DUNDEE PERSONALISED TRAVEL PLANNING

FINAL REPORT; EXECUTIVE SUMMARY

Report

06 April 2011
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JMP was commissioned by Dundee City Council to deliver a major Personalised Travel Planning (PTP) project as part of the Dundee Travel Active initiative.

The purpose of the report is to provide a summary of all activity undertaken during the Dundee PTP project. It covers the period of our commission from April 2009 to December 2010.

Dundee Travel Active aims “to encourage active travel to improve the physical health and mental wellbeing of residents of and visitors to central Dundee”. The PTP programme is the first large-scale application of its kind in the UK that promotes active travel and active lifestyles specifically to improve public health.

The main focus of our work has been to deliver PTP to residents at their doorsteps. However, we have also worked explicitly through a number of other different ‘pathways’ to encourage change with:

- School children;
- University students;
- City centre employers;
- Members of community groups;
- Visitors to Dundee; and
- Individuals with recognised health needs.

The outcomes from the PTP programme provide evidence of the success of this type of approach in increasing activity levels for a large proportion of the population. More than 3,400 householders have engaged with the project, receiving personalised active travel advice at their doorstep.

Forty per cent of everyone participating in the project reported an increase in physical activity following a conversation with one of our team. Half of these people also reported that at least one other member of their household had also increased their activity levels.

The average level of reported increase in activity, at just over twenty minutes per day on average, is enough to make a contribution to improved health for many people.

There is evidence that target groups have benefited from the interventions, showing that this type of approach can help to overcome health inequalities. A noticeably greater proportion of people that describe their own health as ‘not good’ reported that they had increased their activity than people in better health (50% of people in poor health reported exercising more compared with 41% of people in ‘fairly good’ health and 37% in ‘good’ health).
2 Background

Dundee Travel Active project area
The Dundee Travel Active project area comprises the entire city centre, plus the residential areas generically described as Hilltown, Stobswell and the West End and is shown in Figure 2.

Figure 2 Dundee Travel Active project area

The risks of an inactive lifestyle
In Tayside, only 41% of men and 31% of women currently get the amounts of physical activity recommended to maintain good health. Increased physical activity is proven to have a significant benefit to long-term physical health (including reduced risk of cancer, coronary heart disease and stroke) and both short and long term benefits to mental wellbeing.

Adaption of PTP to improve health
Our work in Dundee has used traditional PTP techniques established in previous large-scale programmes and adapted them to the promotion of active lifestyles. Our work drew on JMP’s extensive experience of PTP delivery; to date our teams have engaged with over 25,000 UK residents to influence their travel behaviour.

The main aim of the PTP work was to encourage walking or cycling as a replacement for sedentary modes wherever possible. However, as the project progressed, we found that the team were having just as much success in encouraging people to be active in their leisure time as facilitating shifts in mode choice.

The PTP work employed a range of social marketing techniques that are well established within the transport, health and other sustainable sectors. We aimed, with each participant to:

- Give prompts: Give reminders at appropriate times to “do” a certain type of behaviour, e.g. fridge magnet with “Are you getting your 5x30?”;
- Change social norms: Raise awareness that other people are also doing similar active behaviours, e.g. publishing case studies of participants in local press;
- Communicate effectively: Focus on specific, positive messages on how people can benefit e.g. “walking to work twice a week could save you £300 a year”;
- Provide incentives: Incentivise people to make desired changes e.g. free bus tickets, prize draws for people completing active challenges; and
- Ensure convenience: Make it easy for people to make a change by providing relevant information, e.g. bus timetables, cycle maps.

1 Scottish Health Survey, 2009
3 Project Design

Number of households targeted
There are 16,540 residential households in the project area; we were contracted to offer PTP services to 13,500 of them and with individuals through a number of other pathways.

Approximately 4,800 households were visited in 2009 with the remaining 8,700 households in 2010.

Project team
The most critical element in delivering a successful PTP programme is having a high quality team of motivated and enthusiastic Travel Advisors. We were very fortunate in both years of the project to have a dedicated team who we were able to retain throughout the core periods of engagement.

