Encouraging shifts from driving to public transportation

Public transportation not only gets people to the places they need to go, but also encourages physical activity because people typically walk or bike to and from transit locations. Policies that support public transportation, walking, and biking—as well as funding to implement these policies—are essential for promoting healthier lifestyles.

Opportunities to Promote Shifts from Driving to Public Transportation

» Create dedicated bicycle sections and bicycle carriers on public transportation.
» Increase bicyclist and pedestrian access to transit stops and storage.
» Increase bicycle parking stations.
» Provide route maps, schedules, and integrated fare systems.
» Increase local parking and toll fees.
» Encourage variable tolls and congestion pricing.
» Create and maintain bicycle and pedestrian amenities like benches, curb ramps, and landscaping.
» Accommodate people with disabilities.
» Improve transit marketing.
» Improve access to public transportation.
» Improve transportation safety.

Vehicle Miles Traveled (VMT)¹

VMT is a metric that indicates how much people drive. It can be decreased through:

- Mileage or other user fees, including fuel taxes.
- Pay-as-you-go insurance.
- Fees for access to road facilities.
- Charges for access to street parking.
- Congestion charges.
- Pricing measures (see more below).

These approaches discourage unnecessary vehicle trips and reduce the need or incentive to circle for an open space.

Opportunities to Reduce VMT Through Pricing Measures¹

- Adjust the costs of operating a motor vehicle.
- Adjust the cost of street and lot parking.
- Encourage variable tolls and congestion pricing.

¹ Turn for more »
In 2008, Oregon Gov. Ted Kulongoski proposed setting specific targets for car use to meet established greenhouse gas emissions goals. As noted above, auto use is typically measured by VMT, the number of miles that residential vehicles are driven within a given time and location.

VMT is influenced by a number of factors, including urban density, income levels, and accessibility of public transportation. Gov. Kulongoski’s proposal would have given funds to Oregon’s six metropolitan planning organizations (MPOs) to design and implement VMT reduction plans using a variety of policies, including pricing measures and investments in public transit.

Upstream Public Health, a nonprofit organization, identified the statewide VMT-reduction plan as a policy that could significantly affect Oregonians’ health in ways that had not yet been fully examined.

In January 2009, Upstream received funding from the Northwest Health Foundation to assess how VMT reduction strategies being considered by Oregon’s six metropolitan regions would bring about changes in air quality, physical activity, and car accident rates—and what impact that would have on the public’s health.

The research used the steps of a health impact assessment (HIA), a tool used to evaluate the effect of a proposed policy or project on public well-being and to promote decisions that are most beneficial for health.

This HIA’s purpose was to inform the debate within the Oregon legislature about the value of state policy and provide information for local planning agencies to better incorporate health considerations into planning activities.

The study demonstrated that reducing VMT would have significant health benefits. The research examined 11 different policies that could reduce VMT and recommended the five that would be the most beneficial to the public.

The development of this resource was supported by the Cooperative Agreement Number EH11-1110 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.