



Rhwydwaith Ymchwil
Integredig Trafnidiaeth ac
Iechyd

the Transport and Health
Integrated research
Network

Transport and Health Integrated research Network THINK



2021 - 2022 Annual report

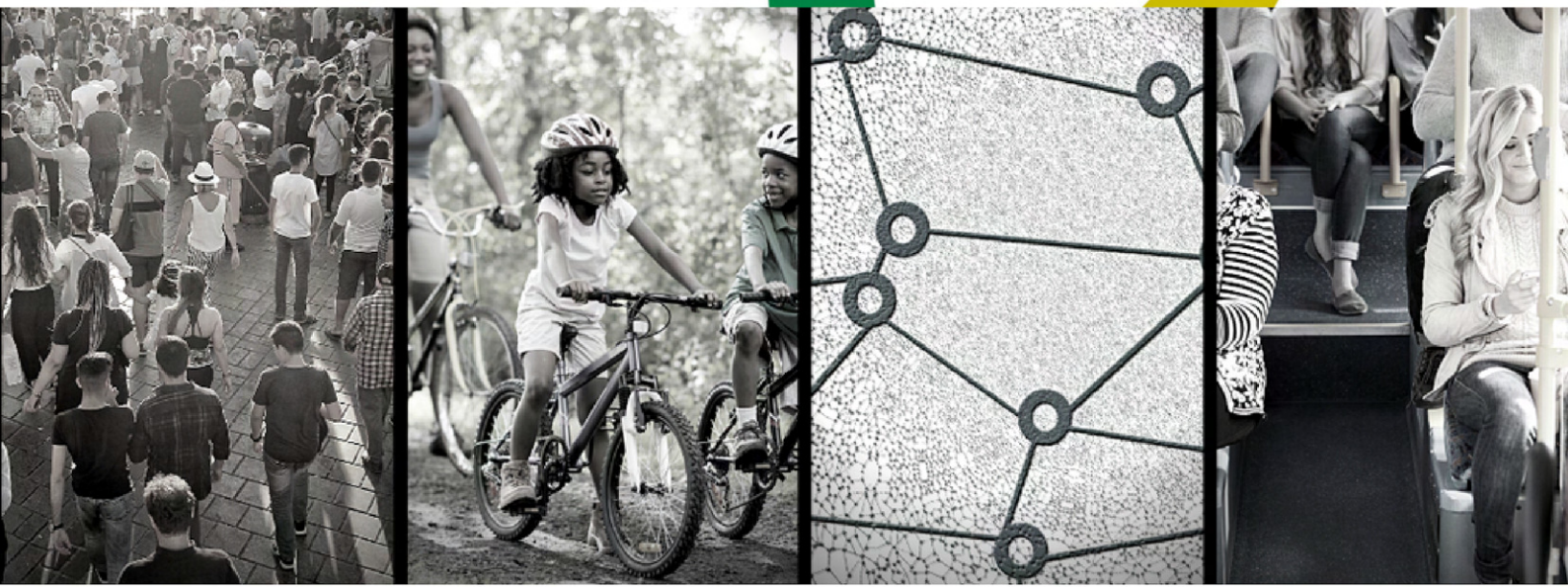




Table of Contents

01

Welcome

02

Meet the team

03

Background to
transport and health

04

What we want to
achieve

05

Workstreams

06

Visions for the future

07

Involvement and
engagement

10

International
conference

13

THINK projects

19

THINK Publications

21

THINK Academy

22

Where next?





Welcome to the Transport and Health Integrated Research Network - THINK



We are delighted to have received funding for the first transport and health research network in the United Kingdom. We have designed a programme of activity to bring people together working in transport and health fields to shape and design research that has real life impact, and to get the research out into policy and practice and make a real difference to people's lives.

"We are based at Aberystwyth University, but bring together experts from across disciplines and crucially we co-direct the operation from the University but also from Public Health Wales, to bring together the differing priorities that both organisations have with regards to research in transport and health. This report shows our activity over the first 8 months of operation, how we went about building the network and creating a community of practice from priorities identified in stakeholder workshops. This has been an exciting time, bringing together people is what we are all about. We have been getting involved in key debates and topics in transport and health for example, providing support for the health benefits of reducing speeds and supporting the Welsh Government's implementation of 20mph default speed limits in Wales, supporting evidence on the Welsh Government's Bus Consultation, winning our first grant on how we improve women's safety on transport and supporting Public Health Wales' One Health Approach. Covid-19 continues to be an issue for face to face activity but we have tried hard to adapt to online working. Do visit our website to see how we are progressing and do get involved and sign-up to our network for free, <https://think.aber.ac.uk>"

Professor Charles Musselwhite, Professor of Psychology, Aberystwyth University and Dr. Sarah Jones, Consultant in Environmental Public Health, Public Health Wales, Co-Directors, Transport and Health Integrated Research Network (THINK).

Meet The Team



Co-Directors

Dr Sarah Jones is the Co-Director of THINK and a Consultant in Environmental Public Health with Public Health Wales. Sarah has a long-standing interest in road traffic injuries and inequalities.

Her PhD studied child pedestrian injuries and deprivation and she has been an advocate for the introduction of Graduated Driver Licensing for many years.

In recent years, her interest has developed more widely to cover the links between transport and health, including work around the introduction of a default 20mph speed limit in Wales.

Co-Directors

Professor Charles Musselwhite is Professor of Psychology at Aberystwyth University. He is Co-Director of THINK. His research involves applying psychology to understanding and improving people's mobility including relationships between the built environment and transportation and health and wellbeing. In particular, he has expertise in environmental gerontology, examining relationships between environment and health in later stages of life, including older people's road user safety, giving-up driving, reducing isolation and loneliness and creating age friendly neighbourhoods and communities.

He has worked on around 40 projects as Principal Investigator or Co-Investigator totalling over £25m research income. He is also currently co-Director of the Centre for Ageing and Dementia Research (CADR), funded by Welsh Government through Health and Care Research Wales. CADR brings together research in ageing with policy and practice across Wales. He has over 65 research publications, including authoring 5 books. He is Editor-in-Chief for Elsevier's Journal of Transport & Health and on the editorial board for Age Cymru's EnvisAGE and Elsevier's Research in Transportation Business & Management. www.drcharliemuss.com



THINK Core Team



Dr Lucy Baker is Research Associate in the School of Psychology, Aberystwyth University. Lucy will be supporting THINK research activities, bringing together and sharing knowledge and evidence, engaging with the public and stakeholders, developing funding bids and a future portfolio of research and activities for THINK.

