



**Economic and Social  
Council**

Distr.  
GENERAL

ECE/AC.21/SC/2007/8  
EUR/07/5068055/8  
2 February 2007

Original: ENGLISH

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**ECONOMIC COMMISSION FOR EUROPE**

**WORLD HEALTH ORGANIZATION  
REGIONAL OFFICE FOR EUROPE**

HIGH-LEVEL MEETING ON TRANSPORT,  
ENVIRONMENT AND HEALTH

Steering Committee on the Transport, Health and  
Environment Pan-European Programme

Fifth session  
Geneva, 16–17 April 2007  
Item 5 (a)(v) of the provisional agenda

**IMPLEMENTATION OF THE COMMITTEE'S WORK PROGRAMME**

**Progress reports and proposals for further action**

**Promotion of safe walking and cycling in urban areas**

Note by the secretariat

1. This note outlines the progress achieved and the further steps to be taken in the implementation of the project on "Promotion of safe walking and cycling in urban areas", taking into account the latest developments in this area.
2. At its fourth session, the Steering Committee of the Transport, Health and Environment Pan-European Programme (THE PEP) emphasized the need to further clarify the costs and benefits of promoting non-motorized transport and agreed on the proposed next steps outlined in the background document (ECE/AC.21/2006/6 – EUR/06/THEPEPST/6). The project is implemented by a Task Force of THE PEP in close collaboration with HEPA Europe (the

European Network for the Promotion of Health-Enhancing Physical Activity).<sup>1</sup> It aims to exchange and disseminate good practices of the countries in the region for promoting safe conditions for walking and cycling in urban areas, and to take stock of ongoing work to improve the assessment of health effects related to levels of cycling and walking and of the costs and benefits of promoting non-motorized transport.

3. At its fifth session, the Committee may wish to review the progress in the implementation of this activity and to provide guidance for further steps to be taken. In addition, delegations may wish to express their interest in supporting the further implementation of the project.

## I. PROGRESS IN THE PROJECT'S IMPLEMENTATION

### A. Case studies on collaboration between physical activity promotion and the transport sector: examples from European countries

4. This collection of practical examples is aimed at supporting Member States in the promotion of physical activity. For this part of the project, the Task Force was supported by the Institute for Social and Preventive Medicine (ISPM) of the University of Basel, which coordinated the collection and performed the analysis of the case studies. This activity is also part of the HEPA Europe work programme and has been supported by the Swiss Federal Office of Sports and the Swiss Federal Office of Public Health.

5. Members of the Task Force of THE PEP, as well as experts active in the promotion of health and physical activity, representatives of the transport and environment sectors and urban planners, were invited to report about the collaboration between relevant sectors in their countries. Case studies could consist of projects, programmes, policies or implementation strategies carried out at the local, regional or national level. Information on the case studies was collected via a questionnaire developed by the ISPM and available electronically to allow standardized reporting.

6. As of January 2006, sixty-seven potential case studies had been identified; after initial screening, 48 were included in the final analysis and report. The main findings are as follows:

(a) All the projects reported were from the western part of the WHO-Europe region or Israel;

(b) Most case studies were implemented at the city (local) level and targeted at the general population;

(c) About two thirds were "behaviour change campaigns" or "engineering or infrastructural measures combined with publicity or motivational measures". The remaining third mainly comprised "publicity or awareness-raising campaigns to promote active modes of transport", "research initiatives" and "policy documents describing strategies to promote active modes of transport";

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<sup>1</sup> Please see <http://www.euro.who.int/hepa> for additional information about the HEPA network and its activities.

(d) The four sectors most often involved were transport, health, local or subnational public authorities and the private sector;

(e) Twenty-three case studies (49%) recorded participation in promotional campaigns for physical activity or active travel (such as health walks or walking buses). Nine case studies (19%) collected data on a modal shift towards walking and cycling (solely assessing the situation before and after the shift), and 10 (21%) measured specific health outcomes such as the fitness and body fat values of participants (four projects involved before-versus-after assessment);

(f) Five case studies (10%) provided figures on total physical activity (two projects with a before-versus-after design and the others cross-sectional, i.e. carried out at a single point in time);

(g) About one third of the projects conducted before-versus-after assessment or longitudinal evaluation of changes in physical activity levels, health outcomes such as body fat values, or changes in travel modes, while the other projects carried out cross-sectional assessment;

