Transport Poverty in NI:

A Health Equity Perspective

Report 2025

Belfast Healthy Cities is a partnership organisation that aims to develop Belfast as a healthy, equitable and sustainable city, and coordinates action on behalf of Belfast as a member of the World Health Organization (WHO) European Healthy Cities Network. The aim of the Healthy Cities movement is to bring stakeholders across sectors together to create healthier places, and its key role is to create tools and models for intersectoral collaboration. The role of Belfast Healthy Cities in Northern Ireland is to support local policy makers, elected representatives and practitioners through collating and sharing evidence on healthy places, building capacity and sharing learning on existing good practice, and piloting innovative concepts and ways of working.

Belfast Healthy Cities is pleased to have ongoing support from Belfast City Council, Public Health Agency, Belfast Health and Social Care Trust and NI Housing Executive.

Ministerial Foreword

Our health and well-being is impacted by issues beyond the clinical services we receive, with the environment in which we live playing a significant role in determining our health outcomes and our ability to live healthy lives.

Since becoming Health Minister just over a year ago, I have made addressing health inequalities one of my key areas of focus. I welcome this report and congratulate Belfast Healthy Cities for their work in researching and compiling it.

Transport plays a key role in our ability to access health services. Transport poverty can lead to isolation and stress, reduced opportunities to be physically active, and financial hardship. It can exacerbate inequalities, and it is vital that we continue to work together to improve access to transport.

This report will be a valuable aid and will be used to inform future policy discussions.

MIKE NESBITT
Minister for Health

Ministerial Foreword

Transport is not just about bicycles, trains and roads. It's about enabling people to engage actively in society and it often influences how we live, work and socialise. It is fundamental to our health and well-being as we rely on it for many daily activities.

When there is a lack of access to inclusive, affordable, reliable and safe transport options, it can leave us isolated, not able to access work or to reach key services. Perhaps even more importantly it can stop us from connecting with others.

This report reflects on local transport poverty and how it impacts on the lives of many of our citizens. It challenges us to make improvements to the transport network that will not only unlock economic, educational and social opportunities, but will also improve the physical and mental well-being of numerous people.

Due to years of historic underfunding, our current transport network is sadly in need of investment. Improving our transport system will be a significant undertaking and the funding position is challenging, yet this report highlights why we must work collaboratively to maximise the social, economic and health outcomes for our people, particularly those who are disproportionately impacted by transport poverty.

LIZ KIMMINS
Minister for Infrastructure

MESSAGE FROM BELFAST HEALTHY CITIES

As many people struggle to meet the demands of a rising cost of living it is arguably more important now than ever to consider all factors that influence individuals' ability to meet their basic needs and lead long and healthy lives.

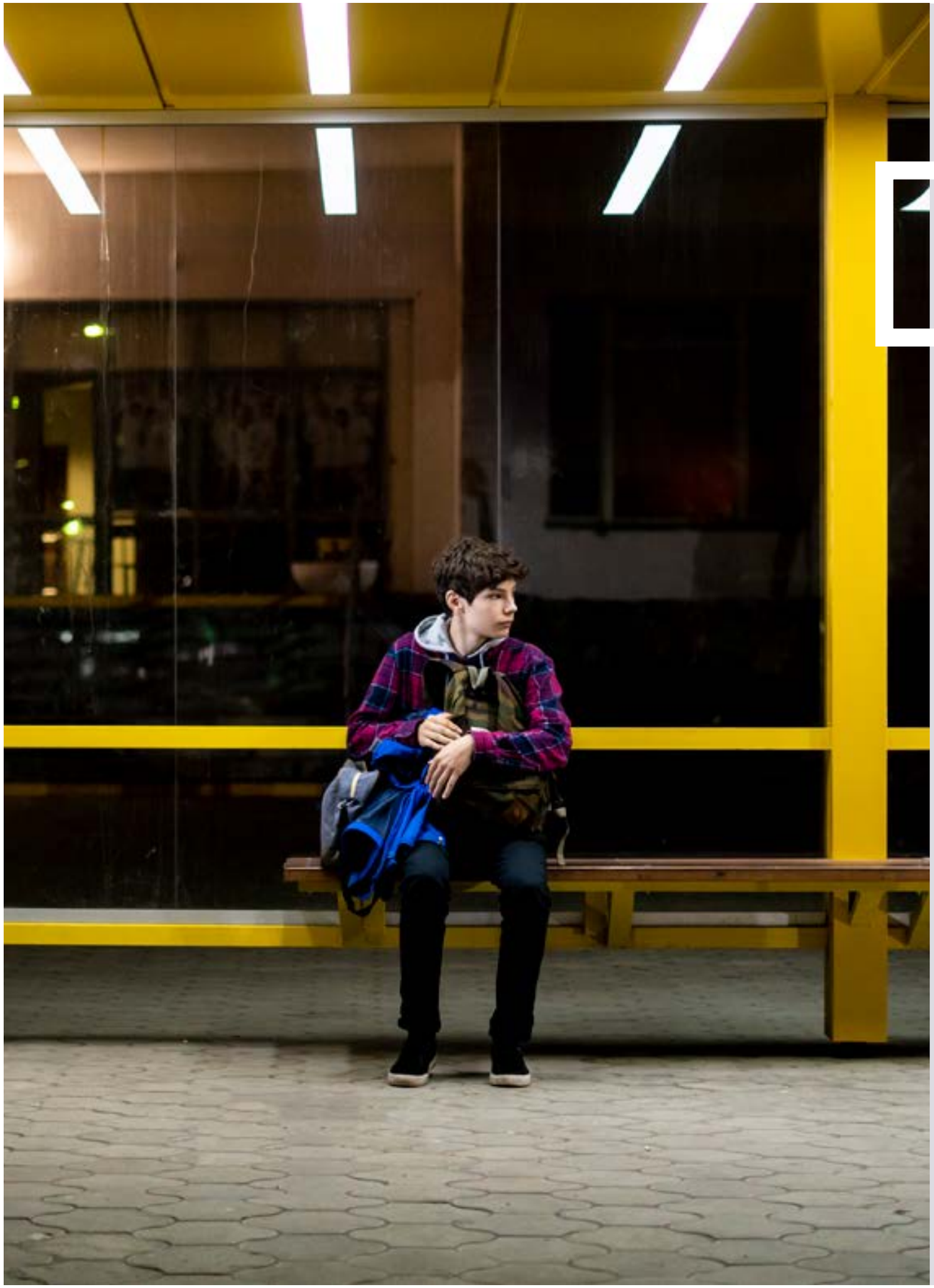
Poverty is a complex and multifaceted issue, shaped by a range of interrelated factors and experienced differently across diverse communities and individual circumstances. Among these factors, transport plays a critical role. Transport poverty—where individuals lack adequate access to reliable, safe, accessible, and affordable transport can significantly impact overall poverty. Effective transport systems are essential for accessing healthcare, education, employment, essential services, and enable social connections. Without this access, individuals and families may struggle to meet their social, economic, and health needs. This, in turn, reinforces existing inequalities and creates new barriers, particularly for the most marginalised groups in society.

It is therefore important to consider the multifaceted transport system which exists in Northern Ireland and the key issues which cause individuals and families to face transport poverty. Such as rural isolation, inadequate public transport infrastructure, urban congestion, gender disparities and environmental impacts. Addressing these issues through enhancing public transport accessibility, improving and prioritising active travel infrastructure, investment in community transport solutions, and development of a Transport and Health Strategy for Northern Ireland and Strategic Transport Poverty Forum, can all work toward improving inequalities and break the cycle of poverty.

As part of the World Health Organization's European Healthy Cities Network, Belfast Healthy Cities works across the 6 Ps framework: Peace, Planet, People, Prosperity, Participation, and Place. To reach targets set out in these priority areas, our programmes of work are categorised across topic areas: Healthy Transport, Greening the City, Community Prosperity and Increasing Knowledge and Learning. Our work in Healthy Transport aims to promote the use and development of sustainable and health-enhancing modes of transport as a means of addressing health inequalities. By promoting active travel alongside advocating for improved access to safe, affordable, and accessible transport options, we also seek to reduce the impact of transport poverty and hereby reduce inequities. This report sets out to explore the links between transport poverty and health inequality, highlight the lived experiences of those most affected, and provide recommendations for policy and practice to create more equitable, inclusive transport systems that work alongside active travel to support healthier communities and reduce social and economic exclusion.

CHARLENE BROOKS
Chief Executive Belfast Healthy Cities

Contents



Introduction

Transport is a fundamental part of everyday life, enabling people to access employment, education, healthcare and social opportunities. However, for many individuals and communities, the ability to travel freely and affordably is severely restricted. Transport poverty, the lack of access to affordable, reliable and safe transport options, has far-reaching consequences, exacerbating social inequality, economic hardship and health disparities.

As a member of WHO European Healthy Cities Network, Belfast Healthy Cities is committed to addressing the social determinants of health, including transport. Access to transport is directly linked to health and well-being, influencing people's ability to attend medical appointments, engage in physical activity and stay socially connected.

Belfast Healthy Cities has already established itself as a leader in addressing transport-related health inequities through initiatives such as the Walking Bus pilot (2022), Active Travel & Healthy Transport Awards, community-focused walkability audits and policy advocacy on sustainable urban transport.
This report aligns with Belfast Healthy Cities' mission to promote equity, sustainability and health for all citizens. By examining transport poverty through a public health lens, the report highlights how improving transport access can reduce health inequalities and enhance community well-being.
It seeks to inform policy discussions, drive cross-sector collaboration, and advocate for practical solutions that integrate transport planning with public health and social policy.

SCOPE OF THE REPORT

In Northern Ireland, transport poverty is largely a hidden but pressing issue. This report explores the scale, causes, and consequences of transport poverty, drawing on existing research, community perspectives, and discussions with key stakeholders. Particular attention is given to the impact of transport poverty on health and access to healthcare services, a growing concern as missed or delayed medical appointments contribute to worsening health outcomes.

In addition to outlining the challenges, this report proposes evidence-based solutions and explores best practices from other regions, aiming to inform targeted interventions that promote more inclusive, accessible, and equitable transport systems.

