APPLICATION FOR THE PROPOSED NETWORK RAIL (SUFFOLK LEVEL CROSSING REDUCTION) ORDER

APPENDIX 1 TO

PROOF OF EVIDENCE:

ANDREW WOODIN – RIGHTS OF WAY AND ACCESS MANAGER

Bachelor of Sciences Honours degree in Ecology

TRANSPORT AND WORKS ACT 1992: APPLICATION FOR THE PROPOSED NETWORK RAIL (SUFFOLK LEVEL CROSSING REDUCTION) ORDER

PUBLIC INQUIRY

PROOF OF EVIDENCE – Abdul Razaq, Director of Public Health, Suffolk County Council

SUFFOLK COUNTY COUNCIL

Objection to the Closures of S22, Weatherby and S25, Cattishall

1. Introduction

I am submitting this evidence in my capacity as the Director of Public Health for Suffolk County Council. I have been a director of Public Health since 2003. I am a Fellow of the Faculty of Public Health, which is the standard setting body for specialists in public health in the United Kingdom, and hold a Master's in Public Health (University of Manchester). I am on the Professional Register UK Public Health (FR0230).

2. Effect of Network Rail Proposals on Public Health at Weatherby and Cattishall Crossings

a) This evidence provides further support to the county council's objection to the closure of level crossings S22 Weatherby and S25 Cattishall.

b) Having considered the proposals, Public Health Suffolk believes that due to the current usage of these two level crossings, and the alternative proposals suggested, it can be reasonably predicted that their closure will have a negative impact on the health of the local community.

c) Public Health Suffolk sits within Suffolk County Council and is responsible for helping people to stay healthy and protecting them from threats to their health.

d) Our priority is to address inequality in Suffolk so that it should not matter who people are or where they live when it comes to their health and opportunities in life.

e) In Public Health our goals are:

   a. to promote health and healthy lifestyles;
   b. to protect the health and well-being of our county;
   c. to prevent ill health;
   d. to prolong lives;
   e. to improve health and the factors that affect health, well-being and health inequalities;
   f. to support our health and care services.

f) Having reviewed both proposed closures it is clear that the alternative routes suggested would entail a significant detour for users. We believe that this will deter people from walking and cycling forcing some to use motorised transport which, in turn, is likely to have a negative impact on activity levels. It is also evident that users will be exposed to greater levels of traffic fumes along the diversionary route. This is relevant because, according to a new study published in the Lancet[i], walking along streets with high pollution levels may cancel out the positive impacts of walking.

g) We have noted the outcomes of the survey work undertaken by Network Rail which demonstrates that both crossings are currently used extensively by both walkers and cyclists.

h) Evidence is well established in relation to the importance of physical activity to both physical and mental health. Physical inactivity is one of the top 10 causes of disease and disability in England and is attributed to 6% of deaths globally. Inactivity causes 1 in 6 deaths in the UK. It is the principal cause for 21-25% of breast and colon cancer, 27% of the diabetes burden and 30% of ischaemic heart disease[ii]. It is estimated that 1,368 years of poor health (Disability-Adjusted Life Years) are being

lived by the Suffolk population each year as a direct result of physical inactivity[iii]. 'A Disability-Adjusted Life Year (DALY) can be thought of as one lost year of 'healthy' life. DALY's for a disease or health condition are calculated as the sum of the years of life lost due to premature mortality in the population and the years lost due to disability for people living with the health condition or its consequences.' (World Health Organisation).

i) We are therefore strongly against any measures that would directly impact on physical activity levels in the county such as the planned closures of the two identified crossings.

j) Public Health Suffolk has recently completed a comprehensive Physical Activity Needs Assessment. The purpose of the assessment was to provide an evidence base from which a co-ordinated and integrated strategy and action plan could be developed to specifically address physical activity needs in Suffolk. The assessment, which is informed by a number of key policies and strategies including the Suffolk Walking Strategy[iv] and the Suffolk Cycling Strategy[v], specifically recommends:

- 'Strategies to make walking and cycling the default choice for shorter journeys, as identified in the cycling and walking strategies, need to continue to be supported and implemented.'
- 'Integrated travel options that incorporate cycling and/or walking for part of the journey and promote active commuting need to be explored.'
- 'Children and their families need to be supported to be more physically active through active recreation, active travel and active play.'

