WALKING AND CYCLING AS A GARANTEE FOR HEALTH AND WELL-BYING: CALL TO ACTION IN GEORGIA

Manana Juruli, Inga Gvineria, N. Makhviladze Institute of Labour Medicine and Ecology
Nana Gabriadze, National Center of Diseases Control and Public Health

THE PEP Workshop on Safe and Healthy Walking and Cycling in Urban Areas
30 Sept- 1 Oct 2010, Batumi, Georgia
INTRODUCTION

• Increase in physical inactivity rates over 30 years.
• Increased risk of chronic diseases and health conditions.
• WHO: leading causes of disease and disability associated with physical inactivity
  – Coronary Heart Disease (CHD)
  – Strokes
  – Obesity
  – Type II diabetes
  – Hypertension
  – Colorectal cancer
  – Stress, anxiety
  – Osteo-arthritis, osteoporosis and low back pain
KNOWN FACTS

• Researchers identify linkages between active travel and public health.
• Walking and cycling for transport are linked to better health.
• Walking and cycling for transport are directly related to improved health in older adults.
WHAT KNOWN IN GEORGIA

• We have not data on relationship of physical activity and health status in Georgia.
• We can show statistical data of the prevalence of several chronic diseases.
• There is noted the tendency of the increasing in these illnesses.
In recent years, through the reforms implemented in the country, the attention was drawn towards the improvement of social field especially towards the security of safe environment for human health. In this regard numerous changes were initiated in structures of executive government and legislation.

- The Law of Georgia on Licenses and Permits.
- The Law of Georgia on Local Self-Government.
- Norms and technical regulations on safe environment for public health are determined by the Ministry of Labour, Health and Social Affairs of Georgia.
Geogian Ministry of Environment and Natural Resources ensures:

a) elaboration of integrated state policy and its implementation in the area of state regulation of safe environment in accordance with the principles of sustainable development and management of natural resources;

b) Protection of environment from negative physically factors, that may impact public health.

c) Setting of state system: planning, monitoring of physically factors and implementing of measures regarding limitations.

d) Local authority of cities and regions provides the safe environment for health of population
Summary of selected health effects to be considered for economic valuations of transport-related interventions and policies in adults

<table>
<thead>
<tr>
<th>Transport-related exposure</th>
<th>Selected health end-point</th>
</tr>
</thead>
<tbody>
<tr>
<td>Road traffic noise</td>
<td>Severe annoyance, Severe sleep disturbance</td>
</tr>
<tr>
<td></td>
<td>Myocardial infarction*</td>
</tr>
<tr>
<td>Traffic-related air pollution</td>
<td>Mortality: all-cause, cardiovascular/pulmonary and respiratory+</td>
</tr>
<tr>
<td></td>
<td>Morbidity: hospital admissions (cardiac and respiratory), lower respiratory symptoms*,</td>
</tr>
<tr>
<td></td>
<td>chronic bronchitis*, restricted activity days*, working-loss days*</td>
</tr>
<tr>
<td>Road crashes</td>
<td>Fatalities, Non-fatal injuries</td>
</tr>
<tr>
<td>Transport-related physical activity</td>
<td>Mortality: all-cause, CHD, stroke, type II diabetes, colon/breast cancer*</td>
</tr>
<tr>
<td></td>
<td>Morbidity: CHD, stroke, type II diabetes, colon/breast cancer*</td>
</tr>
<tr>
<td></td>
<td>* for indicative estimates only</td>
</tr>
<tr>
<td></td>
<td>+ for short-term exposure only</td>
</tr>
</tbody>
</table>
Summary of selected health effects to be considered for economic valuations of transport-related interventions and policies in adults

<table>
<thead>
<tr>
<th>Transport-related exposure</th>
<th>Selected health end-point</th>
</tr>
</thead>
<tbody>
<tr>
<td>Road traffic noise</td>
<td>NA</td>
</tr>
<tr>
<td>Traffic-related air pollution</td>
<td>Mortality: all-cause</td>
</tr>
<tr>
<td></td>
<td>Lower respiratory symptoms*</td>
</tr>
<tr>
<td></td>
<td>Medication use*</td>
</tr>
<tr>
<td>Road crashes</td>
<td>Fatal injuries</td>
</tr>
<tr>
<td></td>
<td>Non-fatal injuries</td>
</tr>
<tr>
<td>Transport-related physical activity</td>
<td>NA</td>
</tr>
</tbody>
</table>

* for indicative estimates only
NA: not available
Распространение злокачественных новообразований среди детского (включительно 14 лет) населения г. Тбилиси (2004 г.)
Распространение заболеваний дыхательных органов среди детского (включительно 14 лет) населения г. Тбилиси (2004 г.)
Cerebrovascular diseases, rates per 100000 population, Georgia, 2000-2009
Incidence of diseases of the respiratory system, Georgia 2000-2009
Diabetes mellitus morbidity, rates per 100000 population, Georgia, 2000-2009
Cost of chronic diseases related to physical inactivity

1. Health care costs for preventative, diagnostic, and treatment services related to these chronic conditions.

2. Costs associated with the value of lost wages by people unable to work because of illness and disability, as well as the value of future earnings lost by premature death.
Action Points for Policymakers

• Create the appropriate conditions for safe walking and cycling while paying particular attention to the needs of vulnerable road users (including children and elderly people).

• Establish effective multisectoral collaboration at different levels in policy-making involving the health, transport, land-use and environment sectors, including the close involvement of stakeholders.

• Elaborate and Finance programs on benefits of physical activity to health
Action Points for Policymakers

• Public awareness campaign on health benefits from walking and cycling should be carried out.
• Courses for older cyclists to encourage safe cycling and to improve confidence and the continuity of the cycling habit should be running.
How to start physically active life?

• Each person must understand the value of physical activity for his or her health and well-being and commit to a lifestyle that is truly active.

• To avoid soreness and injury, individuals contemplating an increase in physical activity should start out slowly and gradually build up to the desired amount to give the body time to adjust.

• People with chronic health problems, such as heart disease, diabetes, or obesity, or who are at high risk for these problems should first consult a physician before beginning a new program of physical activity.
How to start physically active life?

Also, **men** over age **40** and **women** over age **50** who plan to begin a new **vigorous** physical activity program **should consult a physician** first to be sure they do not have heart disease or other health problems.
Conclusion

• Physical inactivity is a serious, nationwide problem.

• Its scope poses a public health challenge for reducing the national burden of unnecessary illness and premature death.

• The health care sector can take both leading and supporting role in reducing chronic diseases and premature death and promoting physical activity for all citizens and to seek out partnership that will enhance opportunities for active living.
Lessons from Pruhonice, Czech Republic, 2009
Thank you for your attention