

CASE REF: APP/03100/V/23/3326625

**Corridor between the A34 Milton Interchange and the
B4015 north of Clifton Hampden**

SPEAKER NOTES FOR ADDRESS TO INQUIRY ON 24th MARCH 2024

Topic 1 The need for and benefits of the scheme

Topic 2 Whether the transport modelling is robust and takes into account significant traffic impacts in the wider area.

Topic 3 Whether the proposal would make acceptable provision for sustainable travel

Topic 4 Consideration of alternatives

Topic 6 Acceptability in terms of impacts on noise

Topic 7 Acceptability in terms of air quality

Topic 14 Other policy matters and overall planning balance

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My name is Angela Jones. I am a retired general medical practitioner . I have an interest in health inequalities, having worked in the area of homelessness for ten years from 1999 and was appointed Specialist Adviser to the Department of Communities and Local Government from 2006-2008. and am a past Chair of the Health Inequalities Standing Group of the Royal College of GPs.

I have lived in Appleford for 25 years. I will provide my evidence from the perspective of a professional who is living in the area affected by the proposed road. Appleford is a modest community, largely comprising hard-working families and retired people. No-one important or influential lives in our village. As the Inspector will know, having visited the site of the proposed road, we already shoulder a significant burden of nuisance related to nearby essential infrastructure, specifically the rail corridor from Didcot to Oxford and beyond, the waste management activities of FCC including landfill and materials sorting and composting, and the quarrying activities of Hanson. The activities of the latter two companies generate extraordinary amounts of HGV and rail traffic which currently passes close to the very southern end of the village, which then exits to the south onto the north perimeter road at Didcot. The households at the south end of the village has been designated a DEFRA Noise Action Plan Important Area.

Furthermore, during the weekday rush hour, which is I think when the Inspector visited the site, the B4016 which passes through Appleford carries a fairly steady stream of private vehicles mostly traveling at 30mph (may reduce to 20mph), mostly containing one person or an adult with a child or children, mostly commuter traffic. It is important to note that **no HGVs transit the village** due to the weight restriction on the listed railway bridge at Appleford and this is successfully enforced by Trading Standards with only the occasional violation.

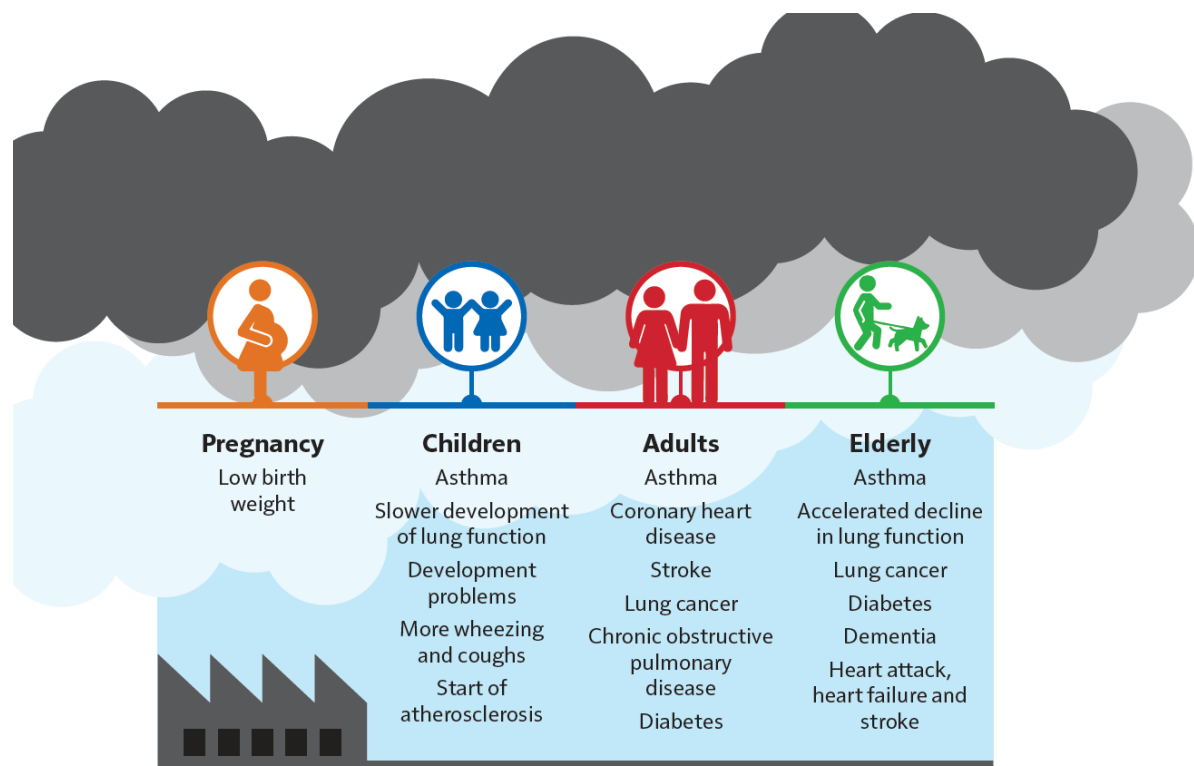
The majority of the traffic, both rail and road, is during the daytime and does not extend into the night.

