



15 September 2017

Public transport fare changes
Freepost 3156
Greater Wellington Regional Council
PO BOX 11 646
Manners Street
Wellington 6142

Dear Sir/Madam

**Re: Submission on Better Metlink fares
Proposed variation to fare policies in the Regional Public Transport Plan**

Thank you for the opportunity to provide a written submission on this consultation document.

Regional Public Health serves the greater Wellington region, through its three district health boards (DHBs): Capital & Coast, Hutt Valley and Wairarapa and as a service is part of the Hutt Valley District Health Board.

We work with our community to make it a healthier safer place to live. We promote good health, prevent disease, and improve the quality of life for our population, with a particular focus on children, Māori and working with primary care organisations. Our staff include a range of occupations such as: medical officers of health, public health advisors, health protection officers, public health nurses, and public health analysts.

We are happy to provide further advice or clarification on any of the points raised in our written submission. The contact point for this submission is:

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Public Health Registrar
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Tel: 04 570 9411

Kind regards

Dr Jill McKenzie
Medical Officer of Health

Peter Gush
Service Manager

Summary of key recommendations

1. Regional Public Health (RPH) **supports** concessionary fares for population groups who have greater transport disadvantage.
2. RPH **recommends** an impact analysis of electronic ticketing and of the proposed fare changes for low income households in terms of accessibility and affordability, supported by an analysis of the frequency of cash payments in this transport disadvantaged group.
3. RPH strongly **recommends** that vulnerable communities are proactively supported to participate in the review of their local public transport services including fare changes, zone boundary changes and network changes.

General comments on the proposed changes

- Delivering quality public transport that is affordable and convenient is important for providing personal mobility and freedom for people to get to the places where they live, learn, work and play. Health benefits of public transport include reduced traffic congestion, pollution emissions and road traffic crashes, increased physical activity, enhanced mental well-being, and improved access to medical care¹. Affordability of public transport can also reduce financial stress for people who live in low-income households, as the associated costs tend to be very regressive when measured against household income (i.e. constituting higher proportions of household expenditure in low-income households).²
- Public transport is particularly essential for people who are transport disadvantaged, a term applied to people who have difficulty accessing transport.³ Specific sub-groups of the population tend to experience significantly more transport disadvantage such as children, youth, the elderly, low-income households, students and people with disabilities.
- RPH strongly **supports** a focus on equity between population groups with concessions for the transport disadvantaged. Problems with unequal access to public transport and reduced transport options for vulnerable communities include increased social isolation, reduced access to key amenities and destinations (health services, access to healthy foods, and recreational facilities), and reduced opportunities for employment.

¹ Liman, T (2010). *Evaluation Public Transportation Health Benefits*. Victoria: Victoria Transport Policy Institute.

² Liman, T (2017). *Transportation Affordability Evaluation and Improvement Strategies*. Victoria: Victoria Transport Policy Institute.

³ Rosier, K, McDonald, M (2011). *The relationship between transport and disadvantage in Australia*. Australia: Australian Institute of Family Studies.

- The transport disadvantaged not included in the proposed concessionary fares include low-income households, youth not at school and part-time students. In particular, low income households and people living in more deprived areas are more likely not to have access to a private vehicle.⁴ The New Zealand Household Travel Survey 2015 found that 60% of people in households with no vehicle used public transport in the last year, much higher than households with vehicles⁵. Therefore, low-income households are more likely to be dependent on public transport to meet their access needs including access to health services and healthy food. An accessible and affordable public transport system can help ameliorate transport disadvantage for this vulnerable group.
- Barriers to the transport disadvantaged benefitting from off-peak concessionary fares include travel requirements at peak time periods for work, study, or health service appointments; inability to afford the purchase of the Snapper card, the maintenance of a credit balance, or a 10-trip rail ticket to be eligible for concessions; and increased likelihood of needing to pay in cash (which incurs a 25% premium). If not already completed, RPH **recommends** that an impact analysis is undertaken to consider how the proposed fare changes could impact affordability and access for low income households or people living in more deprived areas in order to identify barriers and mitigation strategies. Consultation with Work and Income and District Health Boards should be considered as part of the impact assessment for the proposed fare increase. An analysis of the users of public transport in more deprived areas and the frequency of cash payments for these patrons would also aid an impact assessment. Some of the impact of fares increases on low income people could be mitigated through concessionary cash fares at all times for people with a community services card or the availability of free Snapper cards.
- RPH **recommends** that vulnerable communities are proactively supported to participate in the review of their local public transport services to facilitate identification of issues and solutions. This is particularly important when considering zone boundary and fare changes that may impact the local community and the transport disadvantaged. Ensuring that community meetings are promoted and accessible to vulnerable communities will enable more representative public participation. Consultation may be more effective if targeted to settings reaching the transport disadvantaged and utilising existing networks such as Māori and Pacific service providers.