Lucy is interested in developing research that examines how health inequalities are structured, what transport and urban planning have to do with disparity in health, wellbeing and care, and what we can do to reduce health inequalities to enable a higher quality of life for all. Lucy's prior research has explored digital platform labour in India and how it intersects with new money technologies with a view to increase the social equity of innovations, future work and the use of big data. Her doctorate explored the transfer of cycling mobility interventions to developing countries with fieldwork based in Namibia.

Amy Nicholass is the Project Officer and first point of contact for enquiries for the THINK. Amy holds a Master of Environmental Science degree and previously managed research projects related to environmental and health challenges whilst working at the University of Cambridge Institute for Sustainability Leadership and whilst in the policy team at Eunomia Research and Consulting. Amy has managed two previous networks – ClimateWise and Go Green, working with hundreds of businesses to facilitate their knowledge and experience sharing. She has a particular interest in looking at transport and health from an interconnected systems perspective. Amy also has lots of experience of organising online and in-person engagement events with practitioners and the general public.



Background to Transport and Health

Introduction



Until around 1900, transport and travel were associated with positive and negative effects such as trade and human development and the spread of communicable disease. In the past 150 years, the use of cars has magnified the negative effects significantly, especially with regards to health impacts: pollution (especially air and noise), injuries from road collisions, segregation of populations, increasing inequalities and physical inactivity. Active travel (walking and cycling) has the potential to make significant contributions to population improvements in health, however, barriers to participation in this mean it is on the decline.

This has all been exacerbated by planning policy and practice that has, over the past six decades, been car focused; work and leisure facilities, health services and retail outlets have all been developed to be accessed by car. In Wales, there has been a rise of 20% in vehicle km over the past 20 years and in 2017 the total volume of motorised traffic in Wales was 29.1 billion vehicle kilometres (bvk), or 9,306 vehicles kilometres (5,782 miles) per head of the population (Stats Wales, 2018).

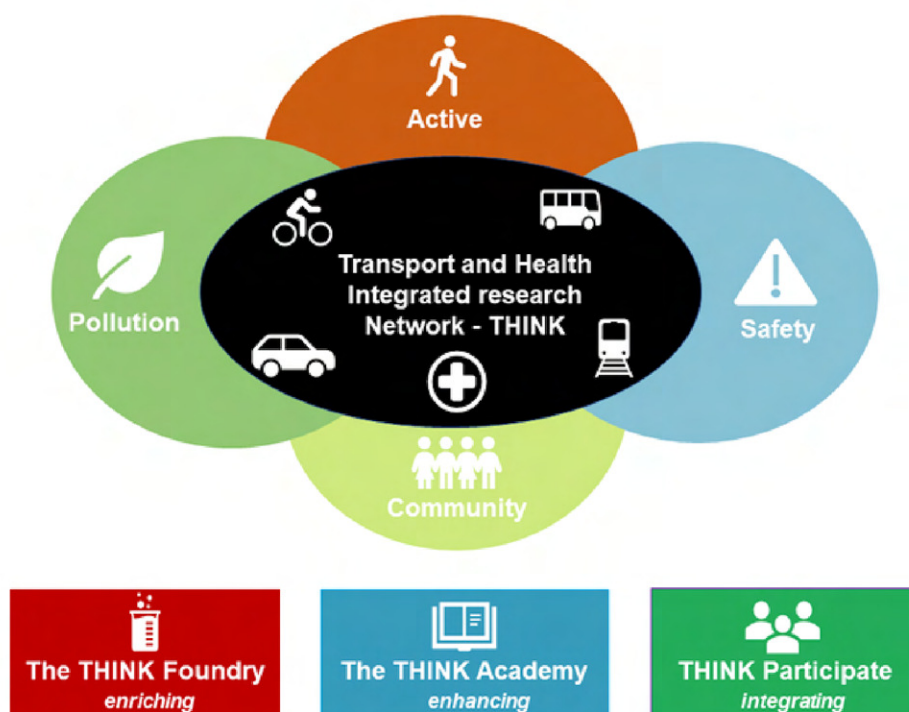
What we want to achieve in THINK

THINK (the Transport and Health Integrated research Network) is designed to better integrate the disciplines of transport and health through research development, maximising impact and reach of evidence in policy and practice, and enhancing the knowledge and skills of people working in transport and health, by creating opportunities for bringing together people from different sectors and disciplines.

It will focus on developing knowledge and practice in four specific inter-related areas of transport and mobility and health and wellbeing:

- (1) the impact of vehicles on air and noise pollution and subsequently the health of the public,
- (2) injuries and deaths stemming from vehicle crashes,
- (3) the impact of active travel (walking and cycling) on health and;
- (4) the impact of vehicles on community severance.

The work will address each of these across the life course and examine in detail inequalities, from the perspective of mobilities, safe systems and healthy communities approaches.



THINK has three strands of activity:



To generate new knowledge in transport and health (therefore enriching the network).
The foundry supports two different strands of work:

- (1) Support for researchers and practitioners to systematically work together to develop, submit and win new funding in research.
- (2) Support research into policy and practice via workshops with key stakeholders aimed at maximising impact.



To increase knowledge and skills in transport and health (therefore enhancing the network).
The academy hosts the following strands of work:

- (1) Plain English summaries of research findings for practice and policy.
- (2) A seminar series on transport and health to run every 3-4 months.
- (3) Attendance at conferences
- (4) An annual THINK conference
- (5) Supporting training needs of professionals new to transport and health, including
 - a. An annual continual professional development workshop
 - b. Bespoke training support
 - c. Systematic mentoring scheme with experienced researchers
- (6) A website with a repository of information
- (7) Social media presence on Twitter, Facebook and LinkedIn.
- (8) Promotional material to support knowledge and growth of THINK



To develop professionals and the public's understanding the relationships between transport and health (therefore integrating the network). Participate will provide resources to develop opportunities for collaborative working through:

- (1) 8 secondment opportunities for people from research to work in policy or practice to work together on a mini project around transport and health.
- (2) 8 visiting practitioner opportunities for people from policy and practice to work in academic settings to work together on a mini project around transport and health.
- (3) Interactive roadshows with the public to help prioritise key issues, with published outcome material, along with summaries for the public developed.