(h) Case studies involving both the health and transport sectors were more likely to focus on engineering measures with motivational campaigns to increase physically active transport. Projects not involving both the health and transport sectors more often chose behaviour change campaigns;

(i) Information on physical activity levels was often not collected, as it was not considered in evaluating transport-related interventions. Thus, participation of experts from the health sector in planning and implementing interventions – particularly in land use, transport and urban planning – seems to be decisive in assessing effects on physical activity and other health outcomes. In addition, a standard set of indicators would be needed to support more informative evaluation of interventions;

7. A full description of the case studies is available through a CD-ROM enclosed with the final report that was produced. The information will also be made accessible through THE PEP Toolbox for Action on Transport, Environment and Health.

## **B. Development of recommended approaches to the inclusion of health effects related to physical activity in cost-benefit and cost-effectiveness analyses of investments in transport infrastructures and policies**

8. In line with the decision by the Steering Committee at its fourth session, this part of the project aims to address questions regarding the type and extent of health benefits which can be attained through investments in policies and initiatives promoting cycling and walking. Addressing these questions is important to: (a) support Member States in their assessments of the health and environmental impacts of alternative transport policy options; (b) promote the use of scientifically robust methodologies to carry out these assessments; and (c) provide a sound basis for advocating investments in sustainable transport options.

9. This part of the project is coordinated by the Karolinska Institute in Sweden and supported by the Swedish Expertise Fund and by Austrian Federal Ministry of Agriculture, Forestry, Environment and Water. The project takes stock of existing expertise on economic

valuations of the health impact of transport in the Nordic countries (e.g. as summarized in the report “CBA of Cycling”), as well as of relevant studies carried out in other countries.

10. The project is being developed in consultation with the Task Force together with other partners and institutions, such as the Swedish National Institute of Public Health, the Swedish Environmental Protection Agency, experts from HEPA Europe, and the Nordic Council, whose experts have participated in the development of methods and guidance for cost-benefit analysis of cycling infrastructure.

11. Progress achieved to date includes:

(a) Development of a draft review of existing approaches (including indicators, population groups considered and health effects considered) to the inclusion of health effects in cost-benefit analyses and appraisals of interventions and policies which may increase levels of cycling and walking (e.g. development of infrastructures for cyclists and pedestrians). This draft has been developed by a consultant in close collaboration with an advisory group of international experts, who assisted with:

- (i) Identification of relevant publications and reports;
- (ii) Analysis of the health effects (long- and short-term) as well as the indicators (e.g. of mortality and/or morbidity) and population groups included in the different studies completed to date, following a standardized procedure;
- (iii) Identification of available relative risk estimates for total and cause-specific mortality and morbidity to be used for physical activity in general; transport-related physical activity; cycling; and walking;
- (iv) Critical discussion of the identified indicators, health effects and relative risks, taking into account scientific accuracy and relevance as well as aspects of feasibility; and
- (v) Formulation of proposed recommendations for the further development of a harmonized methodology, with a critical evaluation of the approaches developed to date.

(b) Organization of an international workshop to discuss the draft review and recommendations and achieve scientific consensus on the health effects and relative risks that should be considered when conducting health impact assessments and economic valuations of projects which may have an impact on physical activity through cycling and walking, as well as on data sources and methods to be used for these analyses. The workshop will take place at the University of Graz (Austria) on 15–16 May 2006 and will be attended by members of the Task Force of THE PEP, advisory group members and other international experts. To maximize synergies and increase cost-effectiveness, the workshop will be held back to back with the third annual meeting of HEPA Europe (16–18 May 2007), in which a number of leading experts will participate. The workshop report will summarize the methodological recommendations made by the meeting, presenting them in a way that supports their practical application to case studies.

### III. MAJOR RECENT DEVELOPMENTS RELEVANT FOR THE PROJECT'S IMPLEMENTATION

#### A. Outcomes of the Ministerial Conference on Counteracting Obesity (Istanbul, 15–17 November 2006)<sup>2</sup>

12. In response to growing concerns about the obesity epidemic, WHO Europe organized a Ministerial Conference on counteracting obesity in Istanbul on 15–17 November 2006. The conference was hosted by the Government of Turkey and supported by the European Commission.<sup>3</sup> The conference aimed to raise awareness, promote political support and increase international collaboration in the fight against obesity, and to place obesity high on public health and political agendas in the region. It was attended by 500 participants (25% from sectors other than health) from 48 member States and 25 ministers and 40 deputy ministers/secretaries of state. Also represented were the European Commission, the Food and Agriculture Organization, the Nordic Council of Ministers, the World Bank, the Council of Europe, the International Labour Organization, the European Platform on Diet and Physical Activity, experts and NGOs.