⁴ Atkinson, J, Salmond, C, Crampton, P. NZDep2013 Index of Deprivation. Wellington: Department of Public Health, University of Otago.

⁵ Ministry of Transport (2015). *New Zealand Household Travel Survey 2011-2014*. Wellington: Ministry of Transport.

- In order to ensure that vulnerable communities are well-informed following finalisation of decisions, RPH **recommends** that an effective and comprehensive media strategy is developed communicating the proposed fare, boundary and network changes.

Response to specific questions

2. Do you support a discount for full-time tertiary students?

Yes, RPH supports provision of concessionary fares for full-time tertiary students at all times, as students require travel at peak times to attend studies. Many students lack personal transportation and making public transport more affordable to the unwaged would increase the proportion of people continuing to use public transport. Furthermore, distances travelled by students are increasing as there is a shortfall of student housing in Wellington city. This is in line with other cities such as Auckland, Dunedin and Palmerston North.

3. Do you support a discount for the blind and disabled?

Yes, RPH supports provision of concessionary fares for patrons who are blind or have a disability. This transport disadvantaged group are usually dependent on public transport to meet their access needs as they are generally not able to drive. In addition, they also include a higher proportion of people with low-incomes and concessionary fares will make public transport more affordable.

4. Do you support a new policy to encourage more frequent use of public transport, more off-peak travel and greater use of electronic ticketing?

As previously noted, there are many health benefits of increased public transport patronage, with additional benefits for social well-being, the environment and economic productivity.⁶ RPH **supports** measures that increase patronage equitably including the adoption of an integrated ticketing system, concessions for the transport disadvantaged (particularly for children and people who are blind or have disabilities), and free bus transfers providing quick and easy connections.

Promoting travel at off-peak times can support managing demand at peak travel times. Off-peak travellers are more likely to not be working and/or without access to a personal vehicle (such as youth not at school, older persons, unemployed, and stay-at-home parents).

Therefore, RPH **supports** reductions for off-peak travel as this will mostly affect those who have the greatest reliance on public transport to meet their access needs.

⁶ Liman, T (2010). Evaluation Public Transportation Health Benefits. Victoria: Victoria Transport Policy Institute

RPH **supports** a ticketing system that enables affordable, quick and easy connections.

Electronic ticketing will increase the efficiency of the ticketing system. However, electronic ticketing tends to benefit the transport advantaged and it can be a barrier for the transport disadvantaged due to cost barriers (of a pre-loaded Snapper Card) within a group who may be more likely to use public transport if they can pay in cash. No New Zealand data was found on the impact of electronic ticketing and frequency of cash payments for public transport in low-income households. A 2012 report by Transport for London found a lower proportion of people from low-income households have access to an Oyster card than the proportion of all Londoners (43% compared to 54%) and they are additionally less likely to use any Travelcard (1% compared to 12% on buses).⁷ Therefore, if not already completed, RPH **recommends** an impact analysis of an electronic ticketing system on low-income households or people living in more deprived areas (alongside the impact analysis recommended in the general comments on the proposed fare changes and the frequency of cash payments on low-income households).

6. Do you support the proposed 3% general fare increase to help offset the cost of the proposed changes?

The 3% general fare increase will be applied to all ticket prices (including cash and electronic) and across all modes of transport. Fare increases have the potential to impact the transport disadvantaged and, as discussed in the general comments, the impact of a fare change on low-income households should be considered.

⁷ Transport for London (2012). *Understanding the travel needs of London's diverse communities. People on Low Incomes*. London: Transport for London.