We recruited a team of nine temporary staff to deliver the residential engagement during each year of the project (comprising Travel Advisors and an office administrator). A permanent JMP staff member acted as team leader.

The temporary team comprised local people, to ensure that the project provided local employment in Dundee, and also to have a team that was knowledgeable of the area and could relate to local residents.

We invested significant time in training our team and were fortunate to benefit from the input into the training programme by representatives from NHS Tayside and Dundee Community Health Partnership.

Figure 3 PTP team 2010

The team was based in a shop unit in the Wellgate Shopping Centre. This provided us with a highly visible presence, particularly amongst local residents who use the centre as a through route.

The team worked to strict policies for Health & Safety, for the protection of data and to a Customer Charter, which set out service standards.

Project resources
The PTP project used a wide range of information leaflets, drawing on existing material produced by other organisations, and those designed by JMP specifically for the project.

We provided information and maps on walking and cycling routes, details of local community activities such as fitness classes and walking groups, resources designed specifically for children, as well as a range of leaflets providing advice on activity for specific health conditions.

Every householder participating in the project also received a copy of ‘Discovering an active lifestyle’ leaflet which gave general information on being more active and how Dundee Travel Active could help.

Figure 4 Selection of resources
4 Overview of approach to residential PTP

In summary, the approach to the residential engagement was:

- An introductory letter was delivered to households to explain the project. This was hand delivered by Travel Advisors around five days in advance of the first scheduled visit;
- Up to three attempts were made to contact people at home (i.e. weekday daytime, weekday evening and Saturdays);
- A 'missed you' leaflet was hand delivered to all households if the third and final visit still did not achieve contact with the householder. This leaflet gave residents details of how to take part or to arrange a visit from the team at a more suitable time;

Figure 5 Doorstep conversation with West End resident

- If a Travel Advisor was able to make contact with the householder, a conversation would take place at the doorstep. Through this, the Travel Advisor would seek to understand an individual’s travel and activity habits and motivations to change; offering suggestions and supporting resources to help them consider new activities that they might be willing to try out;
- Participants were encouraged to take up a bespoke active challenge, agreed between participant and Travel Advisor, which encourage the recipient to complete a specific action (e.g. walking to work);
- Packs of relevant resources were hand delivered to the householder within five days of the initial doorstep conversation;
- Individuals who express enthusiasm for changing behaviour were offered a one to one ‘advanced PTP’ visit, with encouragement to undertake further activity and receive detailed advice.

Aftercare service

A customer aftercare service was carried out by telephone three to four weeks after the doorstep conversation. This sought to determine satisfaction with our service and to identify whether individuals had made any change to their activity levels.

Aftercare surveys were completed by 507 individuals. The results indicated that the vast majority of participants had a positive view of the project:

- 96% of respondents found the conversation with the Travel Advisor either very or fairly useful;
- 97% of respondents rated the quality of the information provided either very good or fairly good;
- 98% of respondents were either very satisfied or fairly satisfied with the overall service provided by the team.

Figure 6 Active challenge postcard

I completed my Travel Active Challenge by:

- [ ] Walking to work this morning (or walk for 15 minutes)
- [ ] Non-work travel
- [ ] Visitor travel
- [ ] Formal fitness
- [ ] Public transport
- [ ] Active transport
- [ ] Other

Please send me my reward for completing my Dundee Travel Active Challenge.

Choose from:

- a voucher for one free leisure activity at the Olympia Leisure Centre or
- a Dundee Travel Active sports bottle

Prize Draw

Tick here to enter the Dundee Travel Active Challenge Prize Draw for your chance to win one of a number of great prizes.

I am 18 years of age or over (if not, please cross out above text).

Go on... get travel active
5 Contact with residents

Contact rate
A total of 13,514 residential households were visited by our team. We made contact with residents in a total of 5,913 (44%) of them (as the householder opened their door to the Travel Advisor).

As shown in Figure 7, the contact rate does not vary too greatly between each of the areas targeted.

