

Transportation

SAFE, CONVENIENT, EFFECTIVE, AND EFFICIENT MOVEMENT OF PEOPLE AND GOODS

Why It's Important

We are a society in motion, and in both the Twin Cities and Greater Minnesota, transportation is key to all of our daily activities. We use it to access our food, health care services, and our connections to family, friends and faith communities. Transportation connects the people, natural resources and businesses within the state to each other and to markets and resources outside the state and country, improves education and job security, strengthens social connections, supports mental health, and provides access to recreation.¹ Additionally, transportation provides women and mothers with the ability to access prenatal care, bring their children to childcare, attend school, and maintain employment. In Minnesota, 8 percent of women who did not receive prenatal care, as early as they wanted, reported having no transportation was a contributing factor.² Transportation is one of the economic and social factors that influences people's health and the health of a community.³ When there is access to better transportation options, there is, in turn, an opportunity for healthier lives for community members. Walkable, bikeable, transit-oriented communities are associated with healthier populations that have more physical activity, lower body weight, lower rates of traffic injuries, less air pollution, and improved mobility for non-drivers.³

"[Women, children, and families need] dependable rides [especially] single parents need them. Some can't afford a car, can barely afford rent. So if their one car breaks down who helps out... no one. There is no one to provide help." – Needs Assessment Discovery Survey respondent

Public transport provides critical transportation for transit-dependent people who do not own their own car or do not drive. This population tends to consist of young people without their driver's license, disabled persons, low-income workers, and a significant proportion of seniors.⁴ In 2010, half of transit riders in Greater Minnesota reported not having either a car or a driver's license.⁵

Focus on Health Equity

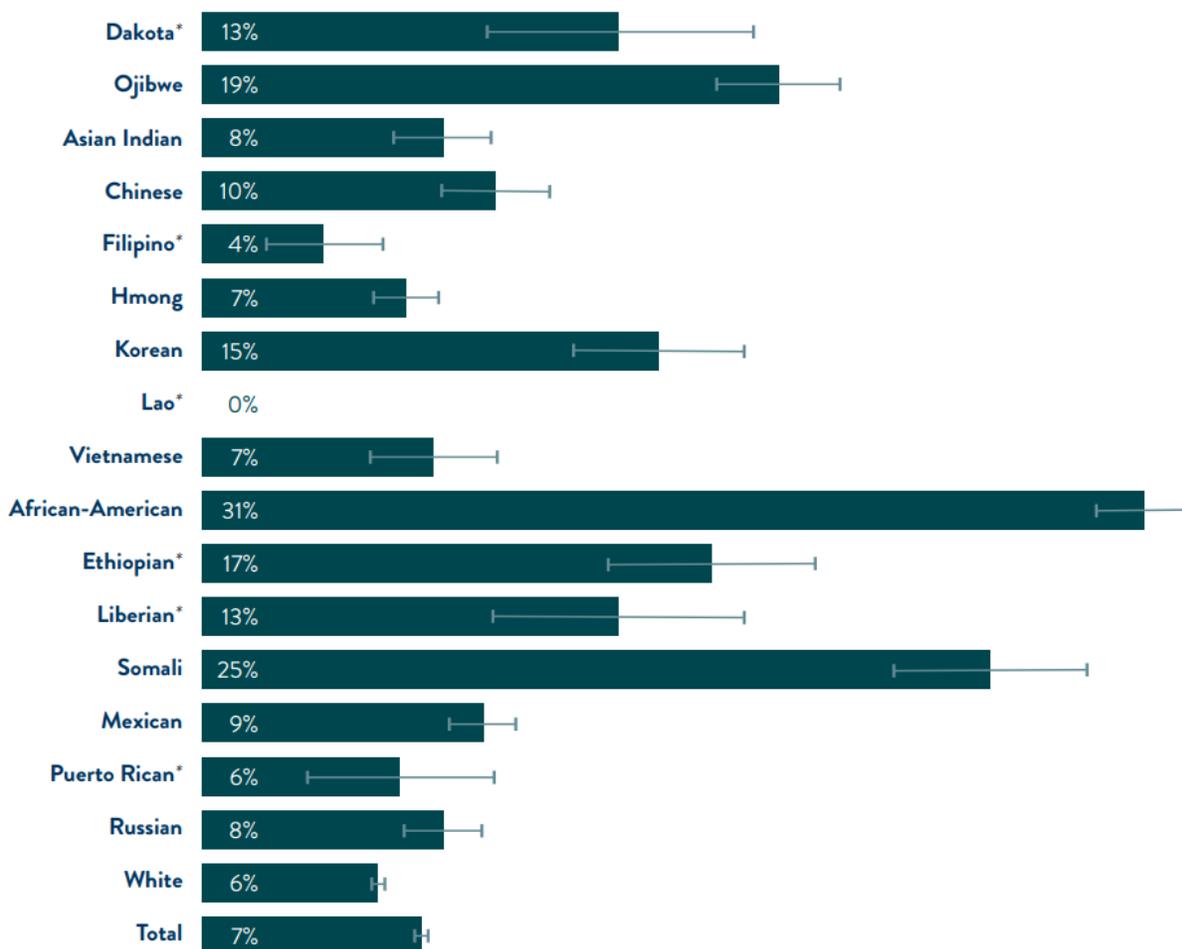
Reliable and affordable transportation is important for equity in health. Equitable transportation supports the health of communities by ensuring that everyone can get where they need to go. This data story focuses on three populations who are disproportionately disadvantaged by the transportation inequity in Minnesota – low-income individuals and families, rural populations, and individuals living with disabilities.