Visions for the Future

Overall, our critical long term benefit will be the integration of transport and health research, practice, policy and planning to the extent that transport in Wales, the UK and beyond has a positive, rather than a negative, effect on overall population health in Wales. We have 3 overarching vision goals:

01

To make Wales the world leader on the integration of transport and health, setting the global agenda for integrated transport and health research, policy and practice, through.....

- (1) new knowledge generation through research in the integrated field of transport and health;
- (2) established integration of transport and health professionals, policy makers and academics, for example creating commonality through governance mechanisms for transport planners and health professionals to work together to jointly develop policy and strategy on transport and health in Wales;
- (3) professionals, policy makers and academics with specialised skills and abilities in transport and health that can be applied to real world solutions to the negative impacts of transport and health;
- (4) strengthening and supporting the implementation of local actions on transport choices for our health, environment and prosperity.



02

To improve the health of people of Wales by reducing the negative impacts of transport via helping practitioners and policy makers identify the problems and achievable and workable solutions, for example, improving active travel provision and quality, increasing the number of people who walk or cycle, reducing pollution and impact of pollution from vehicles, reducing severance of communities and the number and severity of crashes on the roads, with special regard for groups that are disproportionately affected by the negative health impacts, for example people living in areas of high deprivation, children, young drivers, older people and all ages of pedestrians, cyclists and motorcyclists.

03

To contribute to the economy of Wales and stimulate job creation and growth through supporting people working in transport and health to maximise their practice, identifying and creating new pathways to opportunity in the field, including investment in research, education and also practice and policy and business, for example environment-friendly transport including active travel, rail and light rail; clean and efficient public transport, efficient intermodal connections etc.

Involvement and Engagement

Agenda Setting Workshops

Purpose

We held a series of workshops to bring together stakeholders working in transport and health (e.g. roadside assistance companies, national public health organisations, private consultancies, local authorities, academics, active travel third sector organisations and Welsh Government). The purpose of the workshops was to help steer strategic decisions about where to invest time and resources in THINK depending on stakeholder needs and interests, priorities and barriers identified. Hence, the workshops set out to identify areas, topics, policies, or interventions that the network will develop. The workshops were designed to explore how to go about future activities and to see if we could generate outputs in themed strands of work where projects are undertaken in sub-groups, supported by THINK.



Exploring priorities and challenges in transport and health

In the first exercise we asked participants to discuss priorities and challenges in transport and health. The following themes were identified:



Priorities

- Making transport and places more equitable and inclusive, which is aligned with the need to reduce health inequalities
- Increasing opportunities to collaborate and improving collaboration as a practice
- Raising awareness of the impact of transport on health and effective evidence-based solutions by communicating these to diverse audiences to influence change
- Identifying research opportunities, increasing and standardising data collection, and improving tools for decision-making

Challenges



- Difficulty collaborating (e.g. using funding, communication challenges, lacking awareness of different ongoing work, inconsistent approaches)
- Norms in researching travel behaviour and appraising transport interventions reproduce inequalities in accessibility to transport and places
- There is often inadequate or inconsistent data
- Communicating with the public and realising behaviour change
- Time and resource constraints
- Policy-action and evidence-action gaps

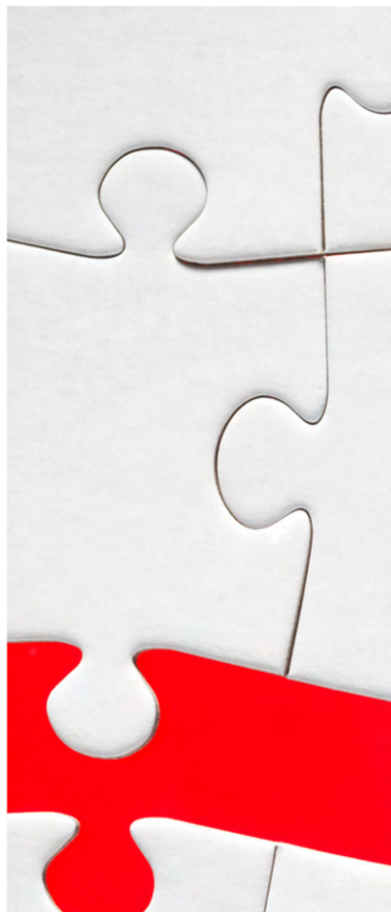
Involvement and Engagement

Agenda Setting Workshops

Lie of the Land

The second activity was designed to broaden our understanding of what people are doing now to tackle the challenges in transport and health that were raised in the first activity. Many relevant policies are now recognising the need to adjust transport, travel behaviour, accessibility of services, communities, and places to improve public health while also addressing the environmental impact of the movement of people and goods. Other reflections included:

- Achievements of third-sector organisations
- International institutions recognising and raising awareness of the impact of transport on public health globally
- In the UK, local health boards are proactively communicating with the public to improve air quality and healthier mobility
- The Welsh Government are reducing Wales's national speed limit in built up areas
- National public health institutions are becoming increasingly proactive in influencing transport planning



Moving from here to there

The third activity sought to identify areas that THINK (as a collective) could work on relating to the priorities and challenges raised. Some suggestions were repeated in more than one workshop, and it was clear there were areas that should be incorporated into a strategic plan for THINK over the next two years. These include:

- Enabling a more joined-up approach
- Capturing the social benefits of investment in transport
- Including groups of people currently marginalised in society through lack of appropriate provision of transport services and suitable infrastructure
- Increasing access to evidence
- Improving skills in communicating with the public
- Developing and improving national standards on transport, built environment and accessibility design and data-collection

Individual ideas were also raised, some of which could contribute to activities within themed sub-groups or developed within THINK, such as setting up and trialling Citizen Assemblies, social prescribing of active travel, or exploring the role of local health and wellbeing boards.

Some of the feedback we received following the workshops included:

"An excellent opportunity to engage and create something truly interdisciplinary".

