

Promoting Healthy and Sustainable Cities Best practices In Public Health

ITF Project Workshop Assessing Health Impacts of Low Carbon Transport Scenarios in Urban Areas

Aliénor Lerouge - OECD Health Division - March 2024



Best Practices in Public Health: Helping policy makers to implement the right interventions for their country













To help policy makers select, implement and evaluate public health interventions Available now Booklet of best practices addressing diet and physical activity Available now Booklet of best practices on integrated care Available now, hot off the press Booklet of best practices on healthy and sustainable cities Plan to release in Q3-2024 Booklet of best practices promoting mental health Work in progress, expected in 2024

Cities can play a key role in promoting healthier lifestyles and sustainability



Globally, more than 2 in 3 persons will live in cities by 2050, but our cities do not promote health



Our work makes the economic case for scaling up best practices to promote health, including in cities

Public goods and services including physical infrastructure projects

- Cycle superhighways (DNK)
- Cycling cities Utrecht (NLD)
- Complete Streets (USA)
- People First City (ESP)
- Smart Traffic Signals (DNK)
- Velib Paris (FRA)

Economic tools supporting active modes of travel

- Congestion charge Stockholm (SWE)
- Reduction in public transport fares (PRT)
- Cycling Kilometric Allowance (BEL)

Information and education on active modes of transport

- CycleOn (Doortrappen) (NED)
- Beat The Street (GBR)

Regulatory approaches and car-free zones

- Superblocks Barcelona (ESP)
- Exercise, Enliven, Encounter, Potential at the Doorstep in Bern and Zurich (CHE)





The Assessed Case Studies Are Best Practices To Increase Physical Activity and Decrease Pollution and Emissions



Evaluation of policies is based on the SPHeP-NCD model part of the OECD SPHeP models framework

In the past decade, OECD has developed a range of models, sharing the same architecture and the same data framework to assess the burden of major public health issues, and to evaluate to potential impact of public health options, both on population health and on the broader economy (health expenditures, labor market, GDP, wellbeing...).



The SPHeP-NCD model



SPHeP-NCDs: Diseases and Risk Factors Overview

Diseases	Risk factors							Physiological RFs					
	BMI	Physical activity	Blood Pressure	Smoking	Pollution	Alcohol	Diet	Salt	Diabetes	Depressi on	Chronic Diseases	Stroke	Cirrhosis
CVDs (MI, Stroke, Atrial Fibrillation)	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х			
Diabetes	Х	Х		Х	Х	Х	Х						
COPD				Х	Х								
Lung Cancer				Х	Х				Х				
Breast Cancer	Х	Х				Х	Х		Х				
Colorectal Caner	Х	Х		Х		Х	Х						
Stomach Cancer				Х			Х						
Cirrhosis						Х							
Alcohol Use Disorder						Х							
Liver Cancer						Х			Х				Х
Other cancers (Lip, larynx, prostate, cervix, melanoma, oesophageal)						Х							
Lower respiratory infections					Х	Х							
Dementia	Х								Х	Х		Х	
Mental Health (MDD, Anxiety, AUD)	Х			Х							Х		
Injuries						Х							
Musculoskeletal Disorders	Х												

11

The assessment of the impact of scenarios is carryed out in a two-step process



diseases

Redesigning the urban environment to promote health and wellbeing: the case of Superblocks in Barcelona (ESP)

CURRENT SITUATION





EXERCISE ALL THE RIGHTS THAT THE CITY OFFERS. HIGHEST AIM: ACTIVE CITIZEN.

THROUGH





Barcelona streets for road traffic: superblock scenario

Parameters	Superblocks model inputs
Individual Effectivness	 individuals who switch to active modes of transport thanks to Superblocks increase their physical activity by an average of 146 MET/minutes per week. According to ITF simulations: PM2.5 decreases by 13,5 %
Eligible population and target coverage	 According (Mueller et al., 2020[29]) 19.2% of population (aged 10 to 80) switch to active modes of transport as a result of Superblocks Only Urban population is eligible to the intervention The target coverage is to implement superblocks like interventions is 50 % of all urban area
Cost of implementation	 4,11 EUR per individual (living in a targeted urban area) per year

If Scaled Up Across Spain And The OECD, The Superblocks Model Would Improve People's Health...

l



... And Would Save Money To The Healthcare System Of Countries



DO NOT CITE: PRELIMINARY RESULTS

Many Thanks For Your Attention



Visit our website