Addressing transport poverty requires collaboration across government, planning, health, and public services. Without urgent action, transport inequalities will continue to reinforce social and economic disadvantage. This report serves as a call to action, advocating for policy reform, investment in sustainable mobility, and a more integrated approach to transport planning—ensuring that everyone, regardless of income or location, has access to the transport they need to lead a healthy and fulfilling life.

Literature Review:

What is Transport Poverty and what impact does it have?

THE EVOLUTION OF DEFINING TRANSPORT POVERTY

Transport poverty is a concept widely referenced in research, policy discussions, and practical contexts, however there is no universally agreed-upon definition or consistent method for measuring it. This ambiguity has been identified as a factor limiting the success of initiatives designed to tackle the issue.

The term ‘Transport Poverty’ can be interpreted in two main ways: firstly, a narrow focus on affordability, highlighting financial barriers to transport access, or, secondly, a broader perspective that includes the absence of sufficient transport options. While cost is a major factor contributing to transport-related inequalities, it is only one aspect that should be considered. Numerous other elements influence the availability and accessibility of transport options, shaping how well people can meet their mobility needs.

Transport poverty is therefore a complex issue that encompasses factors such as affordability, accessibility, availability, safety and fairness. Its working definition has been shaped by the combined efforts of researchers and organisations from areas including transport planning, public health, and social justice. By bringing together these perspectives, transport poverty can be viewed as a systemic problem connected to health, sustainability, and equity. This literature review examines how the definition of transport poverty has evolved and developed through these intersecting contributions highlighting its broader implications and impact.

Early connections between transport and social exclusion

The ‘Making the Connections’ (2003) report by the UK Social Exclusion Unit (SEU) in 2003 was the first policy report of its kind to explicitly link transport systems to social exclusion and poverty in the UK. Drawing on a wide range of literature from transport studies, social policy, public health, and urban planning, the report offered a framework for understanding how inadequate transport contributes to systemic inequalities. Foundational research, such as Karen Lucas’s early work, shaped its analysis of barriers such as affordability, accessibility and geographic disparities. The report’s integration of urban and rural case studies underscored the real-world challenges faced by marginalised communities, particularly low-income households, the elderly, and disabled individuals.

By incorporating insights from public health and land-use planning, the report highlighted the multifaceted impacts of transport poverty, from limited healthcare access to car dependency caused by poor urban planning. It also captured the lived experiences of transport-poor individuals through community-level studies. As the first policy document to address these intersections holistically, ‘Making the Connections’ set the stage for future research and policy interventions, establishing a foundation for tackling transport poverty as a critical social equity issue (Lucas, 2012).

Multidimensionality and social exclusion

Arguably the most influential work on transport poverty is by Karen Lucas. Lucas’ work is foundational in defining transport poverty as a key driver of social exclusion, embedding the concept within broader frameworks of inequality. Her work, popularised through the ‘Making the Connections’ report (SEU, 2003), remains a cornerstone of academic and policy discussions, offering a robust foundation for addressing transport-related social exclusion worldwide.

Lucas’ research bridges the gap between transportation planning and social justice, emphasising that transport is not merely a technical or economic issue but a fundamental determinant of social equity and well-being (Lucas, 2012).

Lucas identifies five dimensions of transport poverty, which have become widely adopted in subsequent research and policy discussions: affordability, accessibility, availability, time poverty and safety & reliability (Lucas et al, 2016).

This multidimensional framework ensures transport poverty is understood as a systemic issue rather than being reduced to a single factor, such as cost. By framing transport poverty as a driver of social exclusion, Lucas highlights how inadequate transport systems:

- Limit access to employment, education, healthcare, and social participation.
- Deepen inequalities, particularly for vulnerable groups such as low-income households, women, the elderly, and people with disabilities (Lucas, 2016).[1]

This perspective resonates strongly with policymakers, urban planners, and public health officials. It has been instrumental in guiding international studies on transport-related social exclusion and has influenced major organisations such as the European Union (EU) and World Health Organization (WHO)[2].

In 2016 Lucas et al. proposed a unified definition of transport poverty, identifying individuals as transport vulnerable if they meet any of the following criteria:

- There is no transport option available that is suited to the individual’s physical condition and capabilities.
- The existing transport options do not reach destinations where the individual can fulfil his/her daily activity needs, in order to maintain a reasonable quality of life.
- The necessary weekly amount spent on transport leaves the household with a residual income below the official poverty line.
- The individual needs to spend an excessive amount of time travelling, leading to time poverty or social isolation.
- The prevailing travel conditions are dangerous, unsafe or unhealthy for the individual (Lucas et al, 2016, p. 356)

While Lucas’ work remains the foundational voice on transport poverty, other research has built upon or expanded on the various dimensions of transport poverty.

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1. See also Hine, J and Mitchell, F (2003) Transport Disadvantage and Social Exclusion, Routledge.
2. By focusing on the systemic inequities inherent in transport systems, Lucas’s work aligns with global priorities such as:
   - The UN Sustainable Development Goals (SDGs), particularly those targeting reduced inequalities and sustainable cities.
   - WHO’s emphasis on social determinants of health, framing transport as a key enabler of equity.

Affordability – travel costs, public transport systems and car dependency

It is not surprising that affordability is a recurring theme when discussing transport poverty given its prevalence in definitions of other types of poverty. The affordability aspect of transport poverty is emphasised by Lucas and focused upon by others, particularly Graham Currie and Karel Martens.

Currie's extensive experience and leadership have solidified his reputation as a leading authority in public transport research, from looking at transport systems in Australia, to influencing both academic discourse and practical applications worldwide.

Currie (2017) references Gleeson and Randolph's definition of transport poverty as:

> *Transport poverty occurs when a household is forced to consume more travel costs than it can reasonably afford, especially costs relating to motor car ownership and usage (Gleeson and Randolph, 2002, p. 102).*

Much of his work highlights how affordability barriers disproportionately affect urban, low-income individuals who rely heavily on public transit (Currie, 2011). High fares, fare structures that disadvantage frequent riders, and hidden costs such as long wait times and indirect routes intensify economic strain. Currie demonstrates that targeted public transit investments can alleviate these burdens by reducing costs, increasing service frequency and coverage, and minimising indirect costs. He emphasises the need for well-designed subsidies and fare policies, such as discounted travel schemes and fare caps, to make transit systems more accessible and predictable for marginalised groups.

Currie outlines that affordability cannot be addressed in isolation; it must be combined with improved access and service reliability. Disparities in transit availability, whether through underserved low-income neighbourhoods in well-connected cities or extensive urban areas reliant on private vehicles, highlight the broader systemic challenges of transport equity. Currie's findings show that strategic affordability measures, when combined with infrastructure improvements, can expand access to essential services like employment, education, and healthcare (2017).

Karel Martens is another international authority on transport and justice, Martens authored the influential book Transport Justice: Designing Fair Transportation Systems (2016). His work examines the ethical dimensions of transportation planning, advocating for equitable access to transport services.

Martens reframes affordability through the lens of transport justice, arguing that fair access to mobility is a human right. His work critiques traditional efficiency-driven transport systems for failing to serve vulnerable populations, advocating for:

- Redistributive policies that prioritise low-income users.
- The integration of equity metrics into transport planning.

Both Martens and Currie highlight the economic and social consequences of forced car dependency, particularly in rural and suburban areas using the term 'forced car ownership', which was first coined in the UK (see Banister 1994). In particular, Currie notes that in areas where there is limited access to public transport, car ownership amongst lower income households rises as a result of limited mobility options (2007).

Mattioli (2017) so discusses the concept of 'forced car ownership,' describing situations where households, despite financial constraints, feel compelled to own a car due to inadequate public transport options. This phenomenon leads to significant economic stress, as a disproportionate share of income is allocated to car-related expenses, impacting other essential household needs.

A recent study in England by the New Economics Foundation (NEF) (2024) has created a new Car Dependency Index (CDI). The findings show that over the last 15 years new housing developments were increasingly built in places where people were reliant on cars for transport. This trend towards car dependency is present in every region outside of London.

The report also states that public transport times from new developments into town centres, office locations, hospitals and schools have risen steadily over the same period. In particular, an increase in homes being built in rural areas is identified as main cause for the increase in car dependency. The research outlines a dramatic difference in the average time taken to reach key services and facilities on public transport from new builds built in rural areas compared to urban areas. In 2023, the average public transport time from new builds in rural areas was 62 minutes to the nearest hospital, compared to 28 minutes from urban areas.

Accessibility

Accessibility, defined as the ability to reach essential destinations, is a cornerstone of transport poverty. Building on Karen Lucas's framework, researchers such as Martijn van Wee and Susan Handy delve deeper into how land use and transport planning influence accessibility, highlighting disparities that perpetuate inequality.

Van Wee emphasises the spatial aspects of transport poverty, illustrating how poor land use planning exacerbates access inequalities (Van Wee et al., 2004). His work identifies two critical issues:

- Urban sprawl: Low-income communities are often isolated from public transport hubs and essential services, leaving residents with fewer mobility options.
- Rural barriers: Structural challenges in rural areas, such as long distances and limited public transport, further restrict access to opportunities.

To address these issues, Van Wee advocates for the use of geographic information systems (GIS) and transport accessibility metrics. These tools help identify high-need areas, enabling data-driven approaches to improving access.

Susan Handy (2015) expands the concept of accessibility by focusing on active travel (e.g., walking and cycling) as a strategy to combat transport poverty. Her research demonstrates:

- Infrastructure's role: Investment in pedestrian and cycling infrastructure can significantly alleviate mobility challenges for economically disadvantaged populations, offering low-cost and sustainable alternatives to motorised transport.
- Mixed-use urban design: Creating neighbourhoods where residential, commercial, and recreational spaces are integrated reduces the need for long commutes, making essential services more accessible.

Handy's work intersects with Lucas's focus on safety by emphasising the importance of safe, accessible pathways for low-income groups, ensuring that active travel is not only viable but also secure (Lucas, 2023).

