

Air pollution and cycling

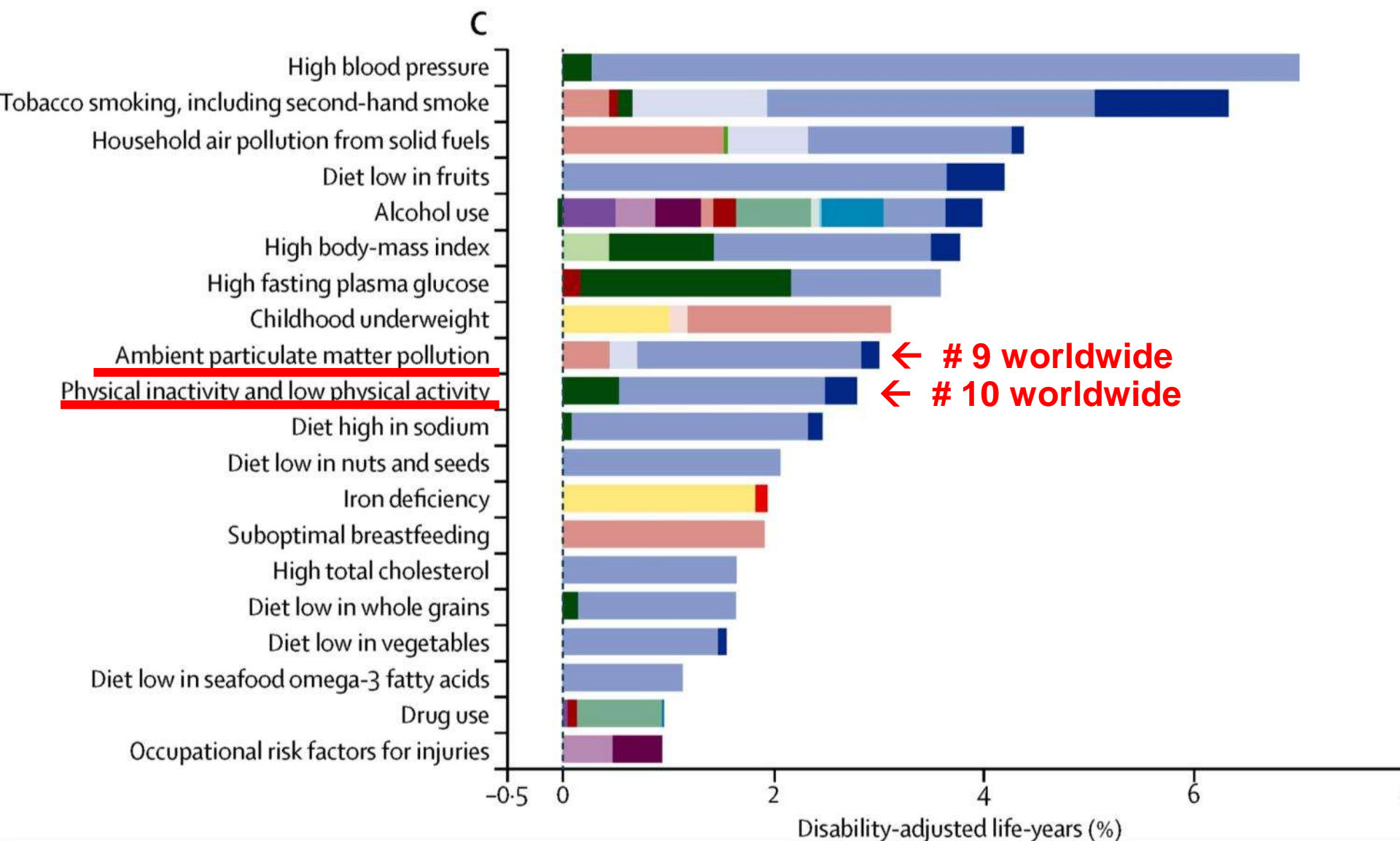
Audrey de Nazelle

Cycling towards a better Enfield: Health, Business and Travel

8th April 2016

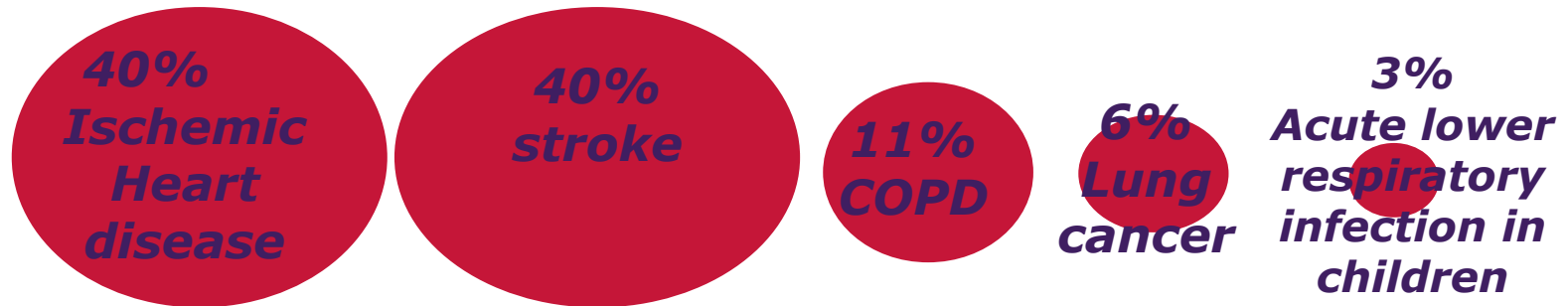
Enfield, UK

Global Burden of Disease 2010: top risk factors



Ambient air pollution health effects

- More than 3 million deaths/year (particulate matter and ozone)



- But also:
 - low birth weight and preterm birth
 - cognitive development
 - autism
 - diabetes
 - obesity

UK

UK (PM2.5):

- 29 000 premature deaths,
- average loss in life expectancy 6 months.