Involvement and Engagement

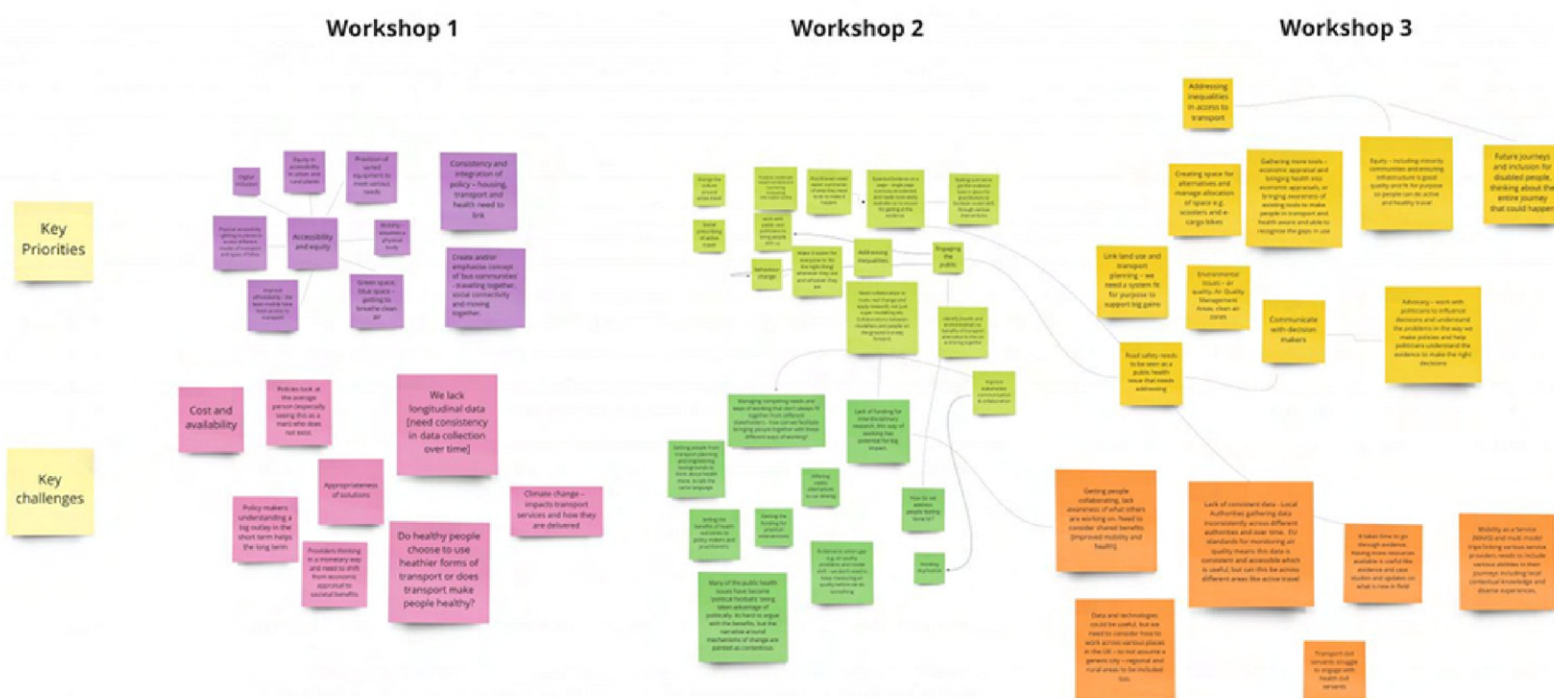
Agenda Setting Workshops

Future THINK actions

We have developed a set of actions the core THINK team can support outlined at the end of the full-length summary report. The workshops have highlighted the need for THINK to support collaborative practice, to help foster the conditions for sub-groups to begin their own practice, to ensure transport, health and places are becoming more equitable, to support easy access to resources and raise awareness of transport and health issues and interventions to facilitate change. Along with pre-planned activities, such as public engagement, releasing small grants to support research and knowledge exchange activities, the THINK team will begin to develop **communities of practice**. We will be inviting THINK collaborators to get involved in sub-themed research groups and will convene working groups to maximise opportunities to share knowledge, resources, expand networks, discuss ideas, issues and case-studies, collaborate and generate new projects, for example.

The full report can be read on the website

<https://think.aber.ac.uk/think-agenda-setting-workshops/>





International Conference

We were delighted to host the The International Conference on Transport and Health (ICTH) “transit stop” at the beautiful Bute Park visitor centre and Glamorgan Cricket Ground conference centre at Sophia Gardens in Cardiff. The conference took place as a hybrid event, in-person and on-line. Papers were presented from around the world on a variety of topics.

Jenny Mindell (UCL, London, UK) spoke in person on behalf of an international team including academics from Wellington, Auckland and Dunedin in New Zealand, about the important difference between perceptions and reality when it comes to cycling safety and the role that cycling training plays. Yusuke Kanda, National Institute of Technology, Kure College, Kure, Japan, talked about the challenges of defining the social return on investment for transport mobility solutions that promote health equity.

Sarah O’Toole (UCL, London, UK) spoke remotely about promoting independent mobility of young people with special educational needs and disabilities and how the link between parents and schools plus consistent infrastructure design (such as crossing button heights) are all important for reinforcing safety messages.

Natalia Villamizar-Duarte (Newcastle University, UK) presented her team’s work on the links between liveability and land prices in relation to health determinants and inequalities in Cali, Colombia, highlighting how the new Bus Rapid Transit infrastructure built to support poorer parts of the population was actually benefitting wealthier people the most, despite them being mostly car users.





Jenny Mindell (UCL, London, UK) opened the second day in person with her keynote speech introducing the history of the monitoring and evaluating of air quality in the UK and the approach that Wales is taking to transport and health. She highlighted transport inequalities and the importance of addressing community severance and a key takeaway was that transport is about moving people from where they are to where they need or want to be not necessarily just about moving cars around.

Stephen Greaves (University of Sydney, Australia) talked about the consequences of the Covid-19 pandemic on working from home, active travel, health and wellbeing in Australia. He highlighted that reduced commuting and incidental travel relating to work became a lost opportunity for physical activity leading to more sedentary behaviour, so how can we make non-work destinations more accessible by walking and cycling and how can employers help people be more active when working from home?

Sarah O'Toole (UCL, London, UK) remotely presented her research on pregnancy and commuting to work which led to a lively discussion in the room. She highlighted how half of the women surveyed had to make changes to their commute due to pregnancy, feeling excluded from public transport due to over-crowding and over-heating with delays and cancellations really impacting wellbeing. Pregnant women reported many advantages to home-working and flexible working hours outside of busy commuting times.