Practical applications of these principles are evident in initiatives such as the Fermanagh Omagh District Council's data-mapping project in Northern Ireland (2023). This initiative visualises accessibility gaps, particularly in rural areas where car dependency, long travel distances, and inadequate public transport create compounded challenges. By mapping these gaps, the Council provides actionable insights to address structural barriers, offering a localised perspective on accessibility solutions.

By integrating insights from spatial planning, urban design, and localised data, these perspectives collectively underscore the critical role of accessibility in addressing transport poverty, highlighting the need for inclusive planning and targeted interventions that bridge geographic and economic divides.

Gender and transport poverty

Transport poverty also highlights broader patterns of vulnerability and systemic inequities, particularly a pronounced gender divide that shapes mobility and access to transport services. Women face unique challenges in their transport needs, largely influenced by societal norms that assign them a disproportionate share of unpaid household and caregiving responsibilities (Turner et al., 2000). These roles often require women to travel to multiple destinations within a day, such as schools, food shops, healthcare facilities and workplaces, leading to more complex and fragmented travel patterns compared to men.

Studies have shown that women tend to spend more time and money on public transport than men, not only due to the complexity of their trips but also because of factors such as indirect routes and the need for multiple transfers to reach their destinations (Perez, 2019). These inefficiencies create additional barriers, particularly for low-income women who already face financial constraints.

The gendered dimensions of transport poverty are further exacerbated by safety concerns. Women often feel less safe using public transport, particularly at night or in areas with inadequate lighting and security measures. This fear of harassment or violence can limit their mobility, restrict employment opportunities, and reduce access to essential services, deepening existing inequalities (Kamruzzaman and Hine, 2012).

Sustainability

David Banister's (2018) concept of sustainable mobility highlights the environmental consequences of car dependency, such as traffic pollution and road hazards, which disproportionately affect low-income communities. He argues that decarbonisation strategies must prioritise equity to avoid exacerbating transport poverty. Similarly, Martens (2016) emphasises transport justice, advocating for fair access to sustainable mobility options.

The European Union (EU) has taken significant steps to integrate sustainability and environmental justice into its transport policies, directly addressing the intersections of transport poverty, equity, and environmental impacts. These initiatives, such as the European Green Deal and the Sustainable and Smart Mobility Strategy, prioritise decarbonisation while ensuring that marginalised and low-income groups are not left behind (WHO, 2018). This dual focus reflects the principles advocated by scholars like Banister and Martens, underscoring the need for equitable, sustainable mobility systems that reduce environmental harm while improving access for vulnerable populations.

Health and Transport Poverty

The relationship between transport poverty and health inequalities has gained increasing attention in recent years, driven by the work of organisations like Public Health Scotland (PHS) and the World Health Organization (WHO). Both highlight how inadequate transport systems exacerbate health disparities, particularly for vulnerable populations, by limiting access to essential services, promoting unhealthy behaviours, and increasing exposure to environmental risks. This intersection underscores the need for integrating transport policy into broader public health and social equity strategies.

Public Health Scotland (PHS) identifies transport poverty as a critical determinant of health, linking mobility challenges to adverse health outcomes (2024). PHS highlights that limited or unaffordable transport options significantly impact health and well-being by restricting access to healthcare, nutritious food, and opportunities for physical activity, particularly in rural and underserved areas. These barriers contribute to delayed treatments, diet-related health issues, and sedentary lifestyles. Additionally, unreliable transport increases mental stress and social isolation while exposing vulnerable populations to poor air quality and traffic-related hazards, further exacerbating health risks. PHS advocates for transport policies that reduce financial and physical barriers, promote active travel, and enhance public transit options as part of a holistic strategy to improve population health.

This approach aligns with Karen Lucas's framework by emphasising how systemic barriers in transport systems perpetuate social and health inequities. Other scholars such as Churchill and Smyth (2019) focus on how such inequities have been linked to lower subjective well-being. The report, 'Transport, Health, and Well-being' (2019), sought to examine the links between transport systems, health outcomes, and well-being, for The Department of Transport, focusing on how transport can promote better health and reduce social inequities. It highlights the positive role of transport in enabling access to services, employment, and social opportunities, while addressing the harms caused by physical inactivity, long commutes, and transport noise. To address these issues, the report recommends expanding concessionary travel passes, improving public transport reliability, and developing active travel infrastructure. Collaboration across sectors is vital.

WHO identifies transport poverty as a significant social determinant of health, emphasising its role in shaping access to essential services and influencing overall well-being (2018). Through its European Healthy Cities Network, WHO highlights key strategies to mitigate health disparities linked to transport poverty:

- Equitable transport systems: WHO advocates for inclusive transport policies that prioritise affordability, accessibility, and safety for all, particularly marginalised communities. Equitable systems enable people to access healthcare, education, and employment without disproportionate financial or physical strain.

- Cross-sectoral collaboration: Recognising the interconnectedness of transport, housing, and public health, WHO calls for policies that address these domains collectively. For example, integrating transport planning with urban development can reduce commuting distances, improve air quality, and create safer, more walkable neighbourhoods.

- Climate and health: WHO underscores the importance of sustainable transport solutions, such as public transit and active travel, in addressing both climate change and health inequalities. By reducing reliance on private vehicles, cities can decrease pollution and promote healthier lifestyles.

WHO's initiatives align with global health goals, including the Sustainable Development Goals (SDGs), particularly SDG 3 (Good Health and Well-being) and SDG 11 (Sustainable Cities and Communities). By framing transport poverty as a public health challenge, WHO highlights the need for integrated approaches to urban planning, mobility, and healthcare access.

THE SCALE OF TRANSPORT POVERTY

The Social Market Foundation's 'Getting the measure of transport poverty: Understanding and responding to the UK's hidden crisis' (2023) highlights the hidden crisis of transport poverty in the UK, where high transport costs disproportionately burden low-income households. It defines transport poverty as a condition in which transport expenses push individuals or households below the poverty line, focusing primarily on affordability.

The report estimates that over 5 million people in the UK are pushed into poverty by transport costs, with an additional 8 million already living in poverty further burdened by these expenses. Rural areas, where car dependency is highest, experience the most severe impacts, with annual transport costs reaching up to £9,200 per household.

Despite its valuable contributions, the report excludes Northern Ireland from its analysis. This omission is significant, as transport poverty in Northern Ireland presents unique challenges, including greater rural isolation, reliance on private vehicles, and limited public transport options compared to other parts of the UK (see Lowans, 2023 and Fermanagh and Omagh District Council, 2023). The lack of data and focus on Northern Ireland underscores the need for region-specific studies to fully understand and address transport poverty across all parts of the UK.

The report critiques existing UK-wide policies, such as fuel duty freezes, for failing to alleviate transport poverty effectively. While these policies provide minimal financial relief, they cost the government significant revenue that could be redirected to improving public transport infrastructure. Cuts to bus and rail services further exacerbate the problem, forcing many to rely on expensive private vehicles. The authors argue for a shift in policy priorities, including targeted investments in public transport and fare subsidies to ensure equitable access to mobility.

One of the report's major contributions is the introduction of a new transport poverty metric, which uses pre-existing administrative data to calculate the extent to which transport costs contribute to poverty. This tool can enable policymakers to identify high-need areas and design targeted interventions. Recommendations include replacing outdated measures like fuel duty freezes with sustainable funding mechanisms such as road pricing, reinvesting savings into public transport improvements, expanding bus and rail networks, and introducing subsidies for electric vehicles to support low-income households and promote sustainable mobility.

By highlighting the disproportionate burden of transport costs on vulnerable populations, the report calls for systemic reforms to address transport poverty as both a social equity and sustainability issue.

While the Social Market Foundation's report brings a number of key factors for consideration, it's singular approach to exploring transport poverty thought the lens of affordability limits its scope.

Other researchers have attempted to define the scale of transport poverty, with Lucas et al estimating that it could affect anywhere from 10% to 90% of households (2016).

CONCLUSIONS

The contemporary definition of transport poverty reflects the intersecting contributions of scholars and organisations. It has evolved from a narrow focus to a multidimensional framework. These contributions underscore the systemic nature of transport poverty and its role in perpetuating social, economic, and health inequalities. This understanding is critical for designing fair and sustainable transport systems that address the needs of all societal groups.

Definition of Transport Poverty

Based on the insights gained from the literature review, for the purposes of this report, transport poverty can be defined as:

Transport poverty refers to the lack of access to affordable, reliable and safe transport options that enable individuals and households to meet essential social, economic and health needs. It is characterised by barriers related to affordability, accessibility, availability, time efficiency, and safety and reliability, which disproportionately affect marginalised populations and exacerbate social, economic and health inequalities.

KEY DIMENSIONS OF TRANSPORT POVERTY

1. **Affordability:** The financial burden of transport costs relative to income, often forcing trade-offs with other basic needs like housing or food.

2. **Accessibility:** The inability to reach essential destinations such as workplaces, healthcare, education, or social services due to geographic, physical, or systemic barriers.

3. **Availability:** The lack of adequate transport options, particularly in rural or underserved urban areas, leading to forced car dependency or isolation.

4. **Time Efficiency:** Excessive time spent traveling due to inefficient transport routes or systems, resulting in “time poverty” that limits participation in economic and social activities.

5. **Safety and Reliability:** Exposure to unsafe or unreliable transport systems that hinder regular and secure mobility.

This definition reflects the collective contributions of Karen Lucas, Graham Currie, Karel Martens, and others, incorporating their emphasis on multidimensionality, social justice, and the systemic nature of transport inequality. It aligns with both theoretical frameworks and practical considerations, making it a robust foundation for analysis and policy-making.

Transport Poverty in Northern Ireland

UNDERSTANDING TRANSPORT POVERTY IN THE NORTHERN IRELAND CONTEXT

Transport poverty in Northern Ireland has been the subject of a number of studies aiming to understand and address the issue, but few attempt to fully qualify it. A notable example however is the doctoral thesis by Christopher Lowans, ‘A socio-techno economic analysis of energy and transport poverty in Northern Ireland’ (2023) which examines solutions to both energy and transport poverty through case studies in rural and urban/suburban areas of Northern Ireland.