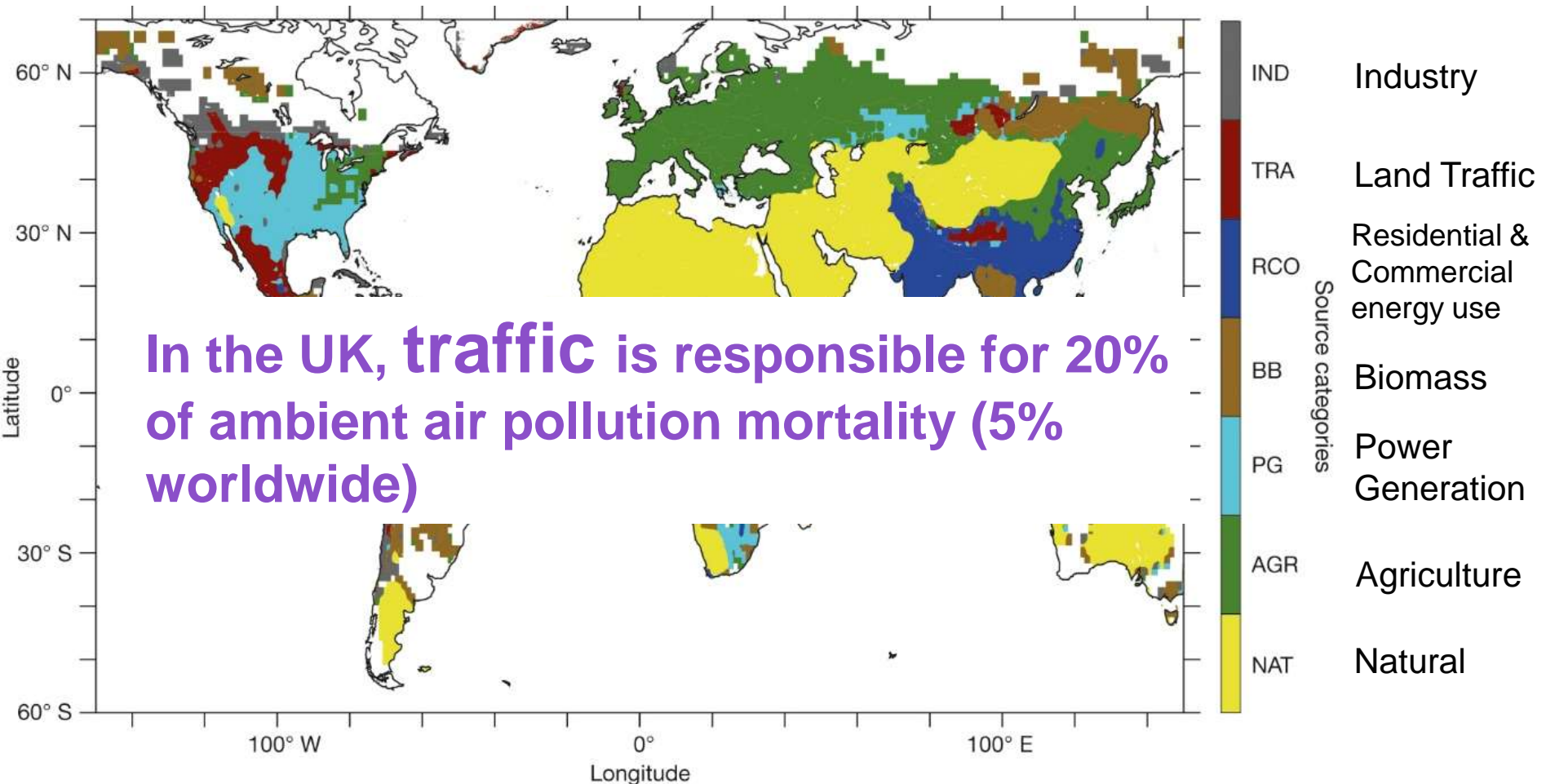
London:

- Around 9500 deaths per year from both PM2.5 and NO2 (assuming 30% overlap, 3500 deaths from PM2.5, 5900 from NO2)

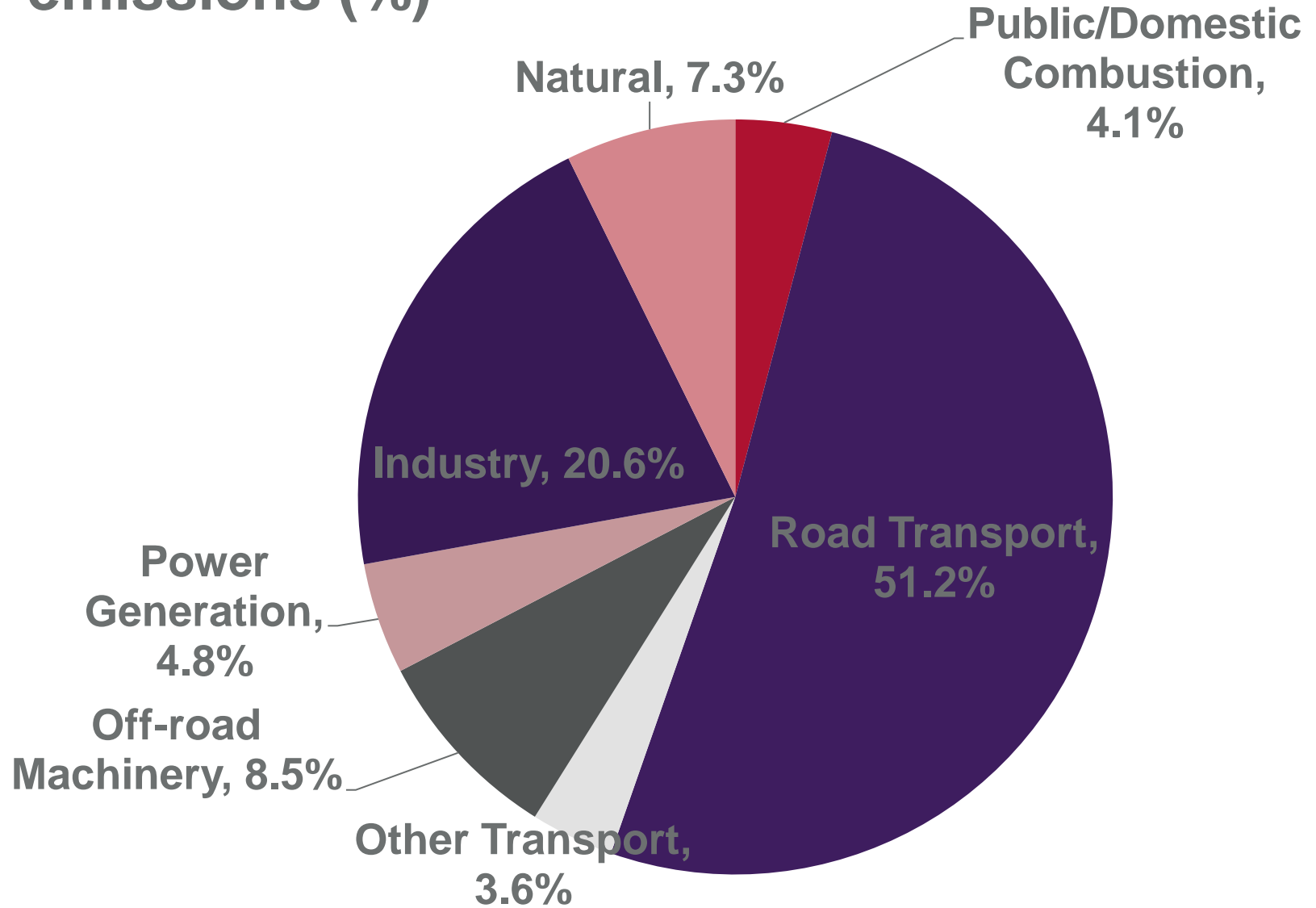
Enfield:

- 138 deaths (1944 years of life lost) from PM2.5
- 212 deaths (2999 years of life lost) from NO2 (assuming 30% overlap)

Source categories responsible for the largest impact on mortality linked to outdoor air pollution in 2010



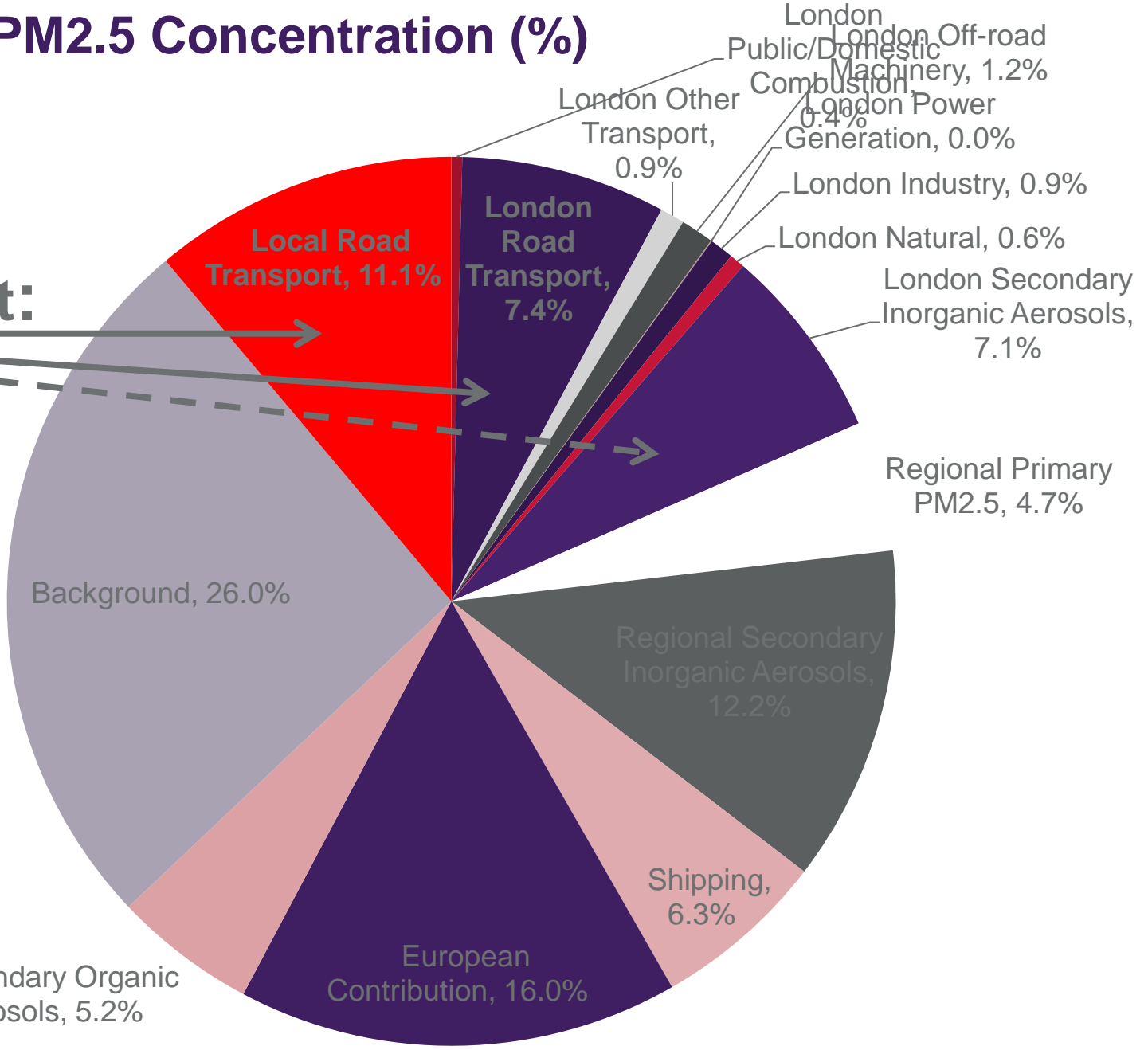
Greater London PM2.5 emissions (%)



Source: Tim Oxley

Roadside PM2.5 Concentration (%)

**Road
Transport:
<25%**



What could be the effect of cycling schemes on air pollution?

- Could lead to an overall reductions in air pollution, but this is difficult to prove
- Examples of rigorously evaluated impacts of interventions on air pollution are scarce
- Even ambitious large-scale policies are difficult to evaluate

→ examples...

- Car free sundays in Mestre (Italy): no effect on air quality (Masiol et al. 2014)
- Car free day in Paris: 40% reduction in areas where cars were banned (Airparif)



London Congestion Charging Scheme

- Introduced in February 2003 (22km²)
- Study measured air pollution 2001-2004 in affected and control sites, at background sites:
 - 12% decrease in PM10
 - 10 to 25 % decrease in NO_x,
 - 2 to 20% increase in NO₂