Paulo Anciaes (UCL, London, UK) presented his research on community severance in a small African city highlighting how increased car ownership and traffic is making conditions for pedestrians worse, with insufficient crossings and less propensity for walking with impacts on health and wellbeing, affecting older people the most.

Derek Christie (Institute of Global Health, University of Geneva, Switzerland) spoke about his team's research into frequent walkers in Switzerland and how they integrate 1-2 hours of daily walking into their already busy schedules. He reported that personal pleasure, wellbeing and health are key motivators for those who walk for commuting and leisure, taking fast, direct routes in the morning and slower more scenic routes home. Interestingly, individual values rather than collective values emerged as key motivators (walkers can close off from socialising but enjoy sensory stimulus).



International Conference

After lunch, the team at **Pennsylvania Department of Transportation** remotely presented their experience of Find my Ride, an online service to help identify local transport options to improve health outcomes from improved transportation access.

Angela Smith (Bournemouth University, UK) then spoke about the potential for a drone delivery network for health services. She concluded that the full exploitation of necessary scheduled delivery services needs to take place first, making the most of the existing network. For example, visits to surgeries and transporting pathology tests using existing services like the Post Office, before a network of fixed drone corridors between health care sites could be of value to health logistics or 'just in time' treatments like chemotherapy.

Paulo Anciaes (UCL, London, UK) returned to present his research on the visual aspects of transport, identifying many gaps in research around the impact of looking at the same views every day during commuting trips on stress and wellbeing, and the impact of different landscapes on distraction, including adverts and movable displays. He highlighted the lack of research from a pedestrian perspective of intrusive billboards, walls, signs, and the visual impact of cars when moving and stationary, which can reduce visibility.

Abbas Sheikh Mohammad Zadeh (Polytechnique Montréal, Canada) presented an objective framework to evaluate street functions using a case study on speed bumps in Montréal, Canada.

The final talk of the day in person was from **Cheng-Kai Hsu (University California Berkeley, US)** who presented his research on air pollution exposure and health impacts of commuting by bus, underground and bicycling in central London. His research, using Lung Deposited Surface Area technique, highlighted that cycling on alternative routes (backstreets, residential areas and green parks) can halve air pollution exposure, air conditioning in buses can improve ventilation and therefore air quality for passengers, and the design of underground stations (entrance/exit, transfer and cabin spaces) really does matter.

In addition to the traditional conference, we offered extra curricula activities including trying out a range of different bikes from Cardiff Pedal Power, watched a T20 cricket match (won by the local team), and had a fun walking tour of Bute Park, learning about the history of Cardiff city.

It was a conference with some great conversations, debates and discussions leading to exciting new ideas for joint international research.



THINK Projects

Gender+ Bus Wales: tackling sexual harassment and violence against women for a gender-inclusive bus service in Wales

Experiencing sexual harassment or violence has a direct impact on women's health and wellbeing. Women are adapting their travel behaviour for fear of harassment in ways that sacrifice their freedom of movement, leading to isolation. In turn, this limits women's access to education, employment, and services, as well as their health and wellbeing over their lifetime.

The Waterloo Foundation, based in Cardiff, have awarded a grant to support Gender+ Bus Wales, a collaborative project that will tackle harassment and violence against women and girls in public transport. We will be researching the policies and practices currently used in the bus industry in Wales to tackle gender-based harassment and violence. In partnership with the public, local authorities, police constabularies and transport operators, the project will develop guidance on industry practices and policies that are suitable to improve women's safety in - and accessing - buses. Staff training will be co-designed and piloted for use in the bus industry in partnership with the gender equality charity Chwarae Teg, industry operators and the public. The training programme will ensure staff working in public transport are able to provide equally secure and comfortable spaces for both passengers and employees.

The project is an opportunity to begin working with stakeholders and other academic researchers to develop larger projects that will focus on gender inequalities in transport and mobility, such as minimising harassment, that women and other marginalised groups in society experience and improving the security and design of transport services, public places and digital technologies to reduce the need for women to make adjustments to their mobility as a result of their exclusion.



Photo credit: SolStock

THINK Projects

Advertising in Wales and the UK: a need for transport and health integration to create healthier places

Despite the harmful influence of High in Fat Sugar and Salt (HFSS) adverts on people's health, local authorities are generating income through arrangements with marketing companies that broker public advertising space to food and drink manufacturers and outlets. Local authorities commonly use this strategy to fund public transportation. Dr Lucy Baker, Research Associate, THINK



In Wales, around 60% of adults and 26.9% of children are overweight. Research suggests exposure to unhealthy food advertising contributes to unhealthy eating, weight gain and obesity. It is estimated that people are 2.6% less likely to be obese if they live in areas where no food is advertised than those living in areas where 30% of outdoor advertisements are generally for food. People are exposed to advertisements on bus shelters, bins, telephone or Wi-Fi booths, street signs and billboards, many of which are classified as unhealthy. There are currently limited restrictions on the placement of public high fat, sugar, or salt (HFSS) food and drink products in the UK except for policies implemented in London and Bristol, and voluntary industry restriction on HFSS food and drink ads placed near to schools. Despite the harmful influence of HFSS ads on people's health, local authorities are generating income through arrangements with marketing companies that broker public advertising space to food and drink manufacturers and outlets. Local authorities commonly use this strategy to fund public transportation.

There is lots of scope for implementing new policies and methods that restrict HFSS product ads and do more to protect public health. But there is strong market opposition, contractual barriers to overcome and dependency of local authorities to gain revenue from HFSS food and drink products and brands associated with them. A revenue strategy that is harming the public's health is unacceptable and alternative funding streams need to be found. Read more at our blog

<https://think.aber.ac.uk/advertising-in-wales-and-the-uk-a-need-for-transport-and-health-integration-to-create-healthier-places/> or our Academy article - <https://think.aber.ac.uk/think-academy-publications/>

Walking

Regular walking or cycling can reduce cardiovascular disease by around 30% and reduce all-cause mortality by 20%, through reducing the risk of coronary heart disease, stroke, cancer, obesity and type 2 diabetes. It also keeps the musculoskeletal system healthy, keeps joints flexible, improves balance and coordination. Walking creates connection at a local level, fostering what Bourdieu calls social capital, knowing your neighbours, supporting one another, creating an environment where people help one another, linking people with their neighbourhoods and creating communities. If our pedestrian environment isn't fit for purpose, we risk losing the bonds with where we live, potentially increasing isolation and loneliness.