The paper notes that In Northern Ireland, while some relevant data is collected, such as the Travel Survey for Northern Ireland (TSNI) including items such as average journey length and the main mode of transport, the data available is not used to explicitly measure transport poverty[3].

To address the disparities Lowan provides an in-depth examination of energy and transport poverty across the island of Ireland, using a survey as its primary tool. This survey was designed to fill critical data gaps and assess the prevalence, characteristics, and dynamics of these interlinked issues in both Northern Ireland and the Republic of Ireland. The research aimed to measure energy and transport expenditures alongside consensual metrics, capturing both quantitative data and subjective perceptions of affordability and access.

3. See the ‘Measuring Transport Poverty in Northern Ireland – Data and Metrics’ section for details of metrics and collected data which could be used to gain a measure of transport poverty in Northern Ireland.

The survey revealed interesting findings regarding expenditure metrics. Respondents were asked to detail their spending on transport and energy, which were then analysed against their income levels to identify households spending disproportionately on these necessities. Indicators such as the Low Income High Cost (LIHC) metric were used to evaluate affordability. These quantitative measures highlighted the financial strain faced by many households, particularly in rural areas where reliance on private vehicles is high due to limited public transport options.

In addition to expenditure metrics, the survey incorporated consensual measures to assess subjective perceptions of affordability and access. Participants provided insights into their ease of accessing public transport, commuting times, and satisfaction with transport services. This approach highlighted the lived experiences of transport poverty, offering a broader understanding of the issue beyond financial metrics. Rural respondents, for instance, frequently reported difficulties accessing essential services due to inadequate transport infrastructure.

Rural isolation was strongly correlated with higher incidences of transport poverty, while urban areas highlighted different stressors, such as congestion and the affordability of public transport. Statistical analysis revealed these geographic disparities, emphasising the need for region-specific interventions. Many of Lowden's findings align with the comprehensive Fuel, Transport and Food Poverty Mapping exercise Fermanagh and Omagh District Council carried out in 2023.

The Fermanagh and Omagh District Council study (2023) used GIS mapping and showed that in the Council area transport poverty arose from a combination of factors, including low population density, car dependency, limited affordability and accessibility of public transport, and personal health or mobility challenges. In areas with low population density transport poverty was exacerbated by infrequent public transport services and a significant proportion of households located far from bus stops. Over a third of properties were more than a 10-minute walk from public transport, leaving residents heavily reliant on private vehicles or facing limited mobility options.

Certain socio-economic groups were particularly vulnerable to transport poverty. These include young renters, low-income households, and elderly individuals with long-term health conditions or disabilities. These groups are more likely to face challenges such as limited vehicle ownership and rising motor fuel costs, which increase their reliance on public transport that may not meet their needs.

Areas with lower transport service coverage, high rates of vehicle non-ownership, and significant socio-economic disadvantage show the highest levels of transport poverty risk. These challenges are more pronounced in rural areas and smaller settlements, where public transport infrastructure is often less developed compared to larger urban centres. Additionally, some locations face overlapping risks, with high transport poverty often coinciding with fuel poverty, compounding the financial and social challenges faced by residents[4].

TRANSPORT ISSUES IN NORTHERN IRELAND

Department for Infrastructure (DfI) carried out several extensive transport surveys in between 2020 and 2021 across council areas in Northern Ireland. These studies summarise the range of transport issues existing across the region.

Belfast area

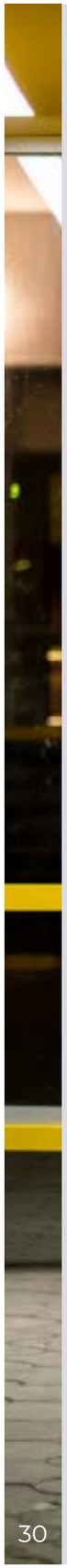
In 2020 the Department for Infrastructure (DfI) carried out a Transport Study of the five Councils that make up the Belfast Metropolitan Transport Plan Area. The review of transport networks within the study area has concluded the following transport issues:

- **Regional accessibility:** Regional accessibility is generally good due to the strategic road and public transport networks being centred on Belfast. However, peak-hour traffic congestion in and around the A12 Westlink and the lack of an integrated public transport interchange in Belfast city centre create negative impacts. These issues were expected to improve following the completion of the York Street Interchange and the Belfast Transport Hub projects.

- **Pedestrian infrastructure:** Pedestrian infrastructure in urban areas is typically adequate, but there are inconsistencies in standards. In town and city centres, pedestrian facilities often lack priority over vehicular traffic, making them less attractive for users.

- **Cycling infrastructure:** Outside Belfast, cycling infrastructure in urban areas is limited in extent and quality. In Belfast, while there is more substantial provision, the infrastructure varies in quality despite significant latent demand. The Belfast Cycling Network Plan seeks to address these issues.

4. A complete overview of the model is available in the 'Model Approach to Addressing Transport Poverty' section.



- **Bus rapid transit (Glider):** The Glider system operates with considerable priority over general traffic on its cross-city east-west route and the shorter route to Titanic Quarter. It has achieved notable success in encouraging a modal shift from private car use.

- **Metro bus services:** Metro services offer a relatively high-frequency network across the Belfast Metropolitan Urban Area (BMUA) throughout the day. However, the hub-and-spoke design requires most journeys to pass through the congested city centre, with interchange needed for trips beyond individual corridors. While substantial bus priority exists within the city centre, priority measures on outer radial routes are inconsistent.

- **Ulsterbus town services:** Outside Belfast, Ulsterbus services are primarily configured to provide access to essential town centre facilities. However, limited service frequencies and indirect routes make these services less attractive to those with access to private cars.

- **NI Railways:** Rail services connect many towns within the BMUA, with all routes passing through Belfast city centre stations. These services often operate at full capacity during peak periods. Planned enhancements, including larger trains and increased platform capacity through the Belfast Transport Hub project, aim to address these capacity constraints.

- **Sustainable transport accessibility:** Within the BMUA, sustainable transport accessibility is generally good, with key services often within convenient walking or cycling distance and local bus services extending the catchment area. However, rural residents face significant challenges accessing urban-centred key services by public transport, particularly outside peak hours.

- **Urban traffic congestion:** Urban traffic generally flows efficiently outside of peak periods. However, significant congestion is observed during the morning and evening peaks on routes approaching town centres and throughout Belfast.

- **Parking provision:** In Belfast, an oversupply of parking spaces has been identified, but uneven distribution, variable site attractiveness, and a lack of real-time occupancy information result in localised congestion during peak periods as drivers search for spaces. Extending the Controlled Parking Zone, as recommended in Belfast City Council's Draft Car Parking Strategy, could reduce commuter parking in the city centre. In urban centres outside Belfast, parking provision has been assessed and found to be generally sufficient. However, the alignment of management regimes (e.g., charged/free or restricted stay) with objectives such as revenue generation or modal shift promotion is often lacking.

- **Legacy road alignments:** Some road alignments included in the extant Local Development Plans within the study area may appear inconsistent with current policy. However, these alignments may have potential as active travel routes. They will be reviewed as part of the Local Policies Plan and retained or removed based on individual zoning considerations (2000, pp. 38-67)

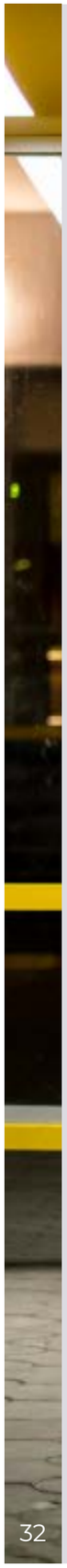
Beyond Belfast – wider Northern Ireland transport issues

Northern Ireland's transport challenges outside Belfast are diverse, reflecting differences in geography, population distribution and existing infrastructure. The section below summaries the findings from regional transport studies conducted in areas including Fermanagh and Omagh, Armagh, Banbridge and Craigavon, Causeway Coast and Glens, Newry, Mourne and Down, Mid Ulster, and the North West.

- **Regional connectivity and accessibility** - Northern Ireland's road network is vital for regional connectivity, but many routes are inadequate for current demands. Roads like the A4 and A5, which connect towns like Enniskillen and Omagh to Belfast, are single-carriageway roads, resulting in congestion, slow travel times, and limited capacity to handle growing traffic volumes. Similarly, the A6, a critical link between Belfast and Derry/Londonderry, faces ongoing bottlenecks despite gradual upgrades. Public transport options often fail to provide a viable alternative. In rural areas many households are located miles from a rail station or frequent bus service, leaving residents dependent on private vehicles. In some locations bus services operate infrequently, sometimes only a few times a day, making them unsuitable for daily commuting.

- **Rural isolation and accessibility challenges** - Rural areas across Northern Ireland face significant barriers to transport accessibility. In Mid Ulster, only 43% of the population can access a main town within 30 minutes via public transport, highlighting the stark connectivity gap. Similarly, rural areas of Causeway Coast and Glens rely heavily on private vehicles, as public transport services are sparse or non-existent. Access to essential services is a major concern with rural residents struggling to reach healthcare facilities due to limited public transport options.

- **Urban transport challenges** - Urban centres like Derry/Londonderry, Newry, and Enniskillen face a different set of transport issues. Congestion is a persistent problem, particularly on key routes. Parking availability also exacerbates urban congestion. In Coleraine and Ballymoney, limited parking in town centres forces drivers to circle for spaces, while free



parking in many areas discourages public transport use. Bus services in urban areas outside Belfast often operate infrequently and lack evening and weekend coverage, reducing their utility for residents and the local economy.

- **Road safety and environmental concerns** - Road safety is a significant concern, particularly for vulnerable road users like pedestrians and cyclists. In rural regions, narrow, poorly maintained roads and limited lighting increase risks for drivers and cyclists, especially during winter months. High levels of car dependency also exacerbate environmental issues, including poor air quality and increased greenhouse gas emissions

It is also worth noting that there are no direct rail services to key towns such as Enniskillen, Omagh, Strabane and Dungannon.