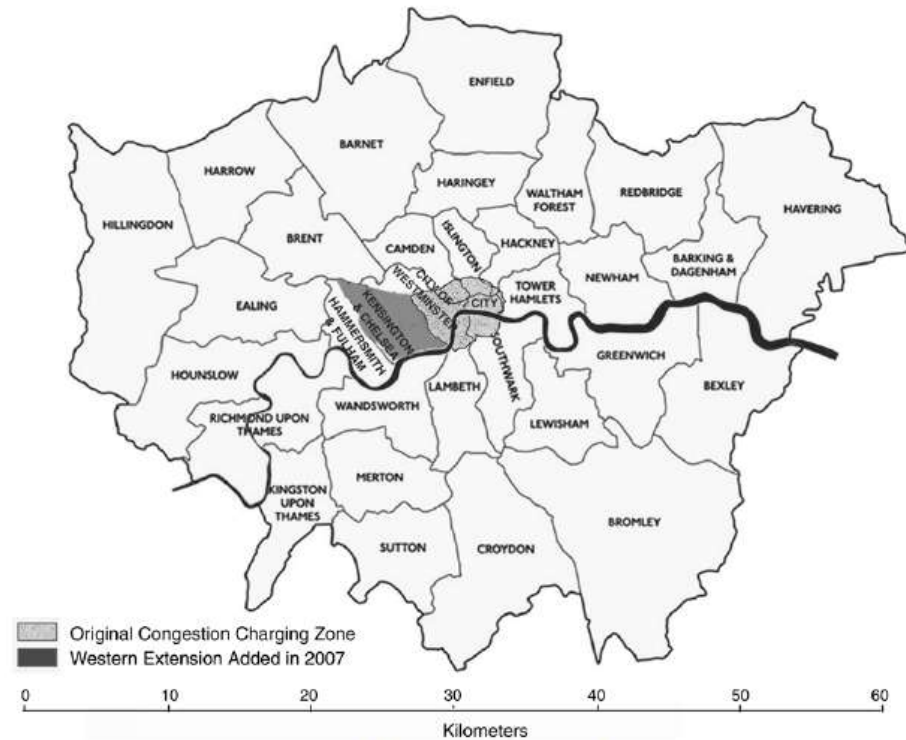


Figure 2. Relationship of the CCZ to Greater London. (Map includes the Western Extension, which was introduced in 2007.) Adapted with permission from Transport for London 2006.

Difficulties in attributing changes in air pollution:

Weather

Construction

Increase in diesel-powered buses and taxis

Other trends and changes

Number and location of air quality monitors

Expected reductions from local level schemes necessarily relatively small.

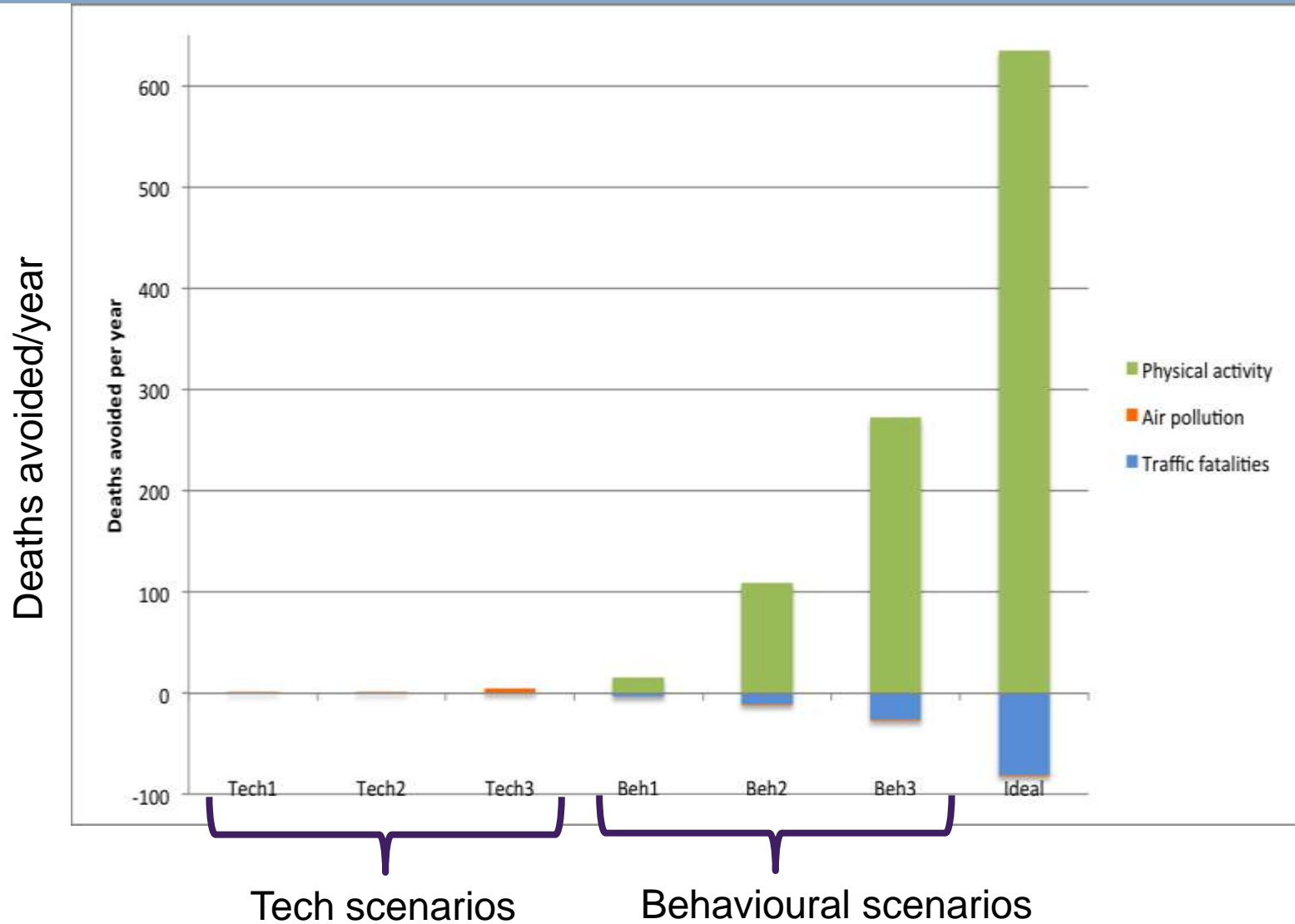
Changes in air pollution and deaths/year for transport scenarios in Barcelona

scenario	PM2.5 concentration % reduction	
20% in-city car trip reduction, all replaced by biking	0.32	
20% in-out city car trip reduction, 20% replaced by biking	0.58	

Tech vs behaviour

Scenario	Technological and behavioural changes
Tech 1	All double-deck buses to hybrid; all single deck buses to zero emission; all taxis to Euro 6 (diesel black cabs)
Tech 2	Tech 1 + Ultra Low Emission Zone (ULEZ) implemented
Tech 3	Tech 2 + ban diesel cars completely from London
Behaviour 1	Cycle superhighway (all reduced car traffic to bicycles) – reduce traffic flow 10%
Behaviour 2	Increased active travel (5% car trips to cycling; 5% car trips to walking) and public transport (10% car trips to bus) = 20% of car trips replaced
Behaviour 3	Most increased active travel (25% car trips to cycling; 15% car trips to walking) and public transport (10% car trips to bus) = 50% of car trips replaced
Combined ideal	No private cars in London (30% car trips to bus, all of which are zero emission; 50% car trips to cycle; 20% car trips to walking) and all black cabs zero emission, including London wide ULEZ standards for remaining vehicles