Charles Musselwhite talks about the importance of walking in later life on the THINK website: <https://think.aber.ac.uk/resources/active-travel-resources/summary-walking-in-later-life/>

Charles suggests a three-point plan to improving walking:

- (1) Improve the safety and accessibility of the space** (keeping vehicle speeds low, having continuous and dedicated pavements that are well maintained and clutter free. Banning pavement parking. Providing benches and toilets. Making sure there are regular crossing facilities that allow time for people to cross. Providing street lighting).
- (2) Improve the legibility of the space** (The streetscape should be readable by pedestrians, so it is obvious what the space should be used for and allow space between different users so older pedestrians are away from cyclists and vehicles. Maps and signage should be designed for pedestrians and should use local buildings, and contain local information as well as distances and times it would take to walk to places included).
- (3) Improve the space to be distinctive and aesthetically pleasing.** (Building in greenery and access and views of water where possible. Use interesting colours, different vegetation and different shapes and sizes helps create mystery and intrigue to encourage use and keep space playful. Allowing local people to take ownership and control over the look and feel of their local walkways and pavements).

Poetry for THINK

We were delighted to have a series of poems "in praise of walking" written for THINK by Professor Matthew Jarvis, writer, critic and poet at Aberystwyth University.

We were looking at creative techniques we could use to get people thinking differently about the relationships between transport and health. We were discussing these with Matt and he introduced us to the historic use of Praise Poetry in Wales.

He suggested developing poems in praise of healthy transport, and we start here with three poems in praise of walking, all with their different and unique mood, feelings and beats, ambling, stomping, walking with a purpose. "Ain't nothing at all pedestrian about one foot in front of the other"...indeed.

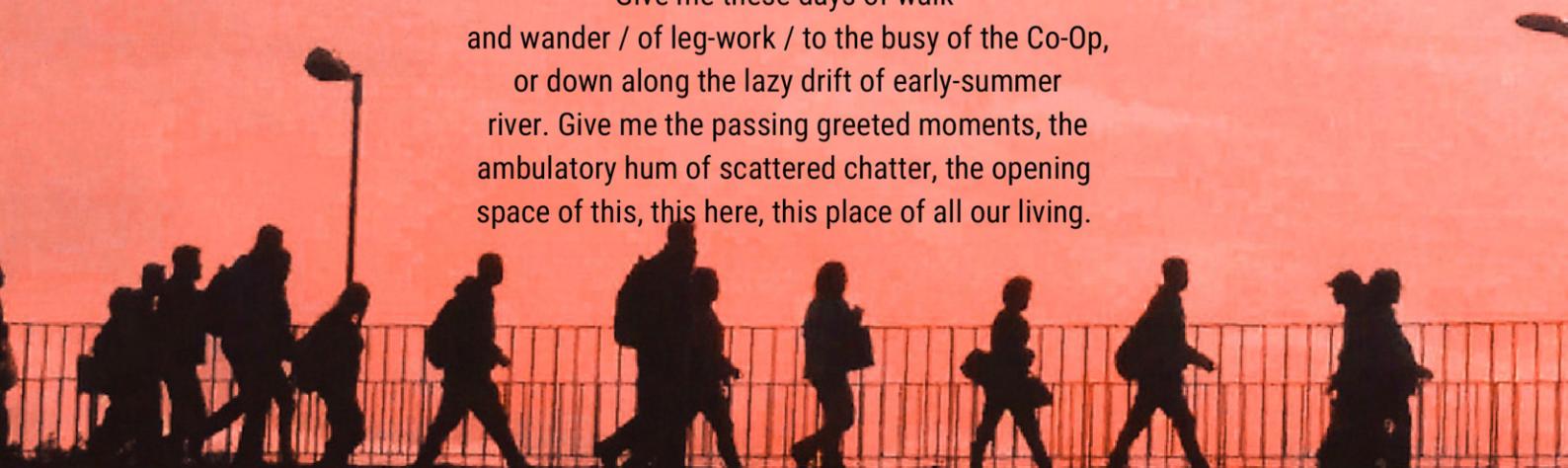
See <https://think.aber.ac.uk/in-praise-of-walking/> to watch or read the poems.

Milltir Sgwâr

Ain't nothing / at all / pedestrian about
one foot in front of the other / as I stretch
beyond the latch of my own front door / my
sneakered feet scuff-scuffing along the
pavement's up-and-down / then a nod from
her or him to me during this my amble-around, this
mobile convocation of hellos / in the milling milltir
sgwâr of our communing space.

All stop-start
my perambulation / to pleasantry with the white-
haired boy at number ten / to cwtsh with this
so eager dog – good girl, good girl – who licks
my ear in whining bounced excitement / to make
a hash of passing back that football which
had strayed.

Give me these days of walk
and wander / of leg-work / to the busy of the Co-Op,
or down along the lazy drift of early-summer
river. Give me the passing greeted moments, the
ambulatory hum of scattered chatter, the opening
space of this, this here, this place of all our living.



THINK Projects

Supporting implementation of lower speed limits

"20mph has even greater potential to benefit public health. It could well be the most significant public health intervention in the UK since the indoor smoking bans of 2006-7 and, with time, could even surpass the gains that these have achieved."

Dr Sarah Jones, Co Director, THINK.



In September 2023, it is intended that the default speed limit in built up areas in Wales will be reduced to 20mph. This is likely to make a significant contribution to the COVID-19 health and health services recovery, but also to tackling the incalculable harms associated with motor vehicle transport, to addressing the climate emergency and to narrowing inequalities. THINK will develop supporting documents to help facilitate the switch to a default 20mph speed limit, including highlighting the positive health gains including reduction in injuries and deaths from fewer road traffic collisions, the decrease in air and noise pollution and the potential increase in walking and cycling. In addition, we have begun to investigate public acceptability of lower speed limits including examining why people speed and how to frame messages to the public to create support.

See our special blog series <https://think.aber.ac.uk/20mph-and-health/>
and **journal article** - <https://www.sciencedirect.com/science/article/pii/S2214140522001645>

THINK Projects

Lanes and Lines



As part of THINK's engagement work with the public, we have developed a creative project to get people thinking about their journeys using public transport a bit more than they normally would. We are considering literature – fiction, biography, and poetry, for example – photography, music and sounds that relate to public transport and the people using it or working in and with it. We want to explore what writers and other creatives such as photographers, TV and film makers and performers are saying about transport, what kind of culture there is relating to it and what impact it has, or could have, on our perceptions of it.