The transport challenges outlined above underscore the systemic and localised barriers faced by communities across Northern Ireland. Inadequate regional connectivity, limited public transport options, poor active travel infrastructure and high car dependency not only restrict access to essential services but also exacerbate social and economic inequalities. Vulnerable populations, including low-income households, the elderly, and those with disabilities, are disproportionately affected, facing heightened risks of transport poverty. This results in restricted access to employment, education, healthcare, and social opportunities, further entrenching cycles of disadvantage.

Transport poverty arises directly from these challenges, reflecting the systemic inequities embedded in Northern Ireland's transport networks. The inability to access affordable, reliable, and safe transport options isolates individuals and communities, compounding issues of social exclusion and economic marginalisation. Addressing these issues is not just a matter of improving infrastructure but a critical step towards achieving equity, reducing health disparities, and building a sustainable and inclusive future.

LOCAL INITIATIVES TO IMPROVE TRANSPORT ISSUES IN BELFAST

Across Belfast a range of initiatives have been introduced that, while not always directly targeting transport poverty, contribute significantly to making travel more accessible, affordable, and sustainable for residents. These efforts focus on active travel, public transport improvements, and inclusive infrastructure that benefit those who may struggle with the financial burden of transport.

Improving cycle storage

To support those who rely on cycling as a primary mode of transport, Belfast City Council has improved cycle storage facilities across the city. Initiatives such as 'The Bike Yard' in CastleCourt Shopping Centre offer free, secure public cycle parking, while partnerships with Queen's University Belfast and the Titanic Quarter have introduced secure cycle docks and shelters to encourage cycling for students, workers, and visitors. These facilities ensure that those who choose to cycle—often as a more affordable alternative to driving or public transport—have safe and reliable places to store their bikes.

Sustainable transport and regeneration strategies

Belfast City Council has also been working on broader sustainable transport and regeneration strategies that contribute to tackling transport poverty. The 'Bolder Vision for Belfast' focuses on redesigning the city to prioritise people over cars, creating more pedestrian-friendly areas and improving public transport connections. By making it easier to navigate the city without a car, these plans help reduce the financial burden of transport for lower-income residents.

Improvements to public transport infrastructure

Belfast recently opened the Belfast Grand Central Station, marking a significant advancement in Northern Ireland's transport network. This newly opened station commenced phased operations in September 2024, replacing both the former Great Victoria Street railway station and the Europa Bus Centre.

The station has substantially increased its capacity, doubling the number of rail platforms from four to eight and expanding the number of bus stands to 26. These enhancements aim to facilitate up to 20 million passenger journeys annually.

Simultaneously, the 'All-Island Strategic Rail Review', a joint initiative by the Department of Transport in Ireland and the Department for Infrastructure in Northern Ireland, was published in July 2024. This review presents a long-term vision for rail infrastructure development across the entire island.

The strategic recommendations within the review propose improving regional accessibility through the introduction of new rail routes and the reinstatement of previously closed lines, aiming to enhance connectivity between communities throughout the island.

Commitment to net zero and climate action

Furthermore, as part of its 'Net Zero Carbon Roadmap', Belfast City Council is committed to reducing transport emissions while improving accessibility . Investing in low-carbon and sustainable transport solutions not only benefits the environment but also helps ensure that affordable and efficient travel options are available to all. By improving infrastructure for cyclists and pedestrians, promoting public transport, and creating a more walkable city, the Council is taking steps to ensure that transport poverty is reduced, even if indirectly.

These initiatives collectively contribute to a more inclusive and accessible transport system in Belfast. While challenges remain, Belfast City Council's commitment to active travel, sustainable transport, and urban regeneration is taking steps towards helping to create a city where transport is not a barrier to opportunity but a means of connection for residents.

Transport Concessions

In Northern Ireland, several transport concessions are available for older people, individuals with disabilities and those on low incomes needing to attend medical appointments.

The Concessionary Fares Scheme, managed by Translink, provides free travel for residents aged 60 and over on bus and rail services within Northern Ireland through the 60+ SmartPass, while the Senior (65+) SmartPass extends free travel across the Republic of Ireland as well[5]. Individuals registered as blind and war disablement pensioners also qualify for free travel, while those receiving certain disability benefits can apply for a Half Fare SmartPass, offering a 50% discount.

5. In 2023, the Department for Infrastructure (DfI) launched a 12-week public consultation to consider raising the age of eligibility for concessionary fares from 60 to either 65 or the state pension age. This proposal aimed to reduce the costs associated with the Concessionary Fares Scheme.

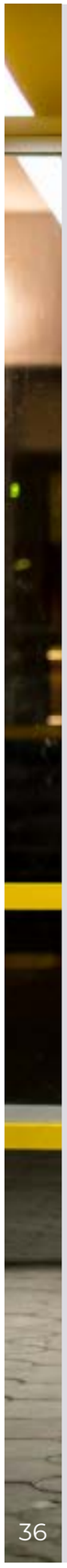
For those on low incomes requiring hospital treatment, the Hospital Travel Costs Scheme (HTCS) offers reimbursement for travel expenses. Eligible individuals (on a range of eligible benefits) can claim back public transport fares or mileage for private vehicle use when attending hospital appointments[6]. Claims can be made on the day of the appointment or retrospectively within three months.

Promoting active travel

Active travel initiatives promote walking and cycling as viable alternatives to car dependency. The 'Making Belfast an Active City - Belfast Cycling Network 2021' (Belfast City Council) outlines the long-term plans to enhance walking and cycling infrastructure, ensuring safer and more convenient routes. Additionally, Belfast's public bike hire scheme provides an affordable transport option, particularly for those who do not own a car. The greenways programme, including projects like the Black Mountain Greenway and Access to the Hills, is further expanding accessible walking and cycling routes across the city, connecting communities and making transport more inclusive.

Belfast Healthy Cities has actively promoted initiatives aimed at increasing active travel and tackling transport poverty, particularly emphasising their connections to public health. This includes leading practical, community-based programmes such as the Walking Bus initiative (2022), which encouraged walking among schoolchildren to reduce car use, improve physical health, and alleviate congestion and pollution around schools (Belfast Healthy Cities, 2022). Additionally, BHC has facilitated specialised training sessions for planners and policymakers on integrating active travel into urban planning, using evidence-based tools such as the World Health Organization's Health Economic Assessment Tool (HEAT) to underscore the substantial health benefits of investing in walking and cycling infrastructure. Through community forums, strategic consultations, and policy submissions at city and regional levels (e.g., to Belfast City Council's Active Travel Action Plan and the Northern Ireland Assembly's Inquiry into Sustainable Transport), Belfast Healthy Cities has consistently highlighted transport poverty as a critical public health and equity issue, advocating for policies that ensure equitable and affordable access to sustainable transport options across Belfast and beyond.

6. Please note at the time of writing the Department of Health was consulting on potential changes to the eligibility criteria for automatic support being provided under the Help with Health Costs scheme for Universal Credit recipients who are not currently automatically passported the benefit. See https://www.health-ni.gov.uk/consultations/help-health-costs-consultation



THE SIGNIFICANCE OF TRANSPORT POVERTY FROM A HEALTH PERSPECTIVE

Research shows that transport poverty is increasingly recognised as a critical barrier to health equity, social inclusion, and sustainable development. As a member of WHO Healthy Cities Network, Belfast has committed to addressing the social determinants of health. The network's principles prioritise equitable access to essential services, well-being, and sustainable urban environments—issues deeply intertwined with transport challenges. This focus has significant implications not just for Belfast but for Northern Ireland as a whole, where transport disparities are stark between urban and rural areas.

Transport poverty affects multiple aspects of life central to a healthy city or region:

- **Access to essential services:** Limited mobility hinders access to healthcare, education, employment, and social opportunities, disproportionately affecting vulnerable populations.
- **Social Isolation:** In both urban and rural settings, inadequate transport can leave individuals disconnected from their communities and support networks.
- **Environmental and health impacts:** Over-reliance on private vehicles due to insufficient public transport contributes to air pollution, road traffic injuries, and sedentary lifestyles.

By addressing transport poverty, Northern Ireland can tackle these critical health and social challenges, advancing both local and global health equity goals.

Across Northern Ireland, transport poverty manifests in diverse ways, reflecting the region's varied geography and socio-economic conditions:

- **Urban areas:** Congestion and limited integration of public transport networks hinder mobility in Belfast and other cities, exacerbating commuting challenges and reducing the efficiency of public transit systems.
- **Rural areas:** Rural residents face significant barriers, including infrequent public transport, long distances to essential services, and high dependency on private vehicles, increasing financial burdens for low-income households.
- **Socio-economic disparities:** Vulnerable groups—including young people, the elderly, and those with disabilities—are disproportionately affected by transport poverty, with limited access to both private and public transport options.
- **Overlap with fuel poverty:** The combined impact of transport and fuel poverty is particularly pronounced in rural areas, where limited access to affordable, sustainable transport exacerbates socio-economic inequalities.

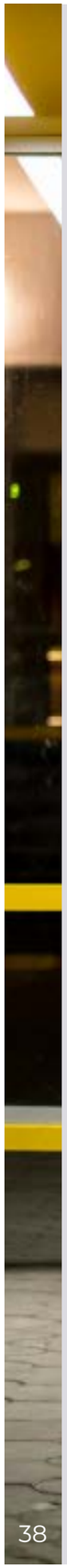
These disparities highlight the pressing need for region-wide strategies that address transport poverty in both urban and rural contexts.

Summary

Transport poverty is not just a local challenge for Belfast but a regional issue with profound implications for Northern Ireland as a whole. By leveraging WHO Healthy Cities Network framework, Belfast and the wider region can prioritise transport equity as a fundamental determinant of health and well-being. Addressing this issue at both city and regional levels will ensure that all residents, regardless of location or socio-economic status, can access the opportunities, services, and quality of life they deserve. This dual focus on urban and rural challenges positions Northern Ireland to become a leader in health equity and sustainable transport innovation.

TEN KEY DRIVERS OF TRANSPORT POVERTY IN NORTHERN IRELAND

Transport poverty in Northern Ireland is shaped by distinct regional challenges, such as rural isolation, inadequate public transport infrastructure, and car dependency. Studies such as Lowans' 2023 thesis and the Fermanagh and Omagh District Council's mapping exercise highlight the compounded risks faced by low-income, rural, and disabled populations. Addressing the drivers of transport poverty will require integrated policies that prioritise equitable transport access, investment in sustainable infrastructure, and the inclusion of marginalised groups in planning processes.