Tech vs behaviour



Current major public health challenges

- Urban air pollution
- The global physical inactivity pandemic
- Traffic injuries (8th cause of death worldwide, 6 in Western Eu)
- Climate change



→ International calls for multilevel approaches: planning cities for health

→ Active travel policies

Cities planning to go (partly) car-free

OSLO



MILAN



MADRID



DUBLIN



HAMBOURG



PARIS



Effectiveness and health impacts of transport policies: The PASTA project

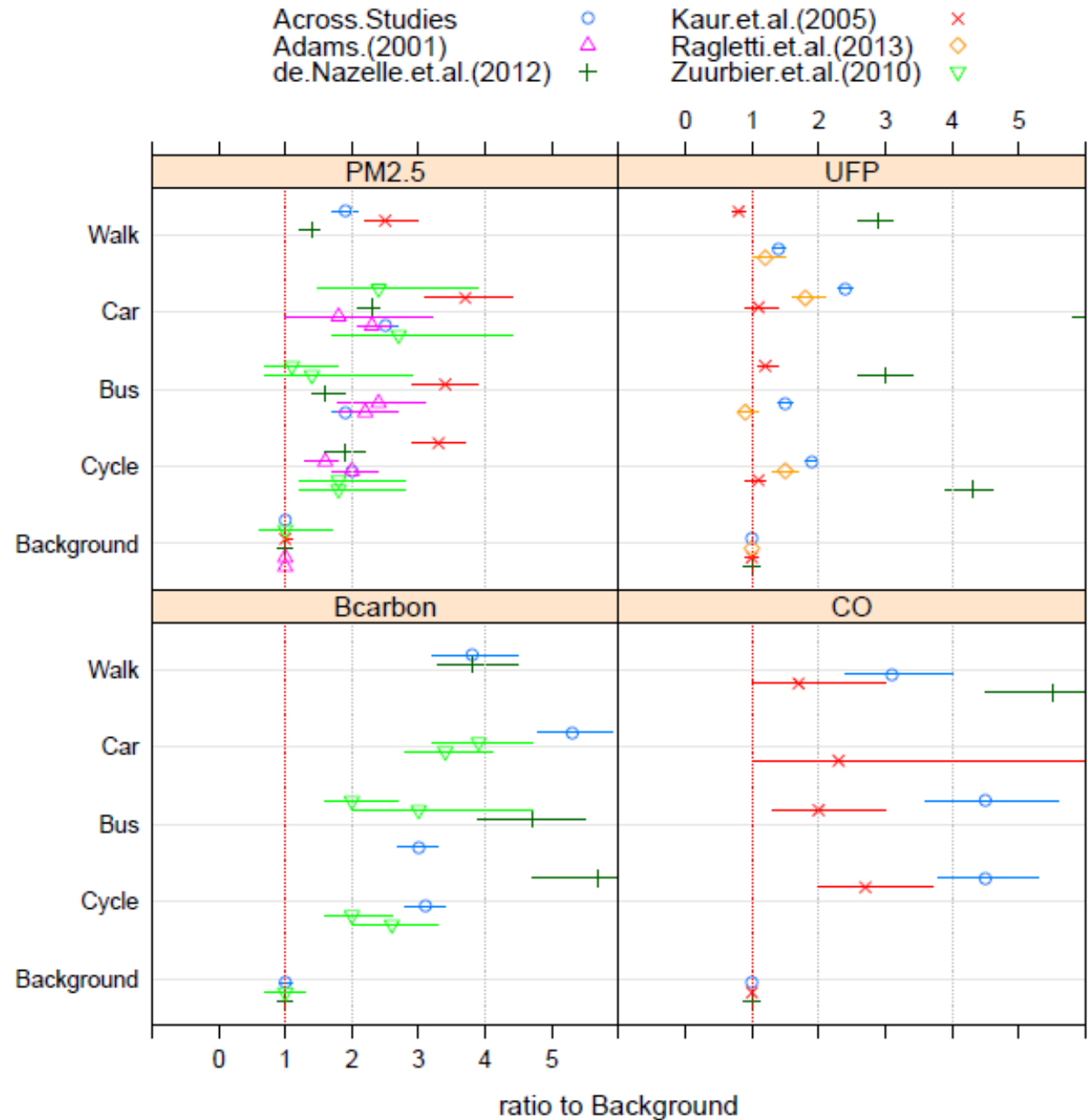


PHYSICAL ACTIVITY THROUGH
SUSTAINABLE TRANSPORT APPROACHES

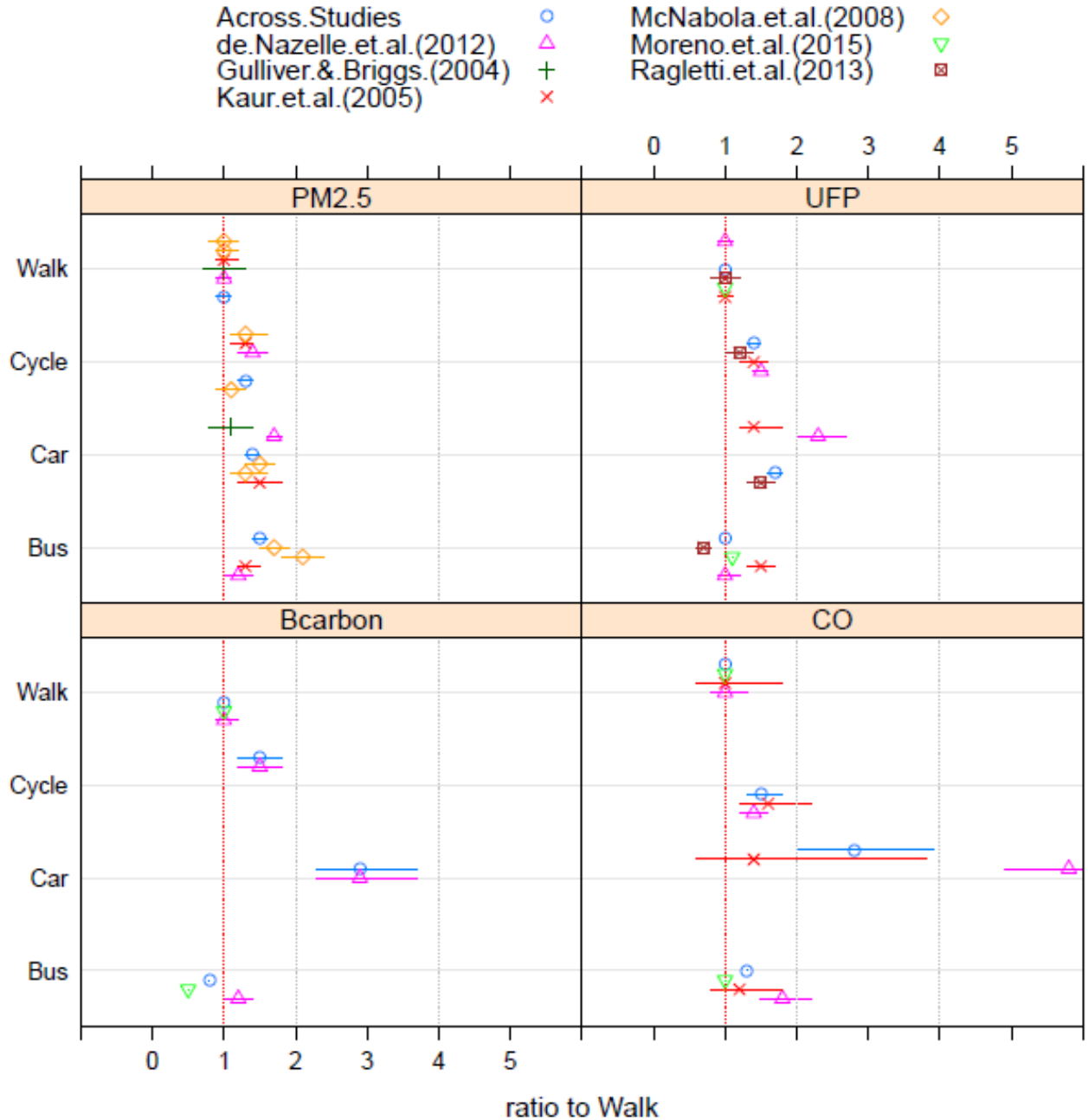
**YOU CAN
PARTICIPATE!**
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Extra slides

