

Edinburgh medics call on City Council to keep active travel measures

More than 140 leading doctors and health professionals in Edinburgh have written an open letter to the City Council supporting the retention and extension of changes to the city's travel infrastructure.

The medics say the changes are potentially life-saving. The letter says they have the twin benefits of improving public health and mitigating the climate emergency.

During Scotland's first lockdown, The City of Edinburgh Council made a host of changes to paths, pavements, walkways and cycle lanes to allow for residents to exercise whilst maintaining physical distancing. The council has said that the project saw a surge in people walking and cycling.

The letter has been prepared by Dr Laura McWhirter, who is Consultant Neuropsychiatrist in Edinburgh:

"As health professionals, we have a responsibility to protect and promote the health of the population. We have a responsibility to address inequalities and to advocate for the needs of the most deprived and disadvantaged members of the population we serve.

"We are concerned about the impact of the climate crisis on health, globally and locally.

"We support the retention, and further development and integration of infrastructures designed to support active travel and clean air for the whole population of Edinburgh, to mitigate inequalities in health, local mobility, and air quality. We are concerned that suggested steps to reverse active travel measures introduced during the COVID-19 pandemic would be a retrograde and harmful step for the health of the population of Edinburgh."

The open letter has been welcomed by the walking and cycling charity Sustrans and by the recently formed group Better Edinburgh for Sustainable Travel.

Sustrans Deputy CEO John Lauder said: "I fully support what these leading medical professionals are calling for. All the evidence shows that more cycling and walking is good for public health and has proven environmental benefits in tackling the climate emergency. There just isn't a logical argument to prevent making it easy to get about actively.

"It is clear that the way we travel, work, spend time with each other and enjoy our urban spaces have been changed by the pandemic. It is increasingly clear that there is no 'old normal' to go back to."

Speaking on behalf of Better Edinburgh for Sustainable Travel, a collective of community groups across Edinburgh that promote active travel, Stella Thomson said: "We welcome this vital letter to councillors from medical professionals. The case for the rapid development of

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a safe active travel network across Edinburgh, and a significant reduction in vehicular traffic, is unequivocal.

“We cannot afford further delays. Everyone, especially children, should have the opportunity to walk, wheel or cycle if they are able, to breathe clean air, and to feel safe on our city’s streets.

“As the signatories point out, well designed active travel infrastructure will reduce inequalities and improve access for all. We hope the letter will encourage all councillors to make the bold and transformative decisions required to address both the climate emergency and public health. It is time to end the domination of traffic in so many of our streets and neighbourhoods.”

The full letter and list of signatories is appended below.

The letter is also available as a webpage ideal for sharing on social media at:

<https://tiny.one/medics4activetravel>

For further information please contact:

Dr Laura McWhirter on lauramcw@doctors.org.uk or 07747 533036

Edinburgh
September 2021

Open letter to the City of Edinburgh Council

Dear Councillors,

We are a group of doctors and other health professionals, living or working in Edinburgh, and write to support the retention and extension of changes to travel infrastructure in Edinburgh and the Lothians, to improve public health and mitigate climate emergency. We hope that the points and evidence below will support the council to make decisions that will help to benefit, protect, and reduce inequalities in the health of the population of Edinburgh.

Climate crisis and health

One of the duties of a doctor as stated by the General Medical Council is “to protect and promote the health of patients and the public”¹. As health professionals we have been reminded by our professional bodies of our responsibilities to raise the profile of the climate emergency, which is a public health emergency likely to have a much greater impact than COVID-19^{2,3}. We have a responsibility to speak up for disadvantaged groups who are disproportionately vulnerable to the health and economic impacts of the climate crisis.

Health inequality

Deprivation is strongly associated with poor health outcomes. Premature death remains four times higher in the most deprived areas of Scotland compared with the least deprived areas⁴. In NHS Lothian, the most deprived areas have 67% more deaths than the overall average. Within the City of Edinburgh, men living in the least deprived areas can expect to live for 11 years longer than those in the most deprived areas, and women can expect to live for 8 years longer⁵.