Below is an overview of the ten primary drivers:

1. Economic factors

- **Affordability:** High transport costs, including fares, fuel, maintenance, and parking, are a significant barrier for low-income households. These expenses often force trade-offs with other essential needs, such as food, housing, or healthcare.
- **Income inequality:** Lower-income households face heightened transport poverty due to limited financial resources, making it difficult to afford mobility options like car ownership or regular public transport use.

2. Geographic factors

- **Rural isolation:** Rural areas in Northern Ireland often lack sufficient public transport infrastructure, leaving residents reliant on private vehicles or facing limited mobility. This creates significant challenges for those who cannot afford car ownership or have restricted access to services.
- **Urban sprawl:** Urban areas with sprawling developments isolate communities from essential services, resulting in long and often unaffordable commutes.
- **Transport deserts:** Both rural and urban areas experience “transport deserts,” with minimal or non-existent public transport options, leaving communities disconnected and reliant on expensive private solutions.

3. Infrastructure and service availability

- **Inadequate public transport:** Limited service coverage, infrequent schedules, and poorly maintained infrastructure exacerbate mobility challenges, particularly in rural and underserved areas.
- **Last-mile connectivity:** Poor walking, cycling, and connecting public transport infrastructure complicate multimodal travel, particularly for rural residents and those without private vehicles.
- **Reliability issues:** Delays, cancellations, and inconsistent transport systems disproportionately impact those with limited alternatives, worsening accessibility issues.

4. Time poverty

- **Excessive travel times:** Long and inefficient commutes, common in rural areas with limited transport options, reduce time available for work, education, and social activities.
- **Congestion:** Urban traffic congestion, particularly in Belfast, compounds time poverty for those reliant on buses or shared transit.

5. Safety and security concerns

- **Unsafe infrastructure:** Poorly maintained roads, cycling paths, and pedestrian areas increase physical safety risks, deterring active travel options.
- **Crime and harassment:** Safety concerns on public transport, particularly for women and vulnerable groups, reduce accessibility and mobility.

6. Social and demographic factors

- **Age:** Elderly individuals and children face restricted mobility due to physical limitations or dependency on others for transport.
- **Disability:** The lack of accessible transport systems disproportionately impacts people with disabilities, restricting their independence and limiting opportunities.
- **Gender inequity:** Women are more likely to experience transport poverty due to reliance on public transport, complex travel patterns, and caregiving responsibilities.

7. Car dependency

- **Forced car ownership:** In areas with limited public transport, car dependency becomes a necessity, even for those who cannot afford the financial strain of vehicle ownership.
- **Cost of car ownership:** High costs of insurance, fuel, and maintenance make car dependency unattainable for many low-income households.

8. Land-use and urban planning

- **Car-centric development:** Development that prioritises cars over active and public transport creates systemic barriers to mobility, particularly for those without access to private vehicles.
- **Segregated land-use:** The separation of residential, commercial, and recreational areas forces longer travel distances, increasing reliance on costly and time-consuming modes of transport.

9. Environmental and policy factors

- **Policy fragmentation**: Disconnected policies across transport, housing, and urban planning fail to address the systemic nature of transport poverty, leading to gaps in service provision and infrastructure.
- **Climate change policies:** Efforts to transition to low-carbon transport systems, such as congestion charges or incentives for electric vehicles, can inadvertently worsen transport poverty if affordability and accessibility are not prioritised.

10. Public health and accessibility

- **Barriers to healthcare:** Limited transport options prevent residents, particularly in rural areas, from accessing essential healthcare services, exacerbating health inequalities.
- **Environmental risks:** Vulnerable populations are more exposed to air pollution and traffic-related risks, impacting both health and well-being.

Table 1 links each driver of transport poverty to its specific impacts on health and well-being in Northern Ireland, highlighting the importance of addressing these interconnected issues through targeted interventions.

Table 1: Transport Poverty Drivers and Health Impacts in Northern Ireland

DRIVERS OF TRANSPORT POVERTY	HEALTH IMPACTS IN NORTHERN IRELAND
Economic Factors	High transport costs force trade-offs with essentials like food and healthcare, exacerbating conditions such as poor diet, cold housing, and untreated illnesses. Income inequality restricts access to stable employment and mental well-being.
Geographic Factors	Rural isolation limits access to healthcare, education, and social interaction, leading to poorer physical and mental health. Urban sprawl increases travel times, causing stress and reducing opportunities for physical activity.
Infrastructure and Service Availability	Unreliable public transport prevents timely access to services, increasing stress. Poor last-mile connectivity discourages active travel, contributing to sedentary lifestyles and associated health risks.
Time Poverty	Long commutes reduce time for social interactions and health-promoting activities like exercise. Urban congestion increases stress and exposure to air pollution, worsening respiratory and cardiovascular health.
Safety and Security Concerns	Unsafe infrastructure heightens the risk of accidents. Fear of harassment or violence deters travel, especially for women, contributing to isolation and mental health challenges.
Social and Demographic Factors	Gender inequities in transport disproportionately burden women, increasing stress and reducing access to opportunities for well-being. Elderly and disabled individuals face restricted mobility, limiting their access to essential services and independence.
Car Dependency	Forced car ownership creates financial strain and stress, while lack of car access leads to social isolation and unmet health needs. High vehicle costs limit disposable income for health-related expenses.

Land-Use and Urban Planning	Car-centric planning discourages active travel, contributing to sedentary lifestyles. Segregated land use forces longer travel distances, creating barriers to accessing healthcare and other services.
Environmental and Policy Factors	Exposure to traffic pollution and noise disproportionately affects vulnerable populations, worsening respiratory illnesses, cardiovascular diseases, and stress-related conditions.
Public Health and Accessibility	Lack of transport options limits access to healthcare, leading to delayed diagnoses and untreated conditions. Poor mobility options exacerbate feelings of isolation and mental health challenges.

The lived experiences of citizens in Northern Ireland

This section explores the lived experiences of citizens in Northern Ireland, drawing insights from multiple sources. It begins by examining perspectives captured in secondary data, including reports, surveys, academic literature, public narratives, and media coverage. To build on this foundation, we conducted a focus group with residents of North Belfast and carried out interviews with key stakeholders, providing a deeper, firsthand understanding of local experiences.

SECONDARY DATA REVIEW

A review of secondary data highlights a number of issues raised by citizens in Northern Ireland, the following sections explore some of the key issues in understanding the lived realities of transport poverty in Northern Ireland.

Car dependency

Car dependency in Northern Ireland is a significant issue, with almost 70% of all journeys made by car[7], making it one of the most car-dependent regions in the UK. There are multiple factors contributing to this dependency, including affordability concerns, inadequate infrastructure, and cultural attitudes.

In 2023, a Citizen's Jury on car dependency was organised by QUB Centre for Public Health and facilitated by Involve. The jury involved a group of 19 people, broadly reflective of the population of the Belfast metropolitan area, who came together over a two day period to answer the question 'How can

7. See https://www.infrastructure-ni.gov.uk/system/files/publications/infrastructure/tsni-in-depth-report-2021.pdf

car dependency and levels of car use in Belfast be reduced?' The discussions provided valuable insights into car dependency based on the jury's lived experiences and perspectives. The group highlighted several key themes regarding why people rely so heavily on cars and what challenges they face in reducing their dependency.

1. **Reliability and convenience of public transport:**
    - Many participants expressed frustration with the unreliable and infrequent public transport services, particularly outside city centers and during off-peak hours.
    - They noted that the existing system often does not align with work schedules or family commitments, making the car a more dependable and practical option.
    - The lack of real-time updates and poor connections between bus and train services further discouraged people from using public transport.

2. **Affordability concerns:**
    - Participants believed that public transport fares are too high, particularly for families and those on lower incomes.
    - They argued that driving, despite rising fuel costs, is often perceived as the cheaper and more flexible option compared to public transport fares and associated inconvenience.

3. **Lack of safe and accessible alternatives:**
    - The group highlighted the absence of safe cycling and walking infrastructure, which discourages people from choosing active travel options.
    - Concerns were raised about road safety, poor lighting, and the perception of danger in using alternative transport modes, especially for children and elderly individuals.

4. **Cultural and social factors:**
    - Participants acknowledged that car ownership is often seen as a status symbol and a necessity in Belfast, with many considering it an essential part of daily life.
    - They felt that there is a cultural norm around car use that discourages alternative options, such as cycling or using public transport.

5. **Dependency for essential travel:**
    - Many people rely on cars for essential trips, such as getting to work, school, healthcare facilities, and supermarkets.
    - Participants discussed how the geographic spread of essential services, particularly in suburban and rural areas, makes it difficult to avoid using a car.

6. **Negative environmental and health impacts:**
    - Some participants recognised the environmental and health benefits of reducing car use but felt that practical barriers outweighed the potential advantages.
    - They expressed concern over rising air pollution and congestion but felt there were no viable alternatives to meet their travel needs.

7. **Barriers to behavioural change:**
    - Participants discussed the habitual nature of car use, where even short journeys are often made by car out of convenience.
    - They acknowledged that encouraging behaviour change would require significant investment in public awareness campaigns and incentive programs.

Participants put forward several solutions to help reduce car dependency, including:

- Improving public transport frequency, affordability, and coverage to make it a more attractive alternative.
- Introducing “car-free” zones or incentives for using sustainable transport.
- Investing in better cycling and walking infrastructure to encourage active travel.
- Education campaigns to promote the benefits of alternative transport and reduce stigma around not owning a car.
- Planning for more compact, sustainable urban development to bring essential services closer to residential areas.

Community transport

Community transport in Northern Ireland plays a vital role in providing accessible and affordable transportation solutions, especially for individuals in rural areas, the elderly, and those with disabilities. These services are typically non-profit and are designed to meet the specific needs of communities not adequately served by mainstream public transport.