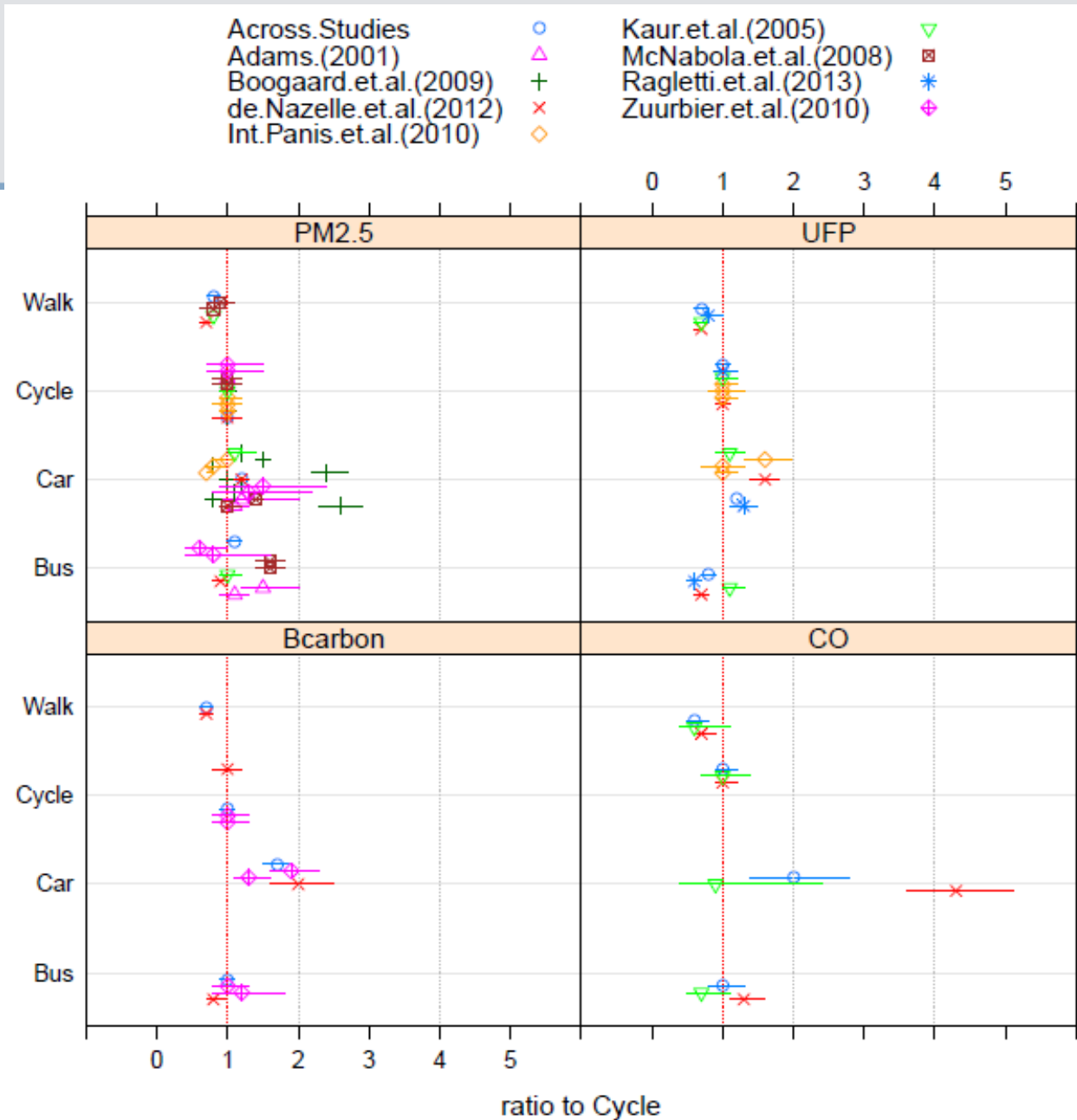
**Literature review
on exposure
contrasts in
different modes
in Europe:
Modes vs
background
concentrations**