Those living in areas of deprivation are less likely to drive but much more likely to be injured in a road traffic collision⁶. Rates of pedestrian casualties are twice as high in children as in adults, and pedestrians over 70 years of age have the highest fatality rate⁷.

Many of our patients do not have the financial means, health status, or abilities to access private car transport. Children, the frail elderly, and people with chronic illnesses or disabilities are disadvantaged in opportunities to access services and community by systems which prioritise private car transport.

Moves to promote safe active travel, including widening of pavements and provision of segregated paths, make the urban environment more accessible for people with disabilities and release road space for reliable and efficient public transport.

Measures to improve the urban environment and promote active travel in Edinburgh will differentially benefit the most disadvantaged members of our community and so help to reduce health inequalities in Edinburgh. We ask that councillors carefully consider the differential impact of decisions to prioritise private car transport on those for whom private car transport is not an option.

Air pollution and health

Air pollution is strongly associated with poor health outcomes⁸. A joint Royal College of Physicians and Royal College of Paediatrics and Child Health report estimated that outdoor air pollution causes 40,000 deaths a year in the UK⁹. Data from Scotland shows a particularly strong association between air pollution and respiratory disease and deaths¹⁰. Transport – predominantly car transport – is the main source of air pollution in Scotland¹¹.

Edinburgh City Council has six Air Quality Management Areas, with concerning levels of air pollution related to vehicular traffic¹².

Decisive action from the council to promote active travel and reduce private car traffic in Edinburgh will help to reduce air pollution and associated harm to health.

Physical activity and health

Regular physical activity is associated with improved health outcomes at all ages¹³.

UK Chief Medical Officers recommend that children and young people should engage in moderate physical activity for at least one hour every day. For adults, 150 minutes of moderate activity per week is associated with a 40% reduction in risk of type 2 diabetes, 35% reduction in heart disease, 25% reduction in joint and back pain, and 20% reduction in bowel and breast cancer¹³.

National data indicates that in Scotland during 2019 only 66% of adults met this target, whilst in the same year fewer than 50% of journeys under two miles were made on foot¹⁴.

Segregated active travel infrastructure allows everyone to increase their physical activity levels through active travel; not only those who already enjoy regular physical activity.

We ask that the council considers the beneficial and protective health effects of physical activity when considering its decisions about travel infrastructure in Edinburgh.

Behaviour change for public health

Changing established patterns of behaviour is difficult. We understand that a move away from the current position of private car dependency can feel difficult.

Bold Scottish strategies have led to strikingly effective population shifts in behaviour for better health; tobacco smoking restrictions have saved many lives, and early data suggests that minimum alcohol unit pricing has reduced amount of alcohol purchased by the heaviest alcohol consumers^{15,16}. Both of these strategies met with initial resistance, but are now broadly supported.

Now, local government in Edinburgh has the potential to lead a bold and exemplary modal shift away from car-dependence which will benefit and protect the health of the people of Edinburgh.

Key points:

- As health professionals, we have a responsibility to protect and promote the health of the population. We have a responsibility to address inequalities and to advocate for the needs of the most deprived and disadvantaged members of the population we serve.
- We are concerned about the impact of the climate crisis on health, globally and locally.
- We are concerned about harms to health caused by air pollution in Edinburgh.
- Regular physical activity is associated with improved health outcomes at all ages.
- We support the retention, and further development and integration of infrastructures designed to support active travel and clean air for the whole population of Edinburgh, to mitigate inequalities in health, local mobility, and air quality.
- This includes quiet routes in the vicinity of schools to allow safe active travel for families, an integrated network of segregated safe paths for cycling, city-wide subsidised cycle hire programmes, and low-emission zones.
- We are concerned that suggested steps to reverse active travel measures introduced during the COVID-19 pandemic would be a retrograde and harmful step for the health of the population of Edinburgh.