I am giving this background information at the outset of my address in order to stress that, in general, Appleford is a quiet place to live. Outside of the rush hour and at weekends, it is a peaceful place where you can hear the birds singing. Applefordians accept the railway and its associated noise, such as it is, which is intermittent and does not induce significant stress, especially since the Intercity 125 was withdrawn. The proposal which this Inquiry is examining, will fundamentally alter the soundscape of the village, introducing HGV traffic and other vehicles travelling at high speeds, to our very doorstep, potentially 24 hours a day with the aggravating factor of the elevation from ground level increasing noise and pollution levels due to the necessary acceleration and reducing the opportunities for mitigation. For the households in the south of Appleford, I will demonstrate that this creates a **serious cumulative impact, one which is not addressed by the proposal.**

My brief is to discuss the health implications of the HIF1 proposal.

The main adverse health effects of roads in general come under two main headings: air pollution and noise and it is, I think uncontested, that there are adverse effects on health associated to proximity of roads.

I found this nice diagram in the CMO's recent 2022 report on air pollution to describe the effects of air pollution, to which road transport contributes significantly.



Air pollution from roads is due to:

Particulates (PM2.5 and ultrafine particles)
Carbon monoxide
Nitrogen dioxide (NO₂)
Black carbon from diesel
Polycyclic aromatic hydrocarbons
Metals

The health effects known to be caused by such air pollution are:

Cardiovascular mortality (death due to coronary heart disease)

Respiratory mortality (death due to lung problems)

Heart attacks and angina

Raised blood pressure.

Diabetes

These adverse health effects have been demonstrated to exist after correction for socioeconomic status and noise and cannot simply be blamed on the fact that poorer and less advantaged people often live next to busy roads. (See Appendix 3)

The presence of pollutants in the air depends on distance from the road and varies depending on the type of pollutant and factors such as wind direction. Concentrations are found to be higher downwind of the road with the distance – decay gradient to baseline extending to up to 1500m downwind for some pollutants.

Prevailing winds are from the SW meaning Appleford is downwind of the proposed road with all of the residential properties falling well within a 1500m area. (see Appendix 1).

It is important to understand that as exhaust emissions decrease with improvements in vehicle propulsion technology eg increase in EVs, the importance of non-exhaust emissions from road wear, resuspension of road dust, tyre wear and brake wear will become increasingly important, as toxicological research is able to attribute some of the adverse health effects of roads to these factors. Therefore, we cannot rely on electrification of vehicles to solve the health problems caused by the road.

Noise from roads is considered as a separate risk to health and wellbeing. (see Appendix 2) The WHO has identified traffic noise as second only to air pollution as a cause for ill health in Western Europe, causing 12 000 premature deaths and 48 000 new cases of ischaemic heart disease per year in Europe. (See Appendix 2). A 2018 report by the WHO noted that each year, western Europeans are collectively losing more than 1.6 million years of healthy life to traffic noise, including both premature death and noise-induced disability.

Traffic noise is considered as a physiological stressor, second only to air pollution and on a par with radon or secondary tobacco smoking. The main resultant harms are seen in terms of cardiovascular and cerebrovascular disease increasing the risk of heart attacks and stroke and arise due to damage to the lining of the blood vessels due to stress related hormones released due to noise exposure.

Traffic noise is worse downwind and exacerbated by elevation of the road, with the attendant difficulties in mitigation, meaning that the positioning of current proposed road and flyover will impact unduly on residents of Appleford. Furthermore, it has been pointed out that the construction of the flyover risks exacerbating existing sources of noise pollution to which Appleford is already subjected, by reflecting and enhancing noise from the quarrying and stone-moving activities at Appleford Sidings.

It is my view that the issue of cumulative impact has not been addressed. Government guidance "Noise: advises on how planning can manage potential noise impacts in new development" July 2019 states that "noise needs to be considered when development will create additional noise....Good acoustic design needs to be considered early in the planning process to ensure that the most appropriate and cost-effective solutions are identified from the outset." It further states that: "in cases where existing noise sensitive locations already experience high noise levels, a development that is expected to cause even a small increase in the overall noise level may result in a significant adverse effect occurring". Finally, it requires that anticipated as well as current noise sources should be considered. There is no evidence that these factors have been addressed satisfactorily in the planning process or in the final proposal.