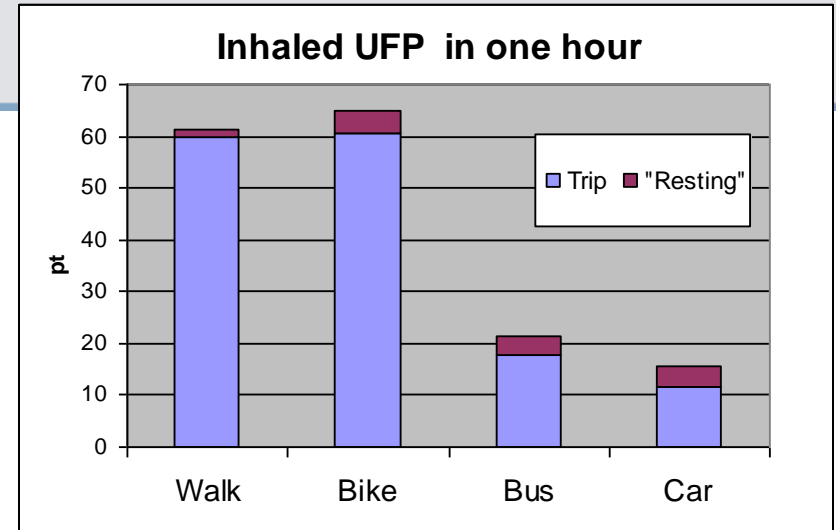
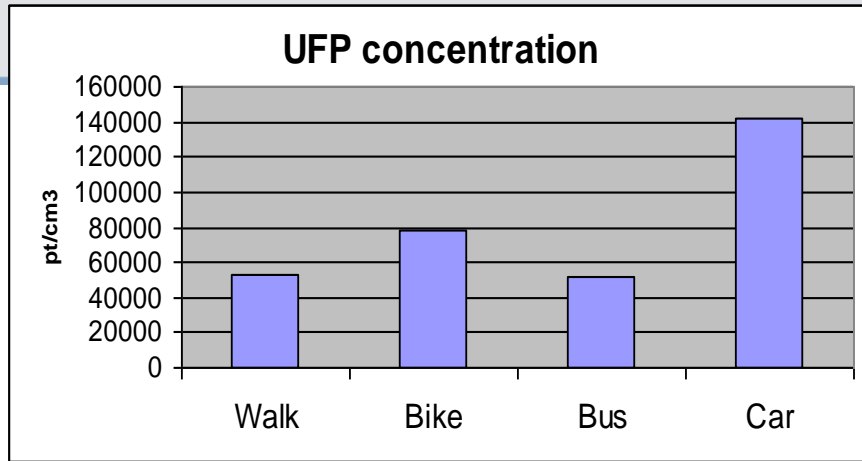
**Literature review
on exposure
contrasts in
different modes
in Europe:
Modes vs walk**



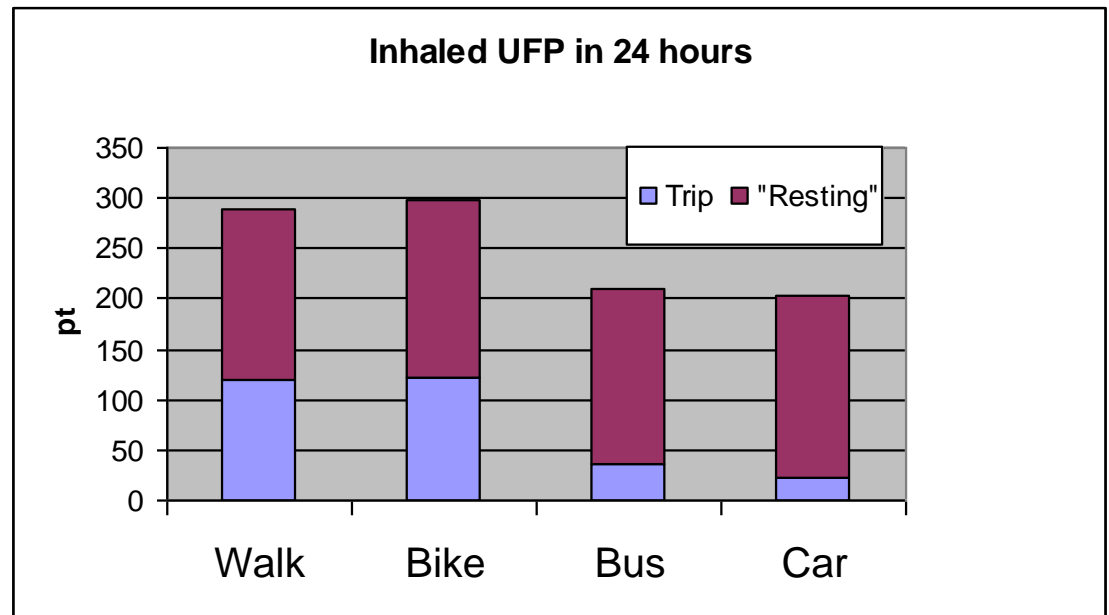
Literature review on exposure contrasts in different modes in Europe: Modes vs Cycle