k) We believe that the proposal to close S22 Weatherby and S25 Cattishall not only directly conflicts with these recommendations but also the ambitions of the Department for Transport's Cycling and Walking Investment Strategy[vi] which set out to make cycling and walking the natural choices for shorter journeys, or as part of a longer journey.

l) Furthermore, it is our opinion that the closure of these two crossings will lead to individuals, particularly older members of the community, becoming isolated from services within their local communities which could have a negative impact on their emotional wellbeing. There is strong evidence to demonstrate that physical activity, such as walking and cycling, has a positive impact on mental health. Evidence, such as the risk of depression being reduced by up to 30% through physical activity[vii], demonstrates this point.

m) The potential impact on the older community is of particular concern following modelling undertaken by Public Health Suffolk which identifies that the number of people in the county aged over 65 will shift from the current one in five of the population to one in three of the population within 20 years[viii].

n) Further, the Public Health England Health Profiles for Forest Heath[ix], the district in which S22 Weatherby is located, and St Edmundsbury[x], the location of S25 Cattishall, include specific information of relevance to the proposed closures, as follows:

- Forest Heath – 'Estimated levels of adult excess weight are worse than the England average' and 'Local priorities include ensuring more children and adults are at a healthy weight'

- St Edmundsbury – ‘Local priorities include encouraging daily activity, maximising the use of the natural environment, ensuring more children are at a healthy weight, and encouraging physical activity in adults.’

o) We believe that the proposal to close S22 Weatherby and S25 Cattishall directly conflicts with these profiles.

p) Finally, please note that Public Health Suffolk has only been asked to look at the proposal to close S22 Weatherby and S25 Cattishall and, as such, nothing in this proof of evidence is intended to imply, or otherwise, that Public Health Suffolk supports any of the other proposed closures detailed in Network Rail Anglia Level Crossing Reductions TWA Order.

Abdul Razaq
Director of Public Health

[i] Rudy Sinharay, MBBS†, Jicheng Gong, PhD†, Benjamin Barratt, PhD, Pamela Ohman-Strickland, PhD, Sabine Ernst, MD, Prof Frank Kelly, PhD, Prof Junfeng (Jim) Zhang, PhD, Prof Peter Collins, MD, Prof Paul Cullinan, MD, Prof Kian Fan Chung, DSc (2017) - Respiratory and cardiovascular responses to walking down a traffic-polluted road compared with walking in a traffic-free area in participants aged 60 years and older with chronic lung or heart disease and age-matched healthy controls: a randomised, crossover study.
[ii] Public health England (2016) - Health matters: getting every adult active every day. Retrieved from https://www.gov.uk/government/publications/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day.
[iii] Dr Caroline Angus, Dr Catherine Lester and Sharna Allen (July 2017) Physical Activity Needs Assessment. Retrieved from https://www.healthysuffolk.org.uk/uploads/2017-10-12_Needs_assessment_Final.pdf.
[iv] Active For Life Suffolk Walking Strategy 2015-2020. Retrieved from https://www.healthysuffolk.org.uk/uploads/Suffolk's_Walking_Strategy.pdf.
[v] Suffolk Cycling Strategy. Retrieved from https://www.suffolk.gov.uk/assets/planning-waste-and-environment/planning-and-development-advice/20140619-Cycling-Strategy-booklet.pdf
[vi] Department for Transport’s Cycling and Walking Investment Strategy. Retrieved from https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/603527/cycling-walking-investment-strategy.pdf.
[vii] Public Health England (2016) - Health matters: getting every adult active every day. Retrieved from https://www.gov.uk/government/publications/health-matters-getting-every-adult-active-every-day/health-matters-getting-every-adult-active-every-day.
[viii] Office for National Statistics (2016) 2014-based Sub National Population Projections. Available at: https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/datasets/2014basednationalpopulationprojectionstableofcontents.
[ix] Public Health England (2017) – Forest Heath District Health Profile 2017. Retrieved from http://fingertipsreports.phe.org.uk/health-profiles/2017/e07000201.pdf.
[x] Public Health England (2017) – St Edmundsbury District Health Profile 2017. Retrieved from http://fingertipsreports.phe.org.uk/health-profiles/2017/e07000204.pdf.