We want to explore if it is possible, by reconnecting people with the culture embedded in public transport use, that we might be able to shift perceptions of rail and bus journeys, the use of services and even the staff behind transport services?

In doing so, we are hoping that the project will raise awareness of the rich culture surrounding public transport, but ultimately, the project is designed as a mechanism to get people talking about transport and their wellbeing in relation to it.

People are invited to share with us a story, an image or piece of music, TV or film that relates to transport or making a journey by public transport by emailing THINK@aber.ac.uk (with the subject 'Lanes and Lines') or by Tweeting or 'DMing' @TransportHealth. The public will also be invited to creative writing workshops to have a go at making their own literary contribution and in doing so to talk with us about their experiences of using public transport. We are planning to hold an exhibition of these works and contributions from other authors, photographers and/or musicians that have been shared with us through Lanes and Lines.

<https://think.aber.ac.uk/launching-lanes-and-lines-a-project/>



Photo of Dovey Junction train station by Scott Waby

THINK Publications

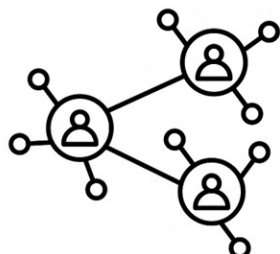
<p>Musselwhite, C. 2022 A research agenda on transport and health and public buses: More research on the buses please! Journal of Transport and Health, 24, 101355.</p>	<p>https://doi.org/10.1016/j.jth.2022.101355</p>
<p>If we're serious about transport and health then we need to look at the health implications of using different modes of transport. One mode that seems to get far less attention is the public bus. Public health messages often promote the use of the public bus as a healthy mode of transport. The paper outlines a manifesto for future transport and health related research on the bus.</p>	
<p>Hong, A., Baker, L., Prieto Curiel, R., Duminy, J., Buswala, B., Guan, C. and Ravindranath, D., 2022. Reconciling big data and thick data to advance the new urban science and smart city governance. Journal of Urban Affairs, pp.1-25.</p>	<p>https://doi.org/10.1080/07352166.2021.2021085</p>
<p>Amid growing enthusiasm for a "new urban science" and "smart city" approaches to urban management, "big data" is expected to create radical new opportunities for urban research and practice. Meanwhile, anthropologists, sociologists, and human geographers, among others, generate highly contextualized and nuanced data, sometimes referred to as 'thick data,' that can potentially complement, refine and calibrate big data analytics while generating new interpretations of the city through diverse forms of reasoning. The article explores how ethnographic research could be reconciled with big data-driven inquiry into urban phenomena. We orient our critical reflections around an illustrative example: road safety in Mexico City. We argue that big and thick data can be reconciled in and through three stages of the research process: research formulation, data collection and analysis, and research output and knowledge representation.</p>	
<p>Smith, A.C., Hanna, D. and Jones, S. (2022). Epidemiology and mapping of child road casualties. Archives of Disease in Childhood.107:540-542.</p>	<p>http://dx.doi.org/10.1136/archdischild-2021-323331</p>
<p>Paediatric trauma following road traffic collisions (RTCs) represents a significant public health burden. This study aims to influence road safety in Wales. Police (STATS19) and healthcare databases covering all or part of Wales were analysed, compared and mapped from 2017 to 2019 for RTCs involving children aged 0–16 years. STATS19 under-reports RTCs, recording 1859 road traffic injuries (RTIs) for all Wales compared with 1170 RTIs at one tertiary hospital in South East Wales. Boys aged 11–16 years had the highest injury rates (92.2 per 100 000 population). Injuries peaked at school journey times. The rate ratio of injury was 2.0 (95% CI 1.7 to 2.4) for the most deprived compared with the least deprived areas. Improvements in data quality are essential to influence road policy. Improved road safety is needed in all communities but must be further enhanced in the most deprived areas, where the burden of injury is highest.</p>	

THINK Publications

<p>Mitsakou, C., Adamson, J.P., Doutsis, A., Brunt, H., Jones, S.J., Gowers, A. and Exley, K.S. (2021). Assessing the exposure to air pollution during transport in urban areas – Evidence Review. Journal of Transport and Health, 21, June 2021, 101064.</p>	<p>https://doi.org/10.1016/j.jth.2021.101064</p>
<p>In recent years, questions have been asked about how people's exposure to air pollution varies across different transport modes, particularly in urban areas and how various factors, such as route choice and proximity to motorised transport for active travellers, characteristics of public transport vehicles, ventilation settings for cars and time of the day, may affect exposure. A comprehensive review was carried out to identify studies reporting measurements of pollutant concentrations in urban transport microenvironments published between January 2016 and July 2020 in Medline, Scopus and Embase databases. Higher concentrations of air pollutants were often experienced in motorised transport compared to cycling and walking. However, closing car windows and operating ventilation in recirculation mode was found to lower particulate pollution concentrations inside cars. Pedestrians and cyclists were generally exposed to lower concentrations of air pollution when using routes separated from motorised traffic; the exposure of cyclists could be over three times higher when cycling on a high-traffic route compared to cycling on a traffic-free route and over four times higher when comparing cycling on-carriageway with cycling on a separated cycle lane.</p>	
<p>Jones, S., Musselwhite, C., Baker, L. and Nicholass, A. (2022). Reducing speed limits in residential areas has huge public health benefits: But what do we need to do to convince the public? Journal of Transport and Health, 26, 101492.</p>	<p>https://doi.org/10.1016/j.jth.2022.101492</p>
<p>Speed limit reductions in residential locations have huge public health benefit. This includes reducing crashes and injuries and deaths, reducing air and noise pollution, encourages more walking and cycling and even public transport use. There is still much public angst over reducing speed levels and the paper looks at how to encourage different groups of people who may be against such measures for different reasons.</p>	
<p>Macleod, K., Cole, B.L., and Musselwhite, C. (2022) Commuting to work post-pandemic: Opportunities for health? Journal of Transport and Health, 25, 101381</p>	<p>https://doi.org/10.1016/j.jth.2022.101381</p>
<p>People's ability to adapt to changes in working and commuting practices as a result of living with covid19, both during and after lockdowns, varies depending on inequalities. As a consequence health inequalities in relation to commuting behaviour in a post-pandemic society could widen.</p>	