Average concentrations and inhaled doses

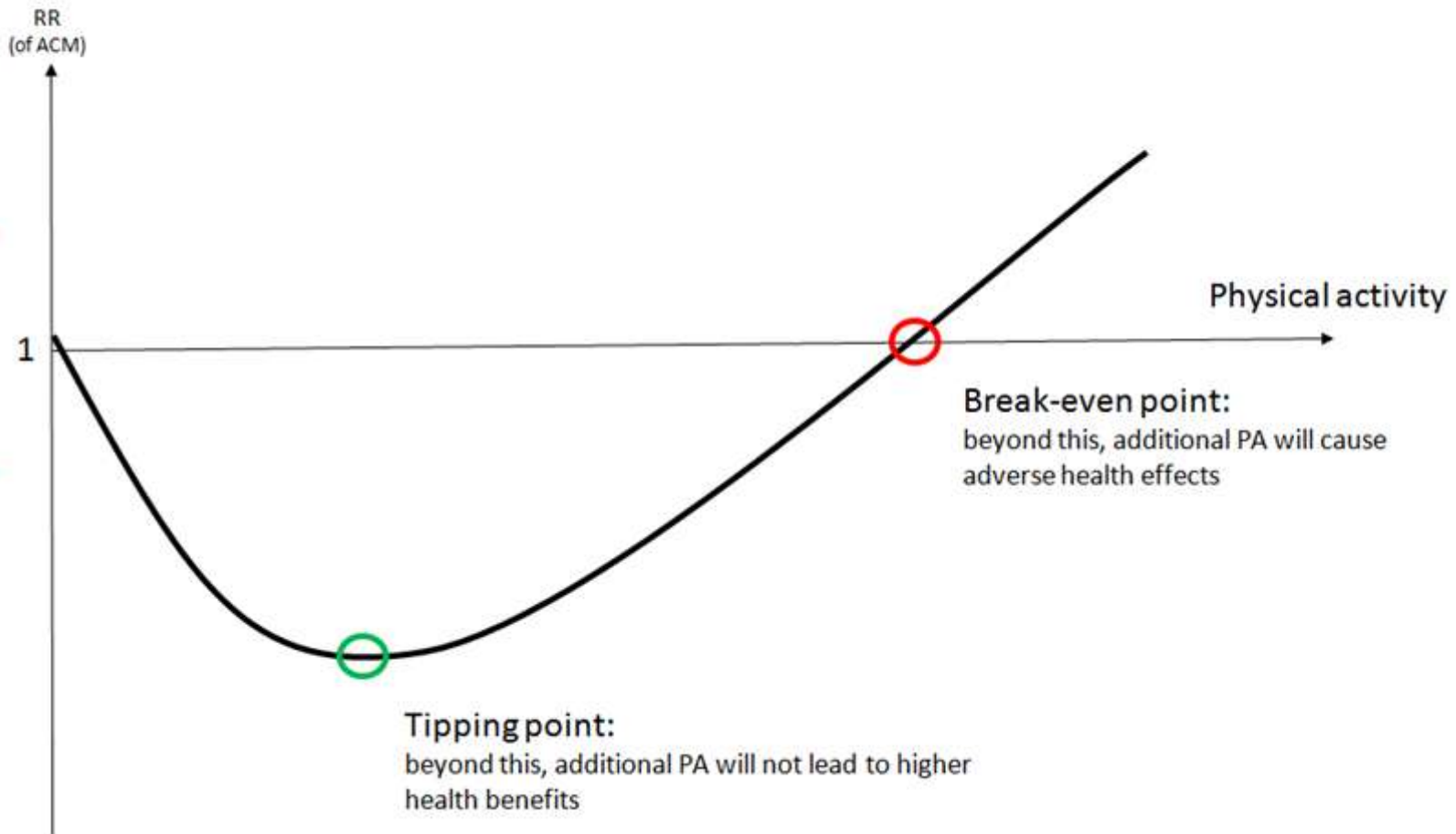


	IR (L/min)	Trip time (min)
Walk	23	49
Bike	37	24
Bus	10	34
Car	10	28

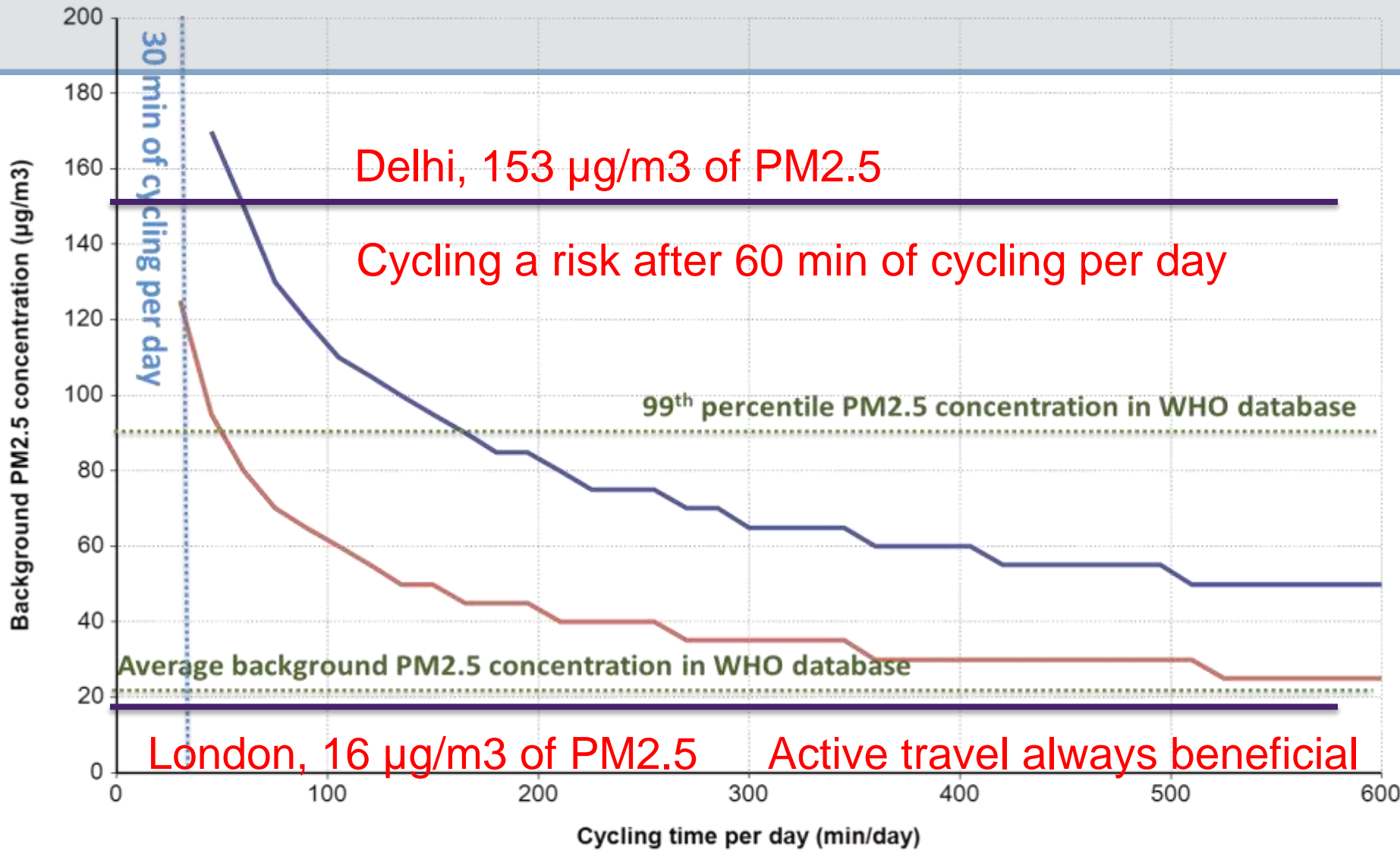


For a given level of air pollution, is there a tipping beyond which additional physical activity does not bring additional benefits, and a “break-even” point beyond which additional physical activity brings greater risks?

Physical activity benefits vs. risk due to increased exposure to air pollution



When risks become higher than benefits: Cycling



Delhi, 153 µg/m³ of PM2.5

Cycling a risk after 60 min of cycling per day

99th percentile PM2.5 concentration in WHO database

Average background PM2.5 concentration in WHO database

London, 16 µg/m³ of PM2.5

Active travel always beneficial

Tipping point and break-even point

— Tipping point

— Break-even point

Purely technological solutions vs demand management? (e.g. active travel)

- Reduction in vehicle use leads to reductions in non-exhaust emissions and noise
- Woodcock et al. (2009) Comparison of GHG emission policy scenarios in London: **death per million people**

scenario	physical activity	Air pollution	Traffic mortality	TOTAL
increased active travel	-528	-21	+11	-538
lower carbon emission vehicles	0	-17	0	-17