Conversion rate
Conversion is defined to be the success of getting a resident that has opened their door to participate in the project.

It is highly reassuring to report that when they did open their door to an advisor, the majority of residents did participate.

Of the 5,913 households opening their door, 3,436 chose to participate, equating to an overall 62% conversion rate (note that the conversion rate excludes those households who told us that they were not able to participate for mobility or incapacity reasons).

Households in the West End (both Inner and Outer) and Stobswell were more likely to have a conversation with a Travel Advisor.

Participation rate
Figure 7 shows the overall participation rate by geographic area. This indicates that the more deprived areas have a smaller proportion of residents participating but that a substantial part of the population in each area did receive advice from us.

Figure 7 Contact, conversion and participation rates by geographic area

Resources issued
Approximately 15,500 pieces of information were requested and distributed during the residential engagement, equating to an average of 4.5 resources per participating household. The Dundee Health Walks, Dundee Walking Guide and Dundee Cycle Map were the three most requested resources.

Uptake of challenges
Across the two years of the project, 1,645 active challenges were issued, equating to just under half of all participants agreeing to undertake a challenge. Walking and 5x30 challenges were the most frequently issued.

Figure 8 Active challenge prize draw winner
6 Contact with residents (continued)

Summary of behaviour change

The data from the aftercare service have been used to identify the level of behaviour change achieved by project participants.

The results are highly encouraging as it shows that the PTP approach has made a noticeable contribution to improved health for Dundee’s residents.

- 40% of everyone participating reported an increase in walking as a result;
- Half of all those individuals who reported that they had increased their activity reported that at least one other resident in their household had also increased their activity levels;
- There are therefore estimated to be over 2,000 people that have been walking more as a result of the residential interventions;
- The average level of reported increase is enough to make a contribution to improved health for many people (a little over 20 minutes per day on average);
- A noticeably greater proportion of people that describe their own health as ‘not good’ reported that they had increased walking than people in better health (50% of people in poor health reported exercising more, compared to 41% of people in ‘fair’ health and 37% in ‘good’ health). This provides an indication that the approach can help overcome health inequalities;
- 7% of participants reported they had increased the amount of cycling they do;
- There was no net change in bus use (6% of participants said they were using the bus more, a separate 6% less); and
- 7% said they were using the car less.

Sustainability of reported changes

The increase in activity is sustained over time for most people. A survey of participants found that 76% of people that reported increasing walking said that they had maintained the increase 4-6 months after our intervention.

Benefits of increased activity

68% of all the people saying they get more exercise say they feel better for it. The majority of respondents have reported benefits to their physical health and mental wellbeing. Some of the quotes we have received from participants are:

- “Walking seems to help my knee problem”
- “My fitness is improving, I feel I can walk quicker and for longer periods now”
- “I am speaking to more people and don’t feel so isolated”
- “I enjoyed walking into work in the morning and am also feeling better for the effort I put in”
- “I didn’t realise Dundee has so many nice walks”

Figure 8 Travel Advisor with participant during walk up Dundee Law

[Photo of participant and Travel Advisor during walk up Dundee Law]
This section summarises the work completed on non-residential pathways.

Primary schools

We visited twelve primary schools between October 2009 and December 2010. Four of these schools (Charleston, Fintry, Lochee and Rowantree) were outside the Dundee Travel Active project area, in schools that had contacted us directly to request a visit from us having heard good feedback from the initial visits.

Our work involved a class being divided into small groups, then each group undertaking activities on the theme of active travel and road safety, led by our Travel Advisors and teaching staff.

Around a fortnight later, the class undertaking the workshop gave a presentation on active travel at a full school assembly and presented decorated tabards during a fashion show.

In total, 17 primary school classes have had intensive sessions with our Travel Advisors (approximately 460 pupils) and twelve full-school assemblies (approximately 2,400 pupils) have had presentations on active travel.

The primary school interventions were deemed to be very successful, as determined by the response shown by the pupils, school staff and from our Travel Advisors. The fact that we were asked to revisit a number of schools, and received requests from schools outside the project area points to the head teachers seeing the benefits of our interventions.