Mr Chris Hancock presented a detailed critique of the applicant's approach to air and noise impacts yesterday which I wholly support. Suffice to quote from the NPPF:

183. Planning policies and decisions should also ensure that new development is appropriate for its location taking into account the likely effects (including cumulative effects) of pollution on health, living conditions and the natural environment, as well as the potential sensitivity of the site or the wider area to impacts that could arise from the development

This leads me onto the issue of the absence of a **Health Impact Assessment (HIA)**. This is very surprising, given the previously mentioned health impacts and given the proximity of the proposed road to sensitive populations, in particular Appleford, but also children in Culham, from age 4-18 at the state-run European School in Culham and the preschool in Culham village, and the potential for increasing heavy traffic through small settlements throughout the corridors between Didcot, east Oxford and the M40.

AN HIA is defined in the Government's guidance on "Health Impact Assessment in spatial planning" from October 2020 as:

'a combination of process and methods used by those planning, deciding and shaping changes to the environment to evaluate the significance of health effects of a plan or project....(it) helps decision makersto make choices about actions to best prevent ill health, promote good health and reduce health inequalities.'

It goes on to say that an HIA 'puts people at the heart of the process'.

For a project of this magnitude and significance, it has been a serious missed opportunity for the local authority not to have included an HIA at the options appraisal stage, or even before, when developing options, looking at the implications for the wider determinants of health and well being of all the potential schemes for addressing traffic congestion in our area.

The fact that no HIA has been provided by the applicant is a significant omission. The applicant is asking the inspector to adjudicate on the harms versus benefits of the proposal without proper professional advice.

The applicant asserts that sufficient attention to health has been given in the Environmental Statement. Looking at the tables provided from the guidance I mentioned, which outline the wider determinants of health which should be covered when considering the health impacts of a proposal, this is clearly not the case. And even where some of these areas have been mentioned, it is my view that the many of the assertions are not correct:

Just to give a few examples, it is suggested that providing a bus stop on the HIF1 road to which people of Appleford can walk via an improved walking route will be a health benefit. I would contend that for the majority of Appleford residents, especially the older residents, this would be an unrealistic distance to walk to a bus especially with shopping etc.

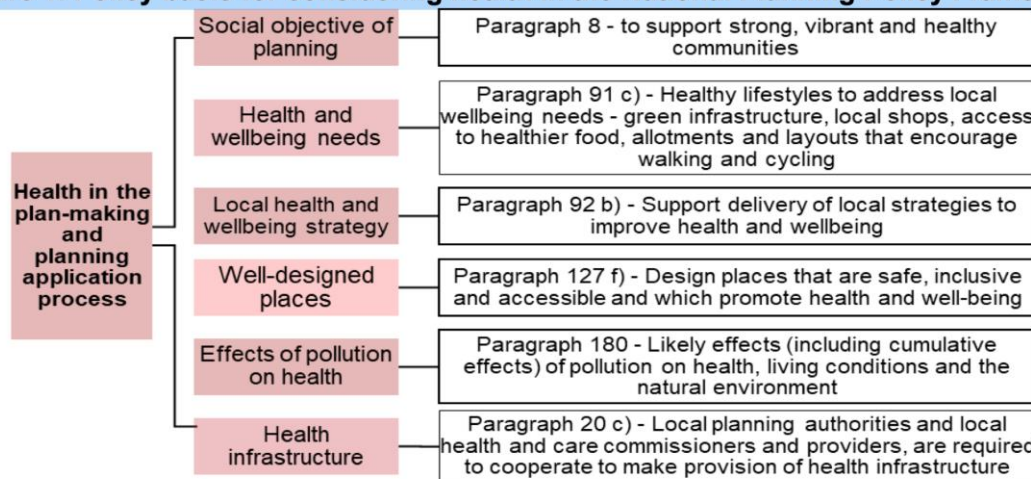
It is further asserted that there is currently no safe walking route from Appleford to Sutton Courtenay. This is incorrect – there is in fact already an off road footpath, used by residents to access the Millenium Common and beyond.

The provision of a cycleway beside the proposed road is hailed as a significant improvement in infrastructure for active transport. However, there is no evidence given that the route would be beneficial in terms of driving modal change from cars to bicycles and would merely expose those who use it to high levels of pollutants due to the HGV traffic.