Yours sincerely,

Dr Laura McWhirter, Consultant Neuropsychiatrist, Edinburgh

Neil Aitken, Physiotherapist, Neil Aitken Physiotherapy Ltd, Edinburgh

Dr Niall H. Anderson, Senior Lecturer in Medical Statistics, Usher Institute, University of Edinburgh

Dr Ross Archibald, Consultant in Emergency Medicine, NHS Lothian

Dr Erika Aspinall, General Practitioner, NHS Lothian

Dr Katherine Atkins, Chancellor's Fellow, Edinburgh Medical School, University of Edinburgh

Dr Paul Bailey, General Practitioner, NHS Lothian

Miss Emily Baird, Consultant, Children's Orthopaedics, Royal Hospital for Children and Young People Edinburgh

Dr Kasia Banas, UG Talent Lead and Programme Director in Data-Driven Innovation for Health and Social Care, Usher Institute, University of Edinburgh

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Dr Ravneet Batra, Consultant Liaison Psychiatrist, Regional Infectious Diseases Unit, Western General Hospital

Dr Roland Baumann, General Practitioner, Niddrie Medical Practice, Edinburgh

Dr Craig Beattie, Consultant Anaesthetist, Royal Infirmary of Edinburgh

Dr Monika Beatty, Consultant in Critical Care, Royal Infirmary of Edinburgh

Dr Sam Bennett, Foundation Doctor, Acute Medicine, Western General Hospital

Ms Katherine Bethell, Advanced Nurse Practitioner and Programme Manager, Chalmers Sexual Health Centre (Lothian) and Sandyford Centre (GGC)

Dr David Birrell, Emergency medicine trainee, Royal infirmary of Edinburgh; Honorary Clinical Fellow, University of Edinburgh

Professor James Boardman, Professor of Neonatal Medicine, University of Edinburgh

Dr Friederike Boellert, Respiratory Consultant, Western General Hospital, Edinburgh

Dr Kirsty Boyd, Reader in Palliative Care, Usher Institute, University of Edinburgh

Dr Tom Bloomfield, Consultant Anaesthetist, Royal Infirmary of Edinburgh

Mr Paul Brennan, Reader and Honorary Consultant Neurosurgeon, University of Edinburgh and NHS Lothian

Mr Iain Brown, Consultant Orthopaedic Surgeon, Royal Infirmary of Edinburgh

Dr John Budd, General Practitioner, Edinburgh Access Practice, and Co-ordinator of Lothian Deprivation Interest Group

Dr Rosamunde Burns, Consultant Anaesthetist, Royal Infirmary of Edinburgh

Dr Peter Cairns, General Practitioner, Wester Hailes Medical Practice

Professor Alan Carson, Consultant Neuropsychiatrist, University of Edinburgh

Dr Simon Chillingworth, Consultant Anaesthetist, Royal Infirmary of Edinburgh

Professor Richard Chin, Professor of Paediatric Neurology and Clinical Epidemiology, Honorary Consultant Paediatric Neurologist, University of Edinburgh and The Royal Hospital for Children and Young People

Dr Sarah Clay, Locum General Practitioner, Niddrie Medical Practice, and Specialty Doctor in Palliative Care

Dr Elizabeth Cole, Anaesthetics registrar, Royal Infirmary of Edinburgh

Dr Catherine Collinson, Consultant Anaesthetist, Department of Anaesthesia, Royal Infirmary of Edinburgh

Dr Claire Cooke-Jones, Trainee Anaesthetist, Royal Infirmary of Edinburgh

Dr Robert Cooke-Jones, Trainee General Practitioner, Inchpark Surgery, Edinburgh

Dr Nadine Cossette, Consultant Liaison Psychiatrist, Royal Infirmary of Edinburgh

Dr Helen Creedon, Clinical Fellow in Oncology, University of Edinburgh

Dr Julia Critchley, Consultant Anaesthetist, Royal Infirmary of Edinburgh

Dr Craig Davidson, Consultant in Emergency Medicine, NHS Lothian

Professor Adrian Davis, Professor of Transport & Health, Edinburgh Napier University

