Public Health and Equity

Promote environmental justice and equity principles in transportation policy

Transportation decisions affect our individual lives, economy and health. Every day, diverse populations are impacted by traffic fatalities, injuries and other negative health impacts as a result of poor and inequitable transportation decisions made in their communities. For example:

- Older populations are over-represented in intersection fatalities by a factor of more than 2-to-1.1
- Twelve percent of the bicyclists killed in traffic crashes in 2008 were between 5 and 15 years old.²
- Hispanic pedestrians between the ages of 21 and 29 are traditionally overrepresented in traffic fatalities.³

Who is Impacted? How?

An equitable transportation system is one that allows its users equal opportunity in mobility, independent of age, ability, income or race. Equitable funding for transportation projects also should exist across all modes of surface transportation; roadway construction has been funded at much higher levels than construction in other modes (e.g., transit, walking, cycling) for many decades.

For national safety and public health reasons, transportation equity also should be provided to all users. Transportation-disadvantaged populations (i.e., those who cannot obtain their own transportation) include large subsets of the U.S. population, such as low-income persons, the elderly, persons with disabilities, the carless, racial and ethnic minorities and those with limited English proficiency.

All of these groups have vastly unmet transportation needs. As national demographics change in the coming decades, so will the groups who are impacted negatively by poor transportation decisions.

Intersection of Public Health, Equity and Transportation

Aside from the disparities in the numbers of traffic fatalities and injuries, other factors disproportionately contribute to poor health in transportation-disadvantaged communities. Limited opportunities for physical activity, higher exposure to poor air quality, higher incidences of adult and childhood obesity and greater prevalence of asthma and cardiovascular disease are a few of the inequities enabled by poor transportation policies. Results show that:

- Students in schools that are close to major highways have elevated occurrences of respiratory distress;
 people living within 300 meters of major highways are more likely to have asthma, leukemia and cardiovascular disease.⁴
- Fast-moving traffic on highways literally may divide communities, especially those with elderly and disabled citizens, and this isolation is associated with higher mortality and morbidity in the elderly.⁵
- Rural populations have disproportionately high injury mortality rates, where much of this increase is related to motor vehicle crashes.⁶
- Motor vehicle accidents are the leading cause of death for America's teenagers. Fatalities as percentages of all motor vehicle traffic fatalities have been highest for African American children in the 4–15 age group. 8

Actions Needed

The reauthorization of the federal surface transportation bill in the coming year presents the nation with an opportunity to reinvent its transportation system to better promote health, safety and equity across vast regions, whether urban, suburban, or rural.

APHA Supports

APHA is committed to promoting sound public health decision-making as well as environmental justice and equity principles in transportation policy, which will help to ensure that all citizens benefit from a clean, fair, safe and healthy environment.

Sources

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