Table 2. Wider determinants of health and wellbeing outcomes

HIA health considerations (Annex 2)	Wider determinants of health and wellbeing			
	Access	Traffic and Transport	Socio-economic	Land Use
Reduce Health inequalities	<ul style="list-style-type: none"> • Local public key services and facilities • Good quality affordable housing • Healthy and affordable food • Natural environment • Green spaces and public realm • Leisure, sport, recreation, play and physical activities within the environments 	<ul style="list-style-type: none"> • Accessibility • Access to public transport • Opportunities for active travel (cycling and walking) • Links between communities • Community severance • Connections to jobs • Connections to services, facilities and leisure 	<ul style="list-style-type: none"> • Employment, including skills development and training opportunities • Local business activity • Regeneration • Tourism and leisure industries • Community/ social cohesions and access to social networks • Community engagement 	<ul style="list-style-type: none"> • Sustainable and efficient land use in urban and/or /rural settings • Quality of Urban and natural environments, such as air and noise pollution • Climate change impacts
Improve mental health and wellbeing				
Improve diets and weight				
Improve musculoskeletal health				
Improve respiratory health				
Improve cardiovascular health				
Protect environmental health				
Provide access to health and care infrastructure				

Figure 1. Policy basis for considering health in the National Planning Policy Framework



Even if an HIA had been carried out, it would probably have been inaccurate, given that the traffic predictions for the proposed road are flawed, in the opinion of residents who understand the traffic issues better than most. The proposal does not simply rearrange existing traffic, which would imply benefit to villages such as Appleford by diverting traffic off the A4016. It will instead bring significant HGV traffic into the parishes of Appleford, Culham and Sutton Courtenay, which have been previously protected from such flows by the weight limits on local roads, requiring HGVs to keep to A34 to the west and the roads around Wallingford to the east.

The proposal fails to take any account of **induced and reassigned traffic**. In our view, the creation of this route will immediately attract traffic from the A34 and M40, especially when there are delays on the A34 (an almost daily occurrence due to the severe impact of minor breakdowns, accidents or roadworks on this highly- saturated trunk road). This view is supported by the Road Haulage Association as evidenced by their recent press release.

The impact of this reassigned traffic will be widespread throughout the county from Watlington, Benson, Stadhampton, Little Milton, Shillingford and Chislehampton through to Nuneham Courtenay, Clifton Hampden (even with the bypass in place), Sutton Courtenay, Appleford and Culham.

The fact that the traffic modelling expert stated the contrary in her evidence earlier in the inquiry confirms our doubts about the value of the modelling used by the applicant.

Furthermore, there is likely to be significant reassigned traffic effect from the use of the new road by the lorry traffic from FCC and Hansons which currently travels south to the Didcot perimeter road. In addition, if the current applications for extensions to their activity are passed, our estimate is that over 300 lorry movements per day will use the new road which is approximately one every 2 minutes assuming a 12-hour working day.

Admittedly, some may travel south rather than north, but all will have to accelerate up onto the road via a steep gradient, thus increasing significantly the tailpipe emissions and noise. There is no allowance made for this additional impact on the noise sensitive area in southern Appleford.

One further small point:

By creating a roundabout on the B4106 allowing access from the B4106 onto the HIF1 road, a 'rat run' will be created through Appleford from Didcot, Wallingford and surrounding villages to the south and east to access the new road, risking further noise and air pollution and road safety hazards on this residential B-road which caters for our school children, residents and dog walkers.

I would like to close by addressing the issue of public support for the proposal.

Historically, the idea of making another road crossing for the Thames may have seemed a reasonable one to most people in 2018 when the proposal was first consulted upon. People in Appleford and the Parish Council sought to be cooperative and constructive in their engagement with the applicant to ensure that the proposal would minimize the risk to the amenity, health and wellbeing of our community. When it became clear that our efforts were not meeting with success, a Parish referendum was held in which over 90% of households voted against the proposal. This is a clear indication that, contrary to the assertion of Mr Aron Wisdom, Appleford does **not** support the proposal.

And since then, the world has moved on. The pandemic fundamentally changed our working and commuting patterns, the effects of anthropogenic climate change have become more stark and the impact of the massive housebuilding around our area have become more evident.

As a result, it has become more clear to all concerned that the answer to the need to alleviate congestion is not to build more roads (which is like saying that the cure for obesity is to let out your trousers) but is to provide more mass transit solutions for commuters, which will in turn encourage and enable safer usage of our current roads for active travel.

The decision on this planning proposal should be made on the situation as it is now, and is forecast for the future, NOT on the mindset that existed at the initiation of the project. The huge costs of this road would be better spent on a coordinated public transport and active transport plan for the area, with the attendant health benefits and reduction of health risks.