Community transport services are often described as a ‘lifeline’ for elderly individuals, people with disabilities, and those living in rural areas where mainstream public transport options are limited or non-existent. Users of community transport in Northern Ireland have expressed how vital these services are for accessing medical appointments, shopping, and social activities (BBC News, 2023). Furthermore, many elderly individuals rely on community transport to avoid social isolation and people with mobility issues also shared their experiences, emphasising how the accessible design of community transport vehicles allows them to travel independently, something they would struggle with on conventional public transport.

A social return on investment exercise carried out in 2014 found that regular use of community transport leads to improved mental health and a greater sense of well-being among passengers who would otherwise face isolation. Passengers reported feeling more confident and independent. The service also plays a key role in helping users access healthcare services, which in turn leads to better long-term health outcomes (Gauge NI, 2014).

Reports from August 2022 indicated a significant reduction in volunteer drivers for community transport services, attributed to rising fuel costs. This decline has impacted the availability of transport for elderly individuals in rural areas. In September 2024, Infrastructure Minister John O’Dowd announced a 4.2% funding increase for community transport providers, including the Dial-a-Lift (DAL), Disability Action Transport Scheme (DATS), and Shopmobility services. This increase aims to help these services manage rising operational costs.

Public transport

Belfast recently opened the Belfast Grand Central Station, a significant development in Northern Ireland’s transportation infrastructure. This new station, which began phased operations in September 2024, replacing the former Great Victoria Street railway station and the Europa Bus centre. The new station has doubled the number of rail platforms from four to eight and increased bus stands to 26, aiming to accommodate up to 20 million passenger journeys annually.

In parallel, the All-Island Strategic Rail Review, jointly commissioned by the Department of Transport in Ireland and the Department for Infrastructure in Northern Ireland, was published in July 2024. This review outlines a strategic vision for the development of the rail system across the island over the coming decades.

The review recommends enhancing regional accessibility, including potential new routes and the reinstatement of previously closed lines, to better connect communities across the island.

While the opening of Belfast Grand Central Station and the All-Island Rail Review aim to address some of the transport inequalities across Northern Ireland by expanding access and connectivity, significant gaps remain, particularly for those in rural areas who may not benefit directly from urban transport improvements; without investment in feeder services, rural communities may continue to face exclusion.

The new station has received criticism on a number of fronts, for example its lack of links to active travel routes (see BikeFast, 2017) or indeed other connecting services, such as the Glider (Slugger O'Tool, 2024).

Many public discussions about the new station and its expanded services have instead highlighted what local people hoped it could offer. While the station primarily serves as a hub for the existing transport network, it still faces challenges such as long wait times, the need for multiple connections, and inaccessible service schedules[8].

The comments under one BBC article about congestion in the city centre highlights widespread frustration with Belfast's public transport system, with many users pointing out its unreliability and inefficiency (BBC, 2024). A common concern was the infrequent and inconvenient service times, particularly in the evenings. One user remarked, "If the public transport service was better, then maybe people would use it more, but considering the last bus is at 11 PM... there's never enough taxis available." Others expressed frustration with late buses, with one person stating, "The bus I get was 20 minutes late two mornings last week." These experiences suggest that many people feel public transport is not a dependable option for daily commuting.

Affordability of public transport was another major issue raised, with several users arguing that high fares discourage people from using buses and trains. One commenter stated, "Lower the cost of public transport and you'll get people to use it." Another highlighted the expense of commuting, saying, "£20 for a one-day return ticket isn't feasible for the average worker." These concerns suggest that without significant fare reductions, public transport will remain out of reach for many.

Others stated that the investment should focus on areas beyond Belfast, one commuter said "I believe that the money should be spent more widely throughout the whole of the country giving a better bus service to all of the rural areas."

Finally, many users highlighted car dependency as a necessity rather than a choice, given the inadequacy of public transport. One person shared their experience of commuting from East Antrim to South Belfast, saying, "Door to door on public transport takes me 1 hour 50 minutes, but it's a 35-minute drive on a good day." This sentiment was echoed by others who felt that public transport does not cater to their needs, forcing them to rely on cars despite congestion and costs.

Many believe that without significant improvements, car dependency will remain high in Northern Ireland, echoing the sentiments of the Citizen's Jury in 2023.

8. See for example https://www.facebook.com/BelfastLiveOnline/videos/ni-commuters-have-their-say-on-belfasts-new-public-transport-hub/484049124504055/ and the comments on this news article https://www.bbc.co.uk/news/articles/c4g235330eeo

TRANSPORT POVERTY IN NORTH BELFAST: FINDINGS FROM A COMMUNITY FOCUS GROUP

A focus group discussion was conducted with local residents in North Belfast to gather first-hand experiences of transport issues. Participants from a range of backgrounds (including parents, young people and older residents) shared their lived experiences of how existing transport options impacts their lives. The following section summarises the key issues identified and provides the residents' recommendations for improving transport in North Belfast.

KEY ISSUES IDENTIFIED

1. Public transport reliability and accessibility

Many participants raised the issue of unreliable public transport services, with buses often running late, not showing up, or failing to stop due to overcrowding. The unpredictability of services has caused significant disruption to residents' daily routines, particularly for those who rely on buses for work, school or medical appointments.

> *"You're standing waiting, the app says the bus is coming, then suddenly it's gone - like Harry Potter's invisibility cloak."*

A common frustration was the lack of communication regarding delays and cancellations. Many people felt that bus users were left in the dark, with no information available about when or if the next bus would arrive.

> *"It's terrible when you're sitting at a bus stop and you know a bus is due, but it just doesn't arrive. You're not told anything."*

> *"If they were really reliable, I would 100 percent get a bus. But you can't trust them enough to get you somewhere, so you'd rather just do it yourself."*

Another issue raised was the lack of space for mobility aids on buses. Several residents noted that if buses were too crowded, people using wheelchairs, rollators, or prams often could not get on.

> *"If I have to go into town, I need to go in the morning and be back by lunchtime because there wouldn't be space in the bus for my rollator."*

Overcrowding during school commuting hours was raised a number of times, with residents stating that the buses were filled with school children leaving no room for other residents. This makes it difficult to travel during those hours. There was an agreement amongst older residents that public transport was more reliable in years gone by:

> *"See, using public transport like 10 years ago, 10, 15 years ago, was amazing. I used to just jump on the bus, fly down to a wee nursery in the Westlands... Within, not even 40 minutes, I was still home. If I tried to do that now? No chance."*

This shows that people previously trusted the bus service to be on time and efficient, whereas now they expect delays and disruptions. Another participant noted how the decline in reliability has changed their behaviour:

> *"That's why she does my Ligoniel run [in a car], to take the wee one up to nursery, because there's no chance of them getting up to Ligoniel and back down again. I was actually walking them up and down—it was easier than waiting on a bus that might not show up."*

The participants discussed the lack of bus drivers as a key issue affecting public transport reliability. They highlighted that bus shortages were leading to unreliable schedules, long wait times, and buses not showing up at all. One participant mentioned:

> *"I know it's mostly because of a lack of drivers. There's a big deficiency in bus drivers at the moment, but it's terrible when you're sitting at a bus stop and you know a bus is due and you have to get somewhere, and it just isn't going to be arriving, and then you have to wait another half hour."*

The conversation revealed a number of issues that residents considered were linked to driver shortages, including the overcrowding on buses.

The group also discussed jobs with Translink, with some recalling that working as a bus driver used to be a sought-after job, but that perception seems to have changed. “Used to be like a sought-after job. Everyone wanted to work for Translink. There was a big pension and all. There was a lot of good qualities for the job,” one participant said, suggesting that the job had once been well-respected and secure.

However, the group speculated on why recruitment might be struggling. Some questioned whether working conditions or benefits had declined. Participants also mentioned how bus drivers sometimes face abuse from passengers, which might discourage new hires. One person said, “I think a lot of them, you would see it on the news, you know, getting attacked or whatever.” The group agreed that something was needed to encourage more people to become bus drivers.

> *“There has to be a way of getting more people to employ for Translink because if there’s a lack of drivers, then it’s just going to make it even worse.”*

Participants suggested that better recruitment efforts or improving conditions for bus drivers might help fix the shortage.

2. Barriers to Healthcare Access

Travel to healthcare appointments

The focus group participants expressed significant frustration with using public transport for healthcare appointments, highlighting long travel times, multiple transfers, high costs, and accessibility issues. Many shared personal experiences of how difficult it is to reach hospitals and medical facilities, particularly for those without a car.

Participants described having to take multiple buses to reach hospitals, making an already stressful trip even harder.

> *“My wee boy had an appointment over in Dundonald for speech and language. It was nuts. I had to take him out [of school] over an hour and a half before his appointment just to get him there.”*

This long travel time was not because of the actual distance, but due to the lack of direct routes and multiple transfers required.

Others spoke about unpredictable waiting times, leading to missed or delayed appointments.

> *“I had to leave so much, so far in advance, just to make sure I got there on time.”*

Some described instances where they arrived too early or too late due to bus schedules being unreliable.

Community transport

Some participants relied on community transport to get to healthcare appointments because public transport was too unreliable. Disability Action Transport Services (DATS) was praised for providing a valuable service for people with mobility issues, however it was noted that the cost of using the service could be considered high compared to public transport, in addition the service was deemed inflexible, requiring advance booking of up to a week which is not practical in many cases.

> *“DATS is great, but you have to ring a week before. What if you forget? There’s nothing they can do about it, and you’re stuck.”*

> *“It was actually costing me £6 a day, four days a week, just to use Disability Action Transport Services to get to appointments.”*

While community transport was helpful, the cost quickly added up, making it financially difficult for those on a low income.

Others mentioned that had to leave their car and take a taxi to make sure they arrived to healthcare appointments on time, leading to higher costs:

> *"I've even had to leave my car and get a taxi, which I'm paying more money for."*

This was particularly frustrating when hospitals did not have adequate parking, forcing people into expensive transport choices.

Parking problems at hospitals

Many residents who drive to hospital appointments reported severe parking challenges, leading to increased stress, delays, and additional costs. Participants described how limited parking availability forces them to circle for spaces, often making them late for appointments.

