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Presentation of the Vienna declaration
“Building forward better by transforming to new, clean, safe, healthy and inclusive mobility and transport”

Facts and figures on the Transport, Health and Environment Pan-European Programme

Draft annex I to the draft declaration: Key facts and figures on transport, health and environment

Revision

Submitted by the Netherlands*

Summary

At its seventeenth session (Geneva, 21–23 October 2019), the Steering Committee of the Transport, Health and Environment Pan-European Programme (THE PEP) supported the continuation of the preparation of a brochure on the major topics related to transport, health and environment as one of the outcomes of the Fifth High-level Meeting on Transport, Health and Environment. It emphasized that the brochure should be short, visually attractive and easily understandable. The Netherlands took the lead in the preparation of the brochure (ECE/AC.21/SC/2019/2–EUPCR1814179/2.1/THE PEP SC/2, para. 48).

At an extraordinary meeting of THE PEP (Geneva (online), 22 April 2020), it was agreed that the brochure would also include elements on the impact of the coronavirus disease (COVID-19) pandemic on transport, health and environment.

Delegates from the Netherlands and its National Institute for Public Health and the Environment presented an annotated outline of the brochure at the thirty-seventh meeting of the Bureau of THE PEP Steering Committee (online, 29 June 2020) and at a preparatory

*The document has been submitted with a later slotting due to negotiations having continued until the document deadline.
meeting to the Fifth High-level Meeting on Transport, Health and Environment (Geneva (online), 30 June 2020).

At its eighteenth session (online, 25–27 November 2020), the Steering Committee decided that annex I to the draft declaration, on challenges, opportunities and vision, would be based on the brochure and would cover the main facts and messages.

The present document is the outcome of the final discussions that took place at the preparatory meeting to the Fifth High-level Meeting on Transport, Health and Environment (online, 2 March 2021).

The High-level Meeting is invited to adopt draft annex I to the Vienna declaration.

Key facts and figures on transport, health and environment

1. The present annex highlights key facts and figures to provide a solid basis for member States of the United Nations Economic Commission for Europe (ECE) and World Health Organization (WHO) European region to support their efforts in advancing the transport system in their own countries for the better and to accelerate the transformation towards sustainable transport and mobility, building forward based on an “Avoid–Shift–Improve” strategy in mobility and transport policies.

2. Despite the technological progress made, current transport system and mobility patterns remain unsustainable. Traffic is still the source of several challenges in many countries, while mobility and transport play an essential role in our societies and economies. The sector provides access to jobs, education, services, amenities and leisure, while contributing to economic growth, jobs and trade. At the same time, it has a growing impact on the environment and human health.

3. THE PEP builds its objectives, strategies and actions on the latest scientific evidence and data available by analysing and highlighting the current state of mobility- and transport-related environmental and health effects in the region. This information should serve as a starting point for the further transformation of the sector towards zero emissions, health promoting mobility and safe and efficient transport in the decade to come. There is an urgent need for this transformation, as global increases in population, overall welfare and trade are expected to induce growing volumes of transport and mobility.

4. Across the ECE and WHO European region, motorized vehicles continue to play a significant role in transport. Considerable differences exist across the region but also between urban areas, where the share of trips carried out by walking, cycling and in public transport is increasing, and rural areas, where the car is still dominant and, all too often, no multimodal mobility option is provided.

5. Due to the COVID-19 pandemic, contrasting trends can be observed. On the one hand, rapid integration of new digital services may lead to less transport and the modal share of active mobility has increased. On the other hand, public transport has come under pressure and suffered significant decreases in passenger numbers and modal share.

6. Traffic-related air pollution, noise and road traffic accidents significantly contribute to the disease burden in the region, with a disproportionate burden concentrated in certain geographic areas and among less affluent social groups. Cars and related infrastructure such as parking spaces use up a large amount of the already very limited space available in urban areas.

7. Emissions of the main air pollutants have declined in recent decades, resulting in generally improved air quality. However, a large proportion of the European urban population remains exposed to levels of air pollution that exceed WHO Air Quality Guidelines. This makes air pollution the single largest environmental risk in Europe. For the whole of the European region, WHO estimates that 509,000 premature deaths per year are attributable to ambient air pollution, measured as particulate matter of 2.5 microns or less in aerodynamic diameter (PM$_{2.5}$) in 2016. Another pollutant of concern typically associated
with vehicle exhaust emissions is nitrogen dioxide (NO$_2$). The European Environment Agency estimates that 417,000 premature deaths and over 4.8 million years of life lost are attributable every year to PM$_{2.5}$, while 55,000 premature deaths and 624,000 years of life lost are attributable to NO$_2$ based on data from 2018 covering 41 countries. Policies to address transport-related air pollution should focus not only on limiting exhaust emissions, but also on reducing non-exhaust emissions (such as tyre and brake abrasion), which are also a significant cause of air pollution mostly through the production of particles.\(^1\)

8. At least 20 per cent of the inhabitants of the ECE and WHO European region live in areas with road traffic noise levels that are harmful to health. In urban areas in most countries, this figure exceeds 50 per cent.

9. More than 110,000 people are killed on the roads every year in the ECE and WHO European region. On average, this means that one person dies every five minutes. Millions more are seriously injured in road accidents. Road traffic injuries are the number one cause of death globally among young people aged between 5 and 29 years.

10. In addition, road transport is responsible for about a quarter of energy-related greenhouse gas emissions, thus contributing to climate change and global temperature rise.

11. Car dependency, restricted use of public space and lack of safety for cyclists and pedestrians contribute to physical inactivity and to a sedentary lifestyle, which increase the risk of non-communicable diseases and obesity. Physical inactivity is estimated to cause about 1 million deaths each year in the WHO European region alone. Obesity also causes approximately 1 million deaths each year. However, physical activity, for example cycling or walking, has very important health benefits.

12. The external costs of road transport are not reflected in current market prices. The total bill for traffic congestion, pollution and accidents, for example, has been estimated at €502 billion per year for States members of the European Union alone. The benefits of a shift towards more active mobility and public transport arise mainly from increased life expectancy, increased productivity and lower health-care costs related to non-communicable diseases. This shows that there is a strong case for investing in and promoting walking and cycling in cities and beyond.

13. Inequalities related to transport and urban sprawl can be found in exposure levels and negative health impacts from air pollution, noise and road safety hazards. Furthermore, the benefits from transport are also unequally distributed. Not all socioeconomic groups have equal access to healthy transportation, public transport networks and recreational or green areas.

14. The conditions and circumstances in which people live determine their state of health and level of physical activity. The settings in which people live (cities, workplaces, schools, etc.) should make healthy choices the easiest ones: active transport (walking and cycling) in this case.

15. Countries differ in economic and sociocultural circumstances, population density, local climate, geography and topography. These differences need to be taken into account when developing tailor-made approaches and solutions for the challenges posed by transport at the regional, national and local levels.

16. To allow for effective monitoring of the impacts of transport, harmonized data on transport, environment and health is crucial. There are significant gaps in data availability and quality, which need to be filled for a better understanding and comparison of data between countries.

17. Transforming the transport and mobility sector requires a multidisciplinary approach. Therefore, collaboration between decision-makers and experts in transport, environment, health, spatial planning and economy is crucial when designing transport-related policies that deliver benefits to environment, health and climate simultaneously. Moreover, international,

\(^1\) This paragraph has been replaced at the request of the Netherlands to provide more comprehensive information.
cross-sectoral and multilevel (countries, regions and cities) cooperation is needed to drive the change to sustainable, environmentally friendly and healthy transport.