Dr Christopher Dickens, General Practitioner, Edinburgh

Ms Lynsey Downie, Anaesthesia Associate, Edinburgh Royal Infirmary

Mr Andrew Duckworth, Senior Lecturer and Consultant Orthopaedic Trauma Surgeon, Edinburgh Orthopaedics and University of Edinburgh

Mr Joseph Duncumb, Orthopaedic Surgery Registrar, Royal Infirmary of Edinburgh

Dr Tamasin Evans, Consultant Clinical Oncologist, Edinburgh Cancer Centre

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Dr Alasdair Fitzgerald, Clinical Lead, Rehabilitation Services and Consultant in Neurorehabilitation, Astley Ainslie Hospital, Edinburgh

Dr Nicholas Fletcher, Trainee General Practitioner, NHS Education Scotland

Professor Sue Fletcher-Watson, Chair in Developmental Psychology, Division of Psychiatry, University of Edinburgh

Mr Martin Gemmell, Principal Educational Psychologist, City of Edinburgh Council

Ms Paula Gardiner, Neurological Specialist Physiotherapist and Cognitive Behavioural Therapist, Edinburgh

Dr Cameron J Fairfield, Clinical Research Fellow, University of Edinburgh

Dr Gavin Francis, General Practitioner, Dalkeith Road Medical Practice, Edinburgh

Dr Allan Gordon, Retired Consultant Obstetrician and Gynaecologist, Edinburgh

Dr Claire Gordon, Consultant in Acute Medicine, Western General Hospital, Edinburgh

Dr Rebecca Gormley, Anaesthetic Core Trainee, Royal Infirmary of Edinburgh

Dr Peter S Hall, Honorary Consultant Medical Oncologist, Edinburgh Cancer Centre at St John's Hospital and the Western General Hospital

Dr Helen Hare, Junior Doctor, Edinburgh Royal Infirmary

Dr Simon Heaney, Consultant Anaesthetist, Royal Infirmary of Edinburgh

Dr Ingrid Hoeritzauer, Consultant Neurologist and Acute Traumatic Brain Injury Rehabilitation, Royal Infirmary of Edinburgh

Dr Catriona Howes, Consultant Psychiatrist, Western General Hospital, Edinburgh

Dr Seán Keating, Consultant in Cardiothoracic Anaesthesia and Intensive Care Medicine, Royal Infirmary of Edinburgh

Dr Malik Jahangeer, Consultant Clinical Oncologist and Honorary Senior Clinical Lecturer, University of Edinburgh

Dr Marc Janssens, Consultant Anaesthetist, Royal Infirmary of Edinburgh

Mr Aimun Jamjoom, Speciality Neurosurgery Trainee, Edinburgh Royal Infirmary

Dr Michelle Jeffrey, Consultant Sports and Exercise Medicine, Sportscotland Institute of Sport, Oriam, Edinburgh

Dr Guy Johnson, General Practitioner (retired), Sighthill Health Centre

Professor John Keating, Consultant Orthopaedic Surgeon, Royal Infirmary of Edinburgh; Honorary Senior Lecturer, Edinburgh University

Dr Stephanie Kelly, Clinical Fellow in Intensive Care, Royal Infirmary of Edinburgh

Dr Dean Kerlake, Consultant, Royal Infirmary of Edinburgh

Dr Alice King, Trainee General Practitioner, Edinburgh

Dr Oliver Koch, Consultant & Honorary Senior Clinical Lecturer in Infectious Diseases, Regional Infectious Diseases Unit, Western General Hospital

Dr Rebecca Lawrence, Consultant Psychiatrist in Addictions, Royal Edinburgh Hospital

Mr Graham Lawson, Consultant Orthopaedic Surgeon, Royal Infirmary of Edinburgh

Yvonne Leavy, Lead Clinical Nurse Specialist (epilepsy) Department for Clinical Neurosciences, RHCYP, Royal Infirmary of Edinburgh

Dr Katharine Logan, Consultant Psychiatrist in Psychotherapy, Rivers Centre, Edinburgh