Low-income populations, including many communities of color and American Indians, often live in industrial neighborhoods or near busy roads and freeways (which serve people who own cars and live in areas further out).¹ On average, about 50 percent of people living in high poverty areas live within 300 meters of a busy road, which are defined as roadway segments that have annual average daily traffic counts above 10,000 cars or trucks, compared to about 27 percent in low poverty areas.⁵ Heavy motor vehicle traffic can limit walking and physical activity, is a potential safety hazard and exposes residents to more noise and air pollution.^{5,6}

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Income is a major factor when considering transportation options. In all parts of the state, access to a reliable car is often a significant challenge, and therefore public transit becomes critical to people’s daily lives. Of the rider survey respondents in Greater Minnesota, 62 percent reported household incomes of less than \$20,000. In the Twin Cities, 47 percent of bus riders and 34 percent of light rail riders reported having incomes of less than \$25,000.⁷ The cost of owning and operating a car is \$9,000 a year on average; far from affordable for many people living in Minnesota.⁸ Figure 1 displays the disproportionate distribution of households without of vehicle in Minnesota.

Figure 1. Share of Households without a Vehicle, 2012-2016



Source: U.S. Census Bureau’s American Community Survey from the Economic of Minnesotans, 2018

Rural populations, especially communities located outside a five-mile radius of a city or town, often have reduced transportation options.

“Regardless of what we’re studying, we almost know before we start studying it that transportation is going to come up as an issue. Transportation is just an enormous challenge in rural communities. Now, that’s nothing new. That’s nothing people don’t already know, but it’s something that’s so important. So thinking about how we connect communities, to how people access services and event and health care, and get together with one another.” – Key Informant Interview with Carrie Henning-Smith, Assistant Professor at the University of Minnesota School of Public Health

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For people with disabilities, who may be prevented from driving or affording a car, public transportation can help access jobs and health care, among other things. This allows them the opportunity to lead independent lives and participate fully in the economy. It is estimated that, in the Twin Cities, the population of people with disabilities will grow anywhere between 36 and 92 percent by 2030. In rural communities, which already face inequities in transportation, the share of riders who are seniors and persons with disabilities is higher than in large cities.⁷ In 2016 public transit in Greater Minnesota provided 250,157 rides on elderly and disabled complementary paratransit services, a 4 percent increase from the previous year.⁶

Additional Data Considerations

In 2016:

- Public transit systems provided 97.1 million rides in the Twin Cities Metro, a 6 percent increase from 2015.
- In the Metro, 61 percent of rides were on the bus and 24 percent on the light rail. Light rail ridership increased 44 percent from 2015.
- In the same year, public transit systems provided 11.7 million rides in Greater Minnesota. Over three million of these rides were provided by rural transit providers, a 7 percent increase from 2015.

Discovery Survey Responses

In the summer of 2018, Minnesota's Title V Maternal and Child Health Needs Assessment distributed a Discovery Survey asking people living in Minnesota, "What are the biggest unmet needs of women, children, and families in your community?" More than 2,700 people responded and transportation was mentioned as the greatest unmet need in the respondent's community 285 times. Transportation responses included the need for available and improved public transportation as well as personal vehicle ownership.

Important Note on Equity and Intersectionality

The Minnesota Department of Health's Title V Needs Assessment team acknowledges that structural (social, economic, political and environmental) inequities can result in poor health outcomes across generations. They have a greater influence on health outcomes than individual choices or a person's ability to access health care, and not all communities are impacted in the same way.

All people living in Minnesota benefit when we reduce health disparities.

We also acknowledge that the topic addressed in this data story does not exist in isolation— which is important to remember as we do needs assessments and as we start thinking about how we approach solutions. In addition to the needs themselves being intersectional, there are also intersecting processes and systems through which power and inequity are produced, reproduced, and actively resisted.

Citations

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