Secondary schools

We undertook interventions with three secondary schools in June 2010 by attending transition events at Morgan Academy, Harris Academy and St John’s RC High School. We provided 35 Personal Journey Plans (PJPs) to pupils for their journey to their new school.

It is estimated that we engaged with approximately 130 pupils through a variety of different ways at the transition events.

In June 2010 we revisited some of the schools where we had previously held sessions to undertake ‘hands-up’ surveys of pupils in order to evaluate the outcomes of the workshops.

Analysis of the responses shows that 81% of pupils reported that they were more aware of
8 Approaches and outcomes of non-residential PTP (continued)

Community groups
Considerable effort was put into engaging a range of community groups. During the course of the project, we made contact with 39 community groups and community centres. By the end of the project in December 2010, we had undertaken either one-off or ongoing interventions with 22 of them.

It has been challenging to engage with groups, with most of the effort and staff resource going into making the initial contacts and setting up the interventions.

Figure 11 Guided walk with Ellen Mhor community group

For the majority of groups, our interventions have focussed on a one-off engagement, typically involving giving a presentation to the group. However, we have undertaken more intensive work with a small number of groups on an ongoing basis. Typically, this has involved taking group members on a guided walk or organising activity sessions with them (such as rounders or tennis games).

It is estimated that we have engaged with around 250 community group members through the range of interventions described.

Community events
The team attended many community events during the course of the project. In the main, this involved Travel Advisors being present at the event with a stall to offer resources and active challenges to member of the public.

Travel Advisors also visited community facilities (such as local libraries) to offer information and advice to their users.

City centre visitors
We attended a number of events within the city centre that were aimed primarily at visitors. These included Farmers Markets and Winter Light Night events, as well as regular promotional activities in the Wellgate Centre.

Overall, 347 individuals signed up to take part in an active challenge through the various community and city centre events.

Individuals with recognised health needs
We attempted to develop a number of links with existing health promotion initiatives in Dundee, by offering PTP to individuals participating in:

- Health checks undertaken by the community nursing team in the Wellgate Centre;
- Active for Life exercise referral scheme at Olympia Leisure Centre.

We also gave presentations to various health professionals in an attempt to identify how they could signpost patients into the PTP work.

In total, we engaged with around 60 individuals through the health pathway, through a combination of Active for Life, health checks and the limited engagement in the two health centres and Kings Cross Hospital.

Despite the enthusiasm and effort of NHS Tayside Health Promotion staff, the lack of engagement by front-line health sector staff has been particularly frustrating.
University students
We engaged with students of The University of Dundee and The University of Abertay through a series of ongoing interventions throughout the period of the project.

We attended Freshers events in both years of the project (with our stall located in the main area used for the event along with a range of other stallholders). We also visited the universities on a number of occasions with our own stall, typically located within a communal area in the main campus buildings.

Figure 12 University of Dundee Freshers Fayre

At these events, our team engaged in discussions with students, handed out printed resources and promotional materials as well as encouraged students to sign up for an active challenge.

Overall, the project database recorded that 297 students had participated in the project through the various university events.

It is estimated however that we engaged with well over one thousand students, as there were a significant number of students who have had a conversation with the Travel Advisors at the stall and taken printed resources, but did not necessarily want to undertake an active challenge or provide personal details.

City centre employers
We set out to engage with staff of small, medium and large organisations; due to the boundary of the project area, this meant that efforts were focussed on contacting those employers based in Dundee city centre.

Typically, our interventions have focussed on:

- Having a stall within a communal area of the workplace (such as reception, canteen, staff room) over the course of a day/lunchtime;
- Arranging and leading a lunchtime walk; or
- Organising a group challenge, whereby employees compete against each other to see who can be the most active over the course of a week/fortnight.

Engagement has taken place with nine employers, comprising a range of public and private sector organisations, and it is estimated that we engaged with approximately 500 staff in total.

Overall, engagement with employers has not been as easy as expected, with very few organisations coming forward to express an interest in engaging with the project.