Dr Nazir Lone, Honorary Consultant and Senior Lecturer in Critical Care, Royal Infirmary of Edinburgh, NHS Lothian and University of Edinburgh

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Dr Carey Lunan, General Practitioner, Craigmillar Medical Group

Dr Saturnino Luz, Reader in Medical Informatics, Usher Institute, Medical School, The University of Edinburgh

Dr Sonia MacCallum, General Practitioner, Niddrie Medical Practice

Dr Claire Mackintosh, Consultant Infectious Disease Physician and Clinical Director, Regional Infectious Disease Unit, NHS Lothian

Dr Ivan Marples, Consultant in Pain Medicine and Anaesthesia, Leith Community Treatment Centre

Dr Katie Marwick, Clinical Lecturer in Psychiatry, University of Edinburgh

Dr Alexander von Maydell, Junior Doctor, Royal Infirmary of Edinburgh

Miss Julie McBirnie, Consultant Orthopaedic Surgeon, Spire Shawfair Park Hospital

Professor Alison McCallum, Centre for Population Health Sciences, Usher Institute, University of Edinburgh

Dr Dermot McKeown, Consultant Anaesthetist, Royal Infirmary of Edinburgh

Professor Andrew McIntosh, Professor of Biological Psychiatry and Honorary Consultant Psychiatrist, University of Edinburgh

Dr Christina McManus, Doctor, Western General Hospital

Dr Carinne McMurray, General Practitioner, Craigmillar Medical Group

Professor Stewart Mercer, Professor of Primary Care and Multimorbidity, Usher Institute, University of Edinburgh; General Practitioner, NHS Lothian

Dr Eve Miller-Hodges, Senior Clinical Lecturer & Honorary Consultant in Inherited Metabolic Disorders and Renal Medicine, Scottish Inherited Metabolic Disorders Service & University of Edinburgh

Dr Lyle Moncur, Consultant in Emergency Medicine, Royal Infirmary of Edinburgh

Mr Matthew Moran, Consultant Orthopaedic Surgeon, Royal Infirmary of Edinburgh

Dr Catriona Morton, General Practitioner, Craigmillar Medical Group

Dr Megan Mowbray, Consultant Dermatologist, Clinical Lead Dermatology, Skin Cancer Lead NHS Fife, Queen Margaret Hospital, Dunfermline (& resident of Edinburgh)

Mr Samuel Molyneux, Consultant in Trauma and Orthopaedic Surgery, Royal Infirmary of Edinburgh

Ms Mome Mukherjee, Senior Research Fellow, Usher Institute, University of Edinburgh

Dr Nóra Murray-Cavanagh, Clinical Lead General Practitioner, Wester Hailes Medical Practice

Dr Susan Nelson, General Practitioner, Mackenzie Medical Centre, Edinburgh

Dr Anna Noble, General Practitioner, Wester Hailes Medical Practice

David Obree, Archie Duncan Fellow in Medical Ethics and Fellow in Medical Education, Usher Institute, University of Edinburgh

Dr Richard O'Brien, Consultant Stroke Physician, Royal Infirmary of Edinburgh, Honorary Clinical Senior Lecturer, University of Edinburgh

Dr Laura O'Conaire, General Practitioner, Braefoot Medical Practice, Edinburgh

Dr Rory O'Conaire, General Practitioner, West End Medical Practice, Edinburgh

Dr Ailis Orr, Consultant Paediatrician, Royal Hospital for Children and Young People, Edinburgh

Mr James Patton, Clinical Director Orthopaedics, Consultant Orthopaedic Surgeon, Royal Infirmary Edinburgh

Dr Sharon Peoples, Consultant in Clinical Oncology, Edinburgh Cancer Centre

Dr. Meghan Perry, Consultant Physician and Honorary Senior Clinical Lecturer in Infectious Diseases and General Internal Medicine, Western General Hospital, Edinburgh

Professor Martyn Pickersgill, Co-Director of Research, Usher Institute, University of Edinburgh