13. The main outcome of the conference was the adoption of a European Charter on Counteracting Obesity,<sup>4</sup> which was negotiated through a series of preparatory meetings. These included an intersectoral consultation on promoting physical activity for health which took place on 9–10 May 2006 in Ljubljana and was attended by representatives from government sectors such as health, sport, education, transport and urban planning in 28 member States, invited experts as well as representatives from Slovenia.

14. The Charter acknowledges the importance of physical activity, highlighting links with relevant processes such as THE PEP and CEHAPE;<sup>5</sup> society's responsibility to create favourable conditions for physical activity; the role of other sectors at the national and local levels; the need to address inequalities and vulnerable groups; the importance of using different tools and instruments for promoting physical activity (such as health and environmental impact assessments; regulations to support the safety of pedestrians and cyclists; incentives and fiscal measures; and information and awareness-raising campaigns). In addition, the Charter highlights the need to develop operational guidelines for promoting physical activity in everyday life and improving surveillance and assessment of interventions' effectiveness. These aspects related to physical activity promotion were further discussed in the working paper "Promoting physical activity for health – a framework for action in the WHO European region: steps towards a more physically active Europe",<sup>6</sup> also available in French, German and Russian.

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<sup>2</sup> More information on the Conference can be found at <http://www.euro.who.int/obesity/conference2006>.

<sup>3</sup> In Europe, the prevalence of obesity ranges from 5% to 20% in men and from 5% up to 30% in women, with almost 400 million adults in the region estimated to be overweight and about 130 million to be obese. (see <http://www.euro.who.int/document/mediacentre/fs1305e.pdf>)

<sup>4</sup> The European Charter on Counteracting Obesity is available at <http://www.euro.who.int/Document/E89567.pdf>.

<sup>5</sup> Children's Environment and Health Action Plan for Europe.

<sup>6</sup> [http://www.euro.who.int/Document/NUT/Instanbul\\_conf\\_edoc10.pdf](http://www.euro.who.int/Document/NUT/Instanbul_conf_edoc10.pdf)

15. The Conference also provided the venue for launching two new publications which were developed with input from HEPA Europe and are available in English and Russian: *Physical Activity and Health in Europe: Evidence for Action*<sup>7</sup> and *Promoting Physical Activity and Active Living in Urban Environments: The Role of Local Governments: The Solid Facts*.<sup>8</sup>

#### **B. International inventory of documents on physical activity promotion<sup>9</sup>**

16. This inventory is being developed as part of the work programme of HEPA Europe to provide member States with easily accessible information on promoting physical activity and disseminate existing experiences to support policy developments.

17. The inventory contains policy documents, approaches and targets related to the promotion of physical activity that are available from countries across and outside the WHO European Region. They reflect policy initiatives undertaken at different administrative levels (national, subnational and local) and by different sectors involved in the promotion of physical activity, such as health promotion, sport, transport, environment and education.

18. As of October 2006, a total of 275 documents, mostly (about 75%) of national scope, had been retrieved. Of these, most are on physical activity and health promotion or on physical activity and transport, and a few are about physical activity and sports or the environment. The same pattern applies for documents with local scope, which mostly concern physical activity and transport. The online inventory is focusing initially on the identification of national policy documents on promoting physical activity. Information can be viewed and searched on a country basis or in a summary table. The inventory will also be made accessible through the Toolbox and the Clearing House of THE PEP.

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<sup>7</sup> [http://www.euro.who.int/InformationSources/Publications/Catalogue/20061115\\_2](http://www.euro.who.int/InformationSources/Publications/Catalogue/20061115_2)

<sup>8</sup> [http://www.euro.who.int/InformationSources/Publications/Catalogue/20061115\\_1](http://www.euro.who.int/InformationSources/Publications/Catalogue/20061115_1)

<sup>9</sup> [http://www.euro.who.int/hepa/projects/20060222\\_1](http://www.euro.who.int/hepa/projects/20060222_1)