Figure 13 Grey Lodge staff
10 Additional activities undertaken during the PTP project

Additional PTP activities
In addition to the work required as part of our commission, our team developed and delivered a significant number of other activities over and above the engagement described in the above sections.

In summary, we:

- Organised and promoted two celebratory events in Baxter Park (on 13 March and 25 September 2010) to which participants in 2009 and 2010 PTP work were invited;
- Produced newsletters in February and September 2010 and distributed them to all residential participants to date;
- Designed and distributed posters in local shops, community centres and libraries to let local residents know that Travel Advisors were visiting their area;
- Developed and maintained a Facebook page for Anthony Active; and
- Used the Anthony Active costume at a large number of events.

Support given to other Dundee Travel Active activities
The team also contributed to a number of other Dundee Travel Active projects, including:

- Supported, mainly over the autumn and winter period of 2009/2010, the promotion and marketing work stream;
- Maintained an administrative service for the adults’ cycle training scheme, linking trainees to trainers and processing invoices;
- Assisted, through the identification of appropriate community havens, with the establishment of Dundee’s independent travel training scheme;
- Supported Dundee City Council’s Safe Parking at Schools initiative by providing Travel Advisor resource at most primary schools in Dundee on most school day afternoons between April and December 2010;
- Provided initial and ongoing support to the Community and Student Bike Boost schemes.

Advocacy of Dundee Travel Active
JMP staff presented to a number of professional and interest groups/conferences about the work being undertaken and the benefits of delivering behavioural change in Dundee. The purpose of this was to raise the profile of Dundee and the work to improve population health.

We also issued succinct summaries of the PTP work and its outcomes to selected contacts from both transport planning and health sectors that JMP knew to be interested in learning from the experiences of Dundee Travel Active.

Figure 14 Baxter Park celebratory event

Figure 14 Anthony Active Facebook page
**Summary of outcomes**

JMP has delivered a major project of personalised travel planning as part of the Dundee Travel Active programme.

The project has actively engaged with around 9,000 residents of and visitors to the city, raising awareness of and opportunities for being more active.

More than 3,400 householders have engaged with the project at their doorstep, receiving personalised active travel advice at their doorstep.

Forty per cent of all participants have told us they are walking more, and half of all of these say that other people in their household are also getting more activity.

The amount of additional walking that individuals report they are getting is sufficient to improve the health of many (over 20 minutes per person per day). A wide variety of physical health and mental wellbeing benefits are reported by participants.

The approach enables many people that have poor health to increase activity, giving confidence that health inequalities have not been increased (50% of people who rate their health to be poor report getting more exercise, compared to the 40% average).

Successful engagement has also taken place with many primary schools in Dundee, and our work with community groups has delivered real benefits to members of those groups. We have significantly raised awareness of active travel through attendance at community events.

**Lessons learned**

Through the project, a number of key messages have become apparent, including:

- That social marketing techniques work to change behaviour of Dundee residents, with positive outcomes delivered and (given careful project design and execution) few risks;
- That people that do engage are, in almost every case, supportive of the project and pleased to receive advice on how to get more active;
- That advisors believe that it is easier for many residents of the project area to get more activity in their leisure time, rather than as a replacement for existing sedentary travel choices;
- That we have largely not managed to encourage local people to engage with their peers to promote active travel on a voluntary basis. This has not been a major part of our approach (some PTP projects aim to use such mechanisms as the main way to deliver change) but we have sought opportunities to facilitate this in Dundee. This finding potentially has significant implications for other programmes that are seeking to use this type of co-production approach.

**In conclusion**

A substantial proportion of the population of Dundee are getting more activity as a result of engaging with the Dundee Travel Active PTP project.

We have sought to provide a high-quality service to enhance the reputation of Dundee Travel Active and Dundee City Council. We have been assisted throughout by a committed team of local people that we have employed as Travel Advisors and by strong support from many local stakeholders.

We have shown that PTP can contribute to achieving positive outcomes that support local objectives in Dundee. We have proven that transport interventions can contribute directly to improving public health.