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Dr Evgeniya Plotnikova, Teaching Fellow, Master of Public Health Programme, University of Edinburgh

Dr S.G. Potts, Consultant in Transplant Psychiatry, Royal Infirmary of Edinburgh

Dr Michael Quinn, General Practitioner, Craigmillar Medical Group

Dr Martin Quirke, Research Fellow, Centre for Environment, Dementia and Ageing Research, University of Stirling (& resident of Edinburgh)

Dr Kristiina Rannikmäe, Consultant Neurologist and Clinical Research Fellow, Forth Valley Royal Hospital and University of Edinburgh

Ms Aïcha Reid, Registered Educational Psychologist, Edinburgh

Dr Helga Rhein, General Practitioner (retired), Edinburgh

Dr Helen Riches, General Practitioner, Restalrig Park Medical Centre, Edinburgh

Professor Craig Ritchie, Professor of Psychiatry of Ageing, University of Edinburgh; Director of Brain Health Scotland

Dr Alasdair Ruthven, Consultant Anaesthetist, Royal Infirmary of Edinburgh

Professor Rustam Al-Shahi Salman, Professor of Clinical Neurology at the University of Edinburgh; Honorary consultant neurologist in NHS Lothian

Dr Euan Sandilands, Consultant Toxicologist and Director National Poisons Information Service (Edinburgh); Honorary Clinical Senior Lecturer, University of Edinburgh

Ms Chloe Scott, Consultant Trauma and Orthopaedic Surgeon, Royal Infirmary of Edinburgh

Dr Ann Sergeant, Consultant Dermatologist, NHS Fife (Edinburgh resident)

Dr Anthony Simon, General Practitioner, Craigmillar Medical Group

Dr Chris Smith, Foundation Doctor, Western General Hospital, Edinburgh

Dr Nick Spencer, Anaesthetic Trainee, Western General Hospital, Edinburgh

Dr Andrew Stanfield, Senior Clinical Research Fellow and Honorary Consultant Psychiatrist, University of Edinburgh

Dr Elizabeth Steel, Consultant Anaesthetist, Royal infirmary Edinburgh

Professor Jon Stone, Consultant Neurologist, Edinburgh Royal Infirmary and University of Edinburgh

Professor Cathie Sudlow, Professor of Neurology and Clinical Epidemiology and Head of the Centre for Medical Informatics, Usher Institute, University of Edinburgh

Dr Digby Thomas, General Practitioner to the homeless 2001-2021, Edinburgh Homeless/Access Practice

Dr Sarah Thompson, Consultant Anaesthetist, Royal Infirmary of Edinburgh

Professor Lindsay Thomson, Professor of Forensic Psychiatry, University of Edinburgh; Medical Director of the State Hospitals Board for Scotland and the Forensic Mental Health Managed Care Network

Dr Fionn Toolis, General Practitioner, Wester Hailes Medical Practice, Edinburgh

Professor Neil Turner, Professor of Nephrology, University of Edinburgh; Honorary Consultant, Royal Infirmary of Edinburgh

Dr Stefan Unger, Consultant Respiratory Paediatrician, Royal Hospital for Children and Young People

Dr Helen Usher, Consultant Anaesthetist, Royal Infirmary of Edinburgh

Dr Anna te Water Naudé, Acute Medicine Core Trainee, Royal Infirmary of Edinburgh

Stephen Walls, Senior Charge Nurse, General Intensive Care, Royal Infirmary of Edinburgh

Dr Charles Wallis, Consultant Anaesthetist and Chair of Bicycle Users Group, Western General Hospital

Dr Andrew Watson, Associate Medical Director for Psychiatry, NHS Lothian

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Ms Abby White, Psychiatric Nurse, Edinburgh

Mr T.O. White, Consultant Orthopaedic Trauma Surgeon (Clinical Lead for Trauma), Royal Infirmary Edinburgh, and Honorary Lecturer, University of Edinburgh

Dr William Whiteley, Reader in Neurology, University of Edinburgh; Honorary Consultant Neurologist, NHS Lothian

