cycling, street theatre, live music, dancing, public art and children’s play areas. A good practice guide has been produced by DfT and is available at: http://www.dft.gov.uk/pgr/sustainable/awareness/itwmc/intownwithoutmycargoodpracti5726
Walking, the natural choice for hospitals: community street audit

Royal Victoria Infirmary, Newcastle

The Newcastle Upon Tyne Hospitals NHS Foundation Trust wanted to review conditions for people arriving at the hospital on foot from key public transport interchanges as part of promoting walking through their travel plan.

Living Streets were commissioned to undertake a community street audit of walking routes to the Royal Victoria Infirmary from Newcastle city centre and the main rail and bus stations. A community street audit is a way of evaluating the quality of streets and public spaces from the viewpoint of users. Facilitated walkabouts were held at lunchtime and after work for hospital staff, visitors and local businesses and residents.

The findings of the audits were collated with recommendations and ideas to influence improvements for the walking routes to the RVI which will be considered by the Newcastle upon Tyne Hospitals NHS Foundation Trust and Newcastle City Council.

“We are committed to making our hospitals more accessible through our travel plan and making sure that patients and visitors to the RVI are able to follow well signposted and safe routes to the hospital particularly when accessing our services by public transport.”

David Malone, Green Transport and Staff Benefits Advisor

Working with the education sector and young people

If you want to make active travel a mainstream transport choice over the long-term, there is no better place to start than with young people. Travelling to school by car is a significant contributor to local congestion and carbon emissions, as well as a missed opportunity for healthy activity for pupils and staff. Indeed it is estimated that 16% of school carbon emissions stem from journeys to and from school by staff and pupils and travel on school business.
Walking to school

Measures to encourage more children to walk to school are an integral part of all school travel plans and there are also many other school based initiatives designed to encourage walking.

The Walk to School Campaign asks parents, pupils and teachers to think about their journey to and from school and the many benefits of making it on foot. Walk to School Week is an awareness raising week in May every year and is a great opportunity to encourage parents and children to give walking a go. This is also followed by an International Walk to School Month each Autumn. http://www.walktoschool.org.uk/

Walk once a Week (WoW) is a behaviour change programme run by Living Streets. It encourages parents and primary school pupils to walk to school at least once a week throughout the school year. Children can earn badges by walking once a week: the badges run from September to July and are designed by the children in a national competition, from which a theme for each year such as ‘Nature in the UK’ or ‘Animals’ is selected.

The WoW scheme has approximately 200,000 participants and is used by some local authorities to help in reaching Local Authority Agreement (LAA) targets linked to obesity and carbon reduction. An independent evaluation reported that at schools who promote and participate in WoW, 19% of children had started to walk because of the scheme. Other local authorities run other schemes that provide children with small rewards to encourage them to walk to school such as Stamp Stanley, Golden Boot Challenge, Go for Gold and Star Walkers.

DH is providing £800,000 to enable expansion of the scheme in new areas with a focus on parts of the country where overweight and obesity are particularly high.

5.22 As well as reducing local emissions and congestion, walking to school is an important opportunity for children to play and be active before school and engage them in their local communities and environments. It is also an easy, free way to form part of an active lifestyle.

5.23 Bike It is a partnership programme between Sustrans, schools, local authorities and local people to increase levels of cycling. It uses travel plans, school champions, training and marketing to create a lasting pro-cycling culture in schools. The results have been impressive, showing levels of cycling to school doubling, and fewer children being driven by car.
“We aim to encourage active travel as an essential component of a healthy lifestyle for all ages, and Bike It is a proven intervention to help children develop that habit of healthy travel.”

Adrian Dawson, Director of Public Health, Bournemouth and Poole Primary Care Trust

5.24 High quality training in how to walk and cycle safely puts people at less risk on our roads than those who have not had such training. Kerbcraft improves children’s skills and confidence when crossing roads, and Bikeability gives them the skills and confidence to use the road safely on foot and by bike. Local authorities should make training a core part of promoting safe, active travel.