THINK Academy

Building the network and using social media



81 Network members



May and 'summer' i.e. start of September newsletter sent out to 81 network members



We have 60 LinkedIn members



We have 139 twitter followers



9 blogs published on the blog page of the website
4 articles published via the THINK Academy

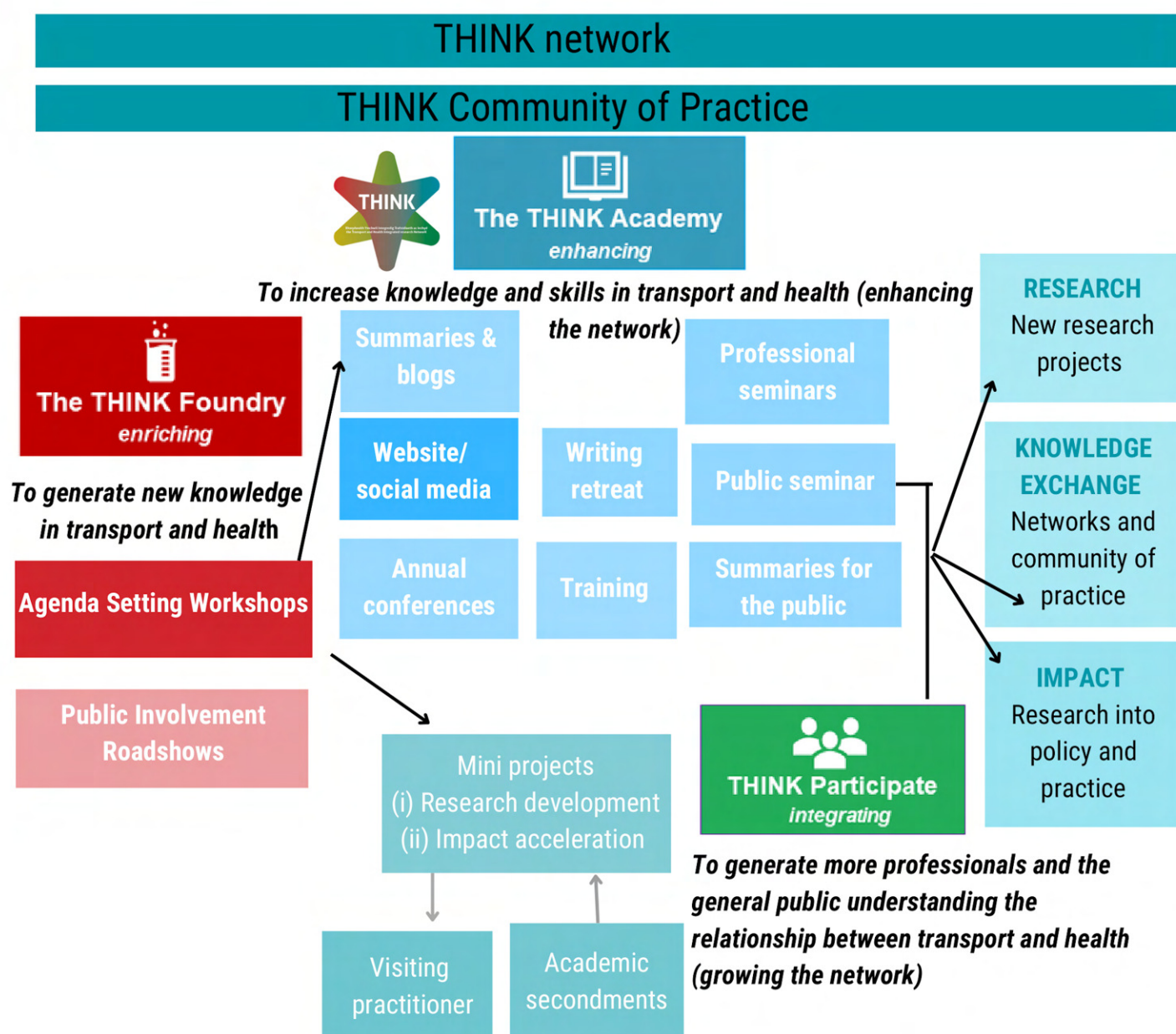
All figures correct as of 1st Sept 2022

Where next?

Plans

The diagram outlines the network progress.

The areas with deep filled background are complete (agenda setting workshops and website and social media), areas with light background (summaries and blogs and annual conferences) are under way. Those with light background are to happen next. Now we are concluding what agendas to take forwards. We can move to providing resources for the network and community of practice to take forwards these ideas in a way that will help them achieve their ambition (and move us towards the green areas - new research projects, knowledge exchange or impact). For example, this might be through offering seminars, training, mini projects and/or secondments.



Where next?

Building up public involvement and engagement

In addition, we recognise the need to get public voice and we will offer opportunities for the public to get involved in agenda setting workshops.

We are keen to look at different methods not usually used in transport to involve and engage the public with transport and health debates. We have begun a project aiming to inspire discussion on public transport by raising awareness of the culture around buses and trains. Lucy Baker has started off the project by summarising a Welsh Poem by Geraint Lovegreen: <https://think.aber.ac.uk/launching-lanes-and-lines-a-project/> As part of the project we plan to invite public to attend a creative writing workshop (likely Powys - Newtown and Ceredigion, Aberystwyth).

We have also invited the public to send us their contributions of any creative media including photographs and songs, for example, to increase opportunities for people to get involved. We have been inviting scholars specialising in literary studies of mobility and place to contribute summaries of written pieces (we have Jason Finch, Adam Borch and Matt Jarvis confirmed for pieces this Autumn and will continue to develop this).

We plan to finalise the project with a public exhibition.





THINK is delivered in partnership between:




Think is funded by Welsh Government through Health and Care Research Wales




Contact

Transport and Health Integrated research NetworkK - THINK

Psych-Lab-8, P4, Aberystwyth University, Penglais Campus,
Aberystwyth, Ceredigion, SY23 3BF
+44 (0) 1970 628438

<https://think.aber.ac.uk> 

think@aber.ac.uk 

[@TransportHealth](https://twitter.com/TransportHealth) 