Dr E.B. Wilson, Emergency Department Consultant, Emergency Department, Royal Infirmary of Edinburgh

Dr Hilary Young, General Practitioner, Mackenzie Medical Centre / University of Edinburgh

References

1. General Medical Council. *Good Medical Practice.*; 2013. Accessed August 21, 2021. www.gmc-uk.org/guidance.
2. The Lancet Public Health. Mitigating climate change must be a priority for public health. *Lancet Public Heal*. Published online August 2021. doi:10.1016/S2468-2667(21)00190-0
3. Hurley R. Doctors declare climate emergency and call for tighter targets. *BMJ*. 2019;365:l4445. doi:10.1136/bmj.l4445
4. Office of National Statistics. *Long-Term Monitoring of Health Inequalities : January 2020 Report.*; 2020. Accessed August 21, 2021. <https://www.gov.scot/publications/long-term-monitoring-health-inequalities-january-2020-report/>
5. Scottish Public Health Observatory. Online Profiles Tool. Accessed August 21, 2021. <https://www.scotpho.org.uk/comparative-health/profiles/online-profiles-tool>
6. The Scottish Public Health Observatory. Injuries: Road traffic injuries. Published 2021. Accessed August 21, 2021. <https://www.scotpho.org.uk/health-wellbeing-and-disease/injuries/data/road-traffic-injuries/>
7. Transport Scotland. *Commentary.*; 2018. Accessed August 21, 2021. <https://www.transport.gov.scot/publication/reported-road-casualties-scotland-2018/commentary>
8. WHO. Health and the environment: addressing the health impact of air pollution. *Sixty-Eighth World Heal Assem Agenda 68/18 Item 146*. 2015;(2012):6. Accessed August 21, 2021. https://apps.who.int/iris/bitstream/handle/10665/253237/A68_R8-en.pdf?sequence=1&isAllowed=y
9. RCP Policy: Public Health. *Every Breath We Take: The Lifelong Impact of Air Pollution | RCP London.*; 2018. Accessed August 21, 2021. <https://www.rcplondon.ac.uk/projects/outputs/every-breath-we-take-lifelong-impact-air-pollution>
10. Scottish Government Health and Environment Working Group. *Cleaner Air for Scotland (CAFS) Strategy - HEWG Final Report.*; 2019. Accessed August 21, 2021. <http://www.scottishairquality.scot/assets/documents/Health-Environment-Working-Group-Report.pdf>
11. Scotland's environment. Air quality | Scotland's environment web. Published 2017. Accessed August 21, 2021. <https://www.environment.gov.scot/our-environment/air/air-quality/#policyAndLegislation>
12. Department for Environment Food and Rural Affairs. Air Quality Management Areas (AQMAs). Accessed August 21, 2021. <https://uk-air.defra.gov.uk/aqma/list?la=E&country=scotland&pollutant=all>
13. Davies DSC, Atherton F, McBride M, Calderwood C. UK Chief Medical Officers' Physical Activity Guidelines. *Dep Heal Soc Care*. 2019;(September):1-65. Accessed August 21, 2021. <https://www.gov.uk/government/publications/physical-activity-guidelines-uk-chief-medical-officers-report>
14. Scottish Government. National Indicator Performance | National Performance Framework. www.nationalperformance.gov.scot. Published 2020. Accessed August 21, 2021. <https://nationalperformance.gov.scot/measuring-progress/national-indicator-performance>
15. Anderson P, O'Donnell A, Kaner E, Llopis EJ, Mantney J, Rehm J. Impact of minimum unit pricing on alcohol purchases in Scotland and Wales: controlled interrupted time series analyses. *Lancet Public Heal*. 2021;6(8):e557-e565. doi:10.1016/S2468-2667(21)00052-9
16. Pell JP, Haw S, Cobbe S, et al. Smoke-free Legislation and Hospitalizations for Acute Coronary Syndrome. *N Engl J Med*. 2008;359(5):482-491. doi:10.1056/nejmsa0706740