5.25 The Government’s Play Strategy, published in 2008 by DCSF & DCMS, includes a commitment to ensure that children are able to travel to and from play areas in safety. All top-tier local authorities in England have received a share of £235m investment to deliver up to 3,500 new or improved play areas, plus 30 staffed adventure playgrounds or play parks, by 2011. To support this significant investment in play, the Government expects local authorities to take measures to improve the safety of children and young people walking or cycling independently around their local neighbourhoods, travelling to and from play areas. The Play Strategy and related documents are available at www.dcsf.gov.uk/play.”
Lancaster University Travel Plan: doubling student cycling in less than two years

The proportion of students cycling and walking to Lancaster University has almost doubled in less than two years according to Travel Plan surveys results from the University. Over ten per cent of students living off-campus now cycle to the University, up from just over five per cent 21 months ago. In the same period, the numbers of students walking to the University has also doubled from just over 3 per cent to over 6 per cent. The proportion of staff cycling to work is one of the highest in Lancashire at just over 13 per cent and fewer students and staff are now driving to the campus.

The survey findings reveal that almost a third of all postgraduate research students living off-campus are regularly cycling. Lancaster University Travel and Environment Co-ordinator, Philip Longton, said: “It is really encouraging to see more and more people taking up cycling. To have more postgraduate research students accessing the campus on bicycles rather than in cars as either drivers or passengers is a great achievement.” Overall, student car use dropped by 4.8% between February 2006 and November 2007.

Lancaster University has done a lot to encourage and enable travel by bicycle since the introduction of its Travel Plan in 2004. A combination of ‘carrot’ and ‘stick’ measures has been crucial to the success of student cycling doubling in less than two years. A restrictive student car parking policy was introduced in 2006, along with new secure bicycle parking facilities in its residences and a well-used signed University cycle route into the city centre. Also, the many benefits arising from Lancaster and Morecambe’s designation as a Cycling Demonstration Town since 2005 have also helped increase both student and staff cycling.
6. Monitoring and evaluation

6.1 Our vision is for more people walking and cycling more often, and more safely. We want this because of what it can do to support our wider objectives of promoting better public health, increasing accessibility and reducing congestion, and reducing emissions.

6.2 Overall we want to see a reversal of the long-term decline in levels of cycling and walking, and more people enabled and encouraged to incorporate active travel into their everyday lives. That would mean:

- more people accessing key services and destinations by active means;
- more people accessing public transport through active means;
- active travel contributing to more people meeting recommended physical activity levels; and
- where people are making active travel choices, they are doing so in greater safety.

6.3 So we will be monitoring the following for evidence that our strategy is succeeding:

- Walking: average trips undertaken and distance travelled per person per year, and mode share of trips.
- Cycling: average trips undertaken and distance travelled per person per year, and mode share of trips.
- Travel to work (main mode) mode share of walking and cycling.
- Travel to work (mixed modes) share which includes walking and cycling.
- Travel to school mode share.
- Cycle ownership.
- Public satisfaction with provision for walking and cycling.
- The proportion of the population walking or cycling for at least 30 minutes per month.
- Trends in active travel (of over 30 minute’s duration) in the Active People Survey.
6.4 And for evidence of progress on specific actions within the strategy, we will be monitoring:

- Take up of the Cycle to Work Guarantee.
- Mode share of walking and cycling to rail station.
- The numbers of cyclists killed or seriously injured in road traffic accidents, and the risk of death of pedestrians and cyclists.
- The proportion of year 6 children receiving bikeability training.

6.5 National indicators, however, are not always suitable for monitoring changes at a local level – indeed in the NTS cycling can only be estimated at a regional level, and walking at the sub-regional level. As most action is taken at a local level, it is also important that cycling and walking are monitored at the local level. Data on mode of travel to school is already collected annually as part of the School Census and gives a very detailed level of information on how children travel to school. However, even here, authorities need to work with schools to improve the standard of data collected so that maximum use can be made of this.

6.6 And ultimately, we want to see the link made between active travel and Local Area Agreements. We know that walking and cycling can contribute to a wide range of indicators, but in a world where resources are becoming increasingly stretched it is important that you have the information you need to make a robust case for investment. Careful monitoring and evaluation of walking and cycling programmes can help make this case.

6.7 It is important, therefore, that authorities develop a robust local monitoring and evaluation framework. This will help in both monitoring the delivery of the programme, but crucially also with demonstrating the impacts of the programme on wider corporate objectives. Going forward we will be learning lessons from the sustainable travel towns and cycling city and towns, which we will share with local authorities to help them evaluate their programmes.

Review

6.8 As part of the next spending review we will review our cycling and walking programmes, including the role and funding for Cycling England.
Further reading and information

**Cycling**
DfT website
http://www.dft.gov.uk/pgr/sustainable/cycling/

Government policy on cycling is found at:
A sustainable future for cycling (1 Mb)

The organisation which promotes cycling on behalf of DfT is Cycling England at
http://www.dft.gov.uk/cyclingengland/

A review of national policy for cycling is at:

Transport for London’s cycling pages can be found at:

**Walking**
DfT website
http://www.dft.gov.uk/pgr/sustainable/walking/

DETR (2000) Encouraging Walking: advice to local authorities:
http://www.dft.gov.uk/pgr/sustainable/walking/encouragingwalkingadvice5793
dto5793

DfT (2008) Walking Maps: Guidance and research on producing a walking map:

DfT (2004) Encouraging walking and cycling: Success stories:
http://www.dft.gov.uk/pgr/sustainable/walking/success/

**Cycle City and Towns**
The Government is funding 18 cycle city and towns from 2008/9 to 2010/11.
Information on the 18 cycle cities and towns is at:
http://www.dft.gov.uk/cyclingengland/cycling-cities-towns/
The successful results of the first round of cycle demonstration towns (2005/6–2007/8 is at: http://www.dft.gov.uk/pgr/regional/ltp/localtransportinitiatives/demotowns/

**Infrastructure**


Manual for streets (applicable to new developments) is at: http://www.dft.gov.uk/pgr/sustainable/manforstreets/?view=Standard

Local Transport Note 1/07 Guidance on traffic calming is at: http://www.dft.gov.uk/pgr/roads/tpm/ltnotes/pdfttn0107trafficcalm.pdf

Traffic Advisory Leaflets summarise research findings and give detailed guidance on specific elements of walking and cycling infrastructure: http://www.dft.gov.uk/pgr/roads/tpm/tal/


Sustrans publish a lot of useful documents and guidance at: http://www.sustrans.org.uk/resources/publications/information-sheets

**Local Transport Plans**

Information on Local Transport Plan policy is at http://www.dft.gov.uk/pgr/regional/ltp/

**Road safety**

The latest DfT policy is at: http://www.dft.gov.uk/pgr/roadsafety/roadsafetyconsultation/

Travel data is collected at http://www.dft.gov.uk/pgr/statistics/datatablespublications/personal/


Benefits of active travel
A number of sites collect evidence of the benefits of cycling and walking:
http://www.sustrans.org.uk/what-we-do/active-travel/139/the-evidence

Health
The Department of Health Physical Activity web pages can be found at: http://www.dh.gov.uk/en/publichealth/healthimprovement/physicalactivity/index.htm

Cycling England usefully collates the data at:

NICE (2008) Guidance on the promotion and creation of physical environments that support increased levels of physical activity:
http://www.nice.org.uk/Guidance/PH8

Cycle Touring Club collects health data at:

Information on the Health Impact Assessments can be found at:
http://hiagateway.org.uk/

European national strategies
This 2005 document reviews policies in other European countries:
http://www.internationaltransportforum.org/europe/ecmt/pubpdf/04Cycling.pdf

National Cycling and Walking organisations
British Cycling Federation is at http://new.britishcycling.org.uk/
Cycle Touring Club is at http://www.ctc.org.uk/
Sustrans is at http://www.sustrans.org.uk/
The National Byway is at http://www.thenationalbyway.org/
Living Streets is at http://www.livingstreets.org.uk/
Walk England is at http://www.walkengland.org.uk
Bibliography

2005 cycling bibliography at

2005 walking bibliography at

A very comprehensive research bibliography on cycling (with links to other bibliographies on sustainable travel and walking) is maintained at
http://planning.rudi.net/BIBS/SUSTRAV/REFS/04/04_UK__A_Z__.HTM