> *"Trying to get parked in the Royal [Hospital]? I sat there and eventually did get parked, but he was 25 minutes late for his appointment."*

High parking fees were another common complaint. Some participants mentioned that they had to pay steep charges just to park for a short appointment. One resident described how this affected them financially: "I already had to take time off work to get to the hospital, and now I'm paying over £10 just to park." For those who require frequent hospital visits, these parking costs add up quickly, creating another barrier to accessing healthcare.

Additionally, participants noted that hospital car parks fill up early in the day, meaning later arrivals are forced to park much farther away or even risk missing their appointments due to lack of available spaces. The lack of dedicated parking for patients with urgent needs, for example at A&E, was also cited as a key issue, with one parent parking in a shopping centre car park who risked getting fined to take her daughter to A&E.

> *"I had to park in the Park Centre and carry my daughter on my back to the Royal Hospital. I kept thinking, 'Please don't be clamped' because there was nowhere else to park."*

Impact on attendance and health outcomes

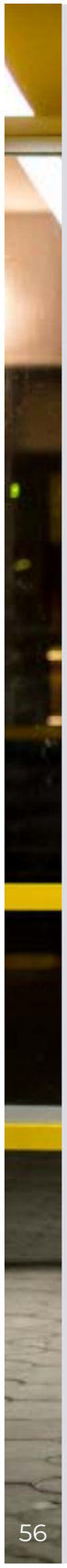
The difficulty of using transport for medical visits was leading to missed or rescheduled appointments. One participant recalled being 16-years old and receiving a text message warning them about the cost of missed NHS appointments—even though the bus was to blame for the delay.

> *"If you don't get to this appointment, you're costing the NHS this much."*

Others said that poor transport access leads to people skipping non-urgent medical care, which can cause worse health outcomes over time.

> *"If they put thought into that, they'd see how many people aren't getting to their appointments and how much that's costing."*

Participants suggested that bringing healthcare services into local communities could help those who cannot travel long distances easily.



3. Transport costs and financial impact

The rising cost of transport was a major concern for many participants, with bus fares, taxi costs, and fuel prices all placing financial strain on families.

> *"The cost of taxis, buses, and fuel is ridiculous. I've had to dip into my savings just to afford travel."*

Several participants noted that they would use public transport more often if fares were more affordable. There was a consensus that the cost of public transport kept growing over time making it increasingly unaffordable. Some suggested a subsidised travel scheme for low-income individuals, students, and young workers, similar to schemes available in other European cities.

> *"In Spain, you can go anywhere for €1. Here, they keep putting the prices up, and it just puts people off using buses."*

> *"If they subsidised bus fares properly, more people would use them instead of relying on their cars."*

Participants did commend the subsidised transport options available for older people, enabling them to use public transport for free.

Some felt forced to drive instead of using public transport, despite the high cost of fuel and insurance, simply because buses were too unreliable.

> *"It works out cheaper to drive than to get the bus. I'd rather pay for fuel than wait on an unreliable service."*

Several young people reported paying high taxi fares to get home from work, as public transport was unavailable late at night.

> *"I live beside Chapel New Park, and I've paid £30 just to get from town up to my house because the taxis know they can charge you that late at night."*

4. Lack of alternative transport options

Cycling was not seen as a viable alternative to other methods of transport due to a lack of cycle lanes, unsafe road conditions and driver behaviour.

Many participants expressed concerns about cycling in North Belfast, describing the roads as too dangerous for cyclists due to fast-moving traffic, poor road maintenance, and a general lack of respect from drivers. One participant stated, "I'd love to cycle, but you take your life in your hands on these roads." Another noted that cars often pass too close, making cycling feel too risky.

The group also highlighted the lack of dedicated cycle lanes, forcing cyclists to either ride on busy roads with no protection or use the pavement. "There's no proper cycle lanes, so where are you meant to go?" one participant asked.

Similarly, train services were not a practical option for most residents. Many pointed out that North Belfast lacks direct train connections to key areas, and reaching a station often requires multiple bus connections. One resident explained, "York Street is the nearest station, but you'd have to get two buses just to reach it." This extra travel time and cost make trains an unappealing option for everyday commuting.

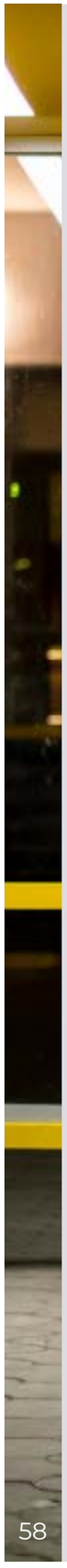
For most focus group participants, the lack of safe cycling options and the inconvenience of train travel meant that public buses or personal vehicles remained their only real choices, despite their flaws.

5. Environmental and health impacts of transport issues

Participants linked heavy traffic and pollution in North Belfast to high rates of respiratory illnesses, particularly among children and older adults.

> *"The amount of traffic around schools is awful. Look at the health stats—COPD and respiratory problems are huge in this area."*

The discussion also highlighted the emotional and social toll of lack of suitable transport options. Poor public transport options contribute to social isolation, particularly for older residents and those with mobility challenges. One participant shared, "If I can't get on a bus in the morning, I just don't go into town. It's not worth the hassle."



It was also noted however that bus did enable older residents to travel into Belfast to engage in social activities, for example to attend a Belfast City Council initiative on Royal Avenue in Belfast. However, their ability to travel was often hampered by overcrowding on buses early in the morning due to high volumes of school children.

6. Lack of joined up services

Participants expressed frustration over the lack of integration in transport services. A key issue raised was the need for a "joined-up approach" in transportation planning, especially when it comes to accessing medical appointments. One participant mentioned how they had to take multiple buses to reach a hospital appointment, saying, "It needs to be a joined-up approach to a number of things, you can't just look at it in isolation."

There was also a discussion about ticketing systems not being integrated properly. For example, one person shared an experience of being asked to leave a Glider bus despite already having purchased a ticket on their bank card:

> *"You get on the bus, tap your bank card, but then you get onto the Glider and they were like, oh no, you can't tap your bank card. You have to get off."*

This lack of integration between different transport modes caused confusion and inconvenience.

Another major point was the absence of well-connected services to hospitals and health centers. People spoke about needing to take multiple buses and spending long hours in transit just to make an appointment. "Trying to get over there was an hour and a half," one participant said, describing the difficulty of reaching an appointment for their child.

This lack of integration extends to community transport as well. Although Disability Action Transport Services (DATS) was praised for its convenience, it still required users to book a week in advance, making spontaneous or emergency trips difficult.

Overall, participants emphasised that disjointed services made public transport less practical, often forcing them to rely on cars or expensive taxis. They stressed the need for a more streamlined, accessible system that takes into account real-world travel needs rather than treating different transport modes as separate entities.

7. Safety and anti-social behaviour on public transport

A major concern for many participants was safety while using public transport, particularly buses. Many residents expressed feeling uneasy at bus stops and on-board buses, particularly in the evenings, due to anti-social behaviour from other passengers.

> *"The language is unbelievable, and you're going, guys, come on... The older generation are intimidated, it's overwhelming."*

There was also concern that large groups of school-aged passengers contribute to a chaotic and sometimes unsafe environment, with younger people often taking up excessive space, speaking loudly, and occasionally engaging in disruptive behaviour.

> *"The school kids swing their bags about, they're shouting, and older people just sit there quietly, hoping nothing happens."*

In addition to feeling unsafe on buses, many residents—particularly women and young people—felt unsafe walking to and waiting at bus stops, particularly at night. Poor lighting and isolated bus stops were identified as key issues.

> *"My cousin's afraid to get on the bus at 7 in the morning, so she pays £20 for a taxi to get to work."*

Residents do not feel that bus drivers have the power or authority to intervene in situations of anti-social behaviour or passenger disputes.

> *"You go up to the driver and say, 'they're causing trouble,' and the driver just says, 'there's nothing I can do about it.'"*

A proposed solution was reintroducing conductors or security personnel on buses, particularly at peak times and during night services, to provide reassurance to passengers and deter anti-social behaviour.

A lack of bus shelters was also highlighted as a significant barrier to using public transport. In many areas, people are left standing in the rain, wind, or cold without protection. This discourages bus use, particularly for older people and those with disabilities, who may not be able to stand for long periods.

> *"There are barely any bus shelters in this area. You're left standing in the rain, freezing cold, waiting on a bus that might not even show up."*

> *"The whole way down the Old Park Road, it's just a pole. No shelter, no seats. If it's raining, you get soaked before you even get on the bus."*

A key suggestion was to increase the number of bus shelters with seating and lighting, particularly in areas where public transport is the main mode of travel.

Recommendations for improvement

Focus group members put forward several recommendations to address these transport issues and reduce transport poverty in North Belfast. Their suggestions include:

- **Improve bus service reliability and frequency:** Hire more drivers and better plan routes so that buses run on schedule and cancellations are minimised. More frequent buses, especially during peak hours and early mornings, would help people get to work and appointments on time.

- **Enhance public transport infrastructure:** Install more bus shelters with seating and clear timetable information at stops. This would make waiting more comfortable and accessible, encouraging people to use the service. Proper shelters and lighting at stops are particularly important for older and disabled residents.

- **Better integration and ticketing:** Create a more integrated transport network. For example, a unified ticketing system could allow transfers between buses (and other services) without extra cost, making multi-stage journeys smoother. Coordination between routes should be improved so that connections (to hospitals, for instance) are timed more conveniently.

- **Increase affordability:** Make public transport more affordable by reducing fares or offering concessions for low-income individuals, students, and job-seekers. Some in the group even argued for free public transport as a long-term goal urging that buses and trains be treated as essential services that everyone should be able to access. At minimum, any planned fare hikes should be reconsidered in light of their impact on those already struggling.

- **Address safety and anti-social behaviour:** Increase the security presence on buses and at key stops. This could mean re-introducing bus conductors or dedicated transit officers, particularly on evening routes and those frequented by large numbers of schoolchildren. Working CCTV cameras on buses (with clear signage) were also suggested as a deterrent. These measures would help passengers feel safer and more confident, especially at night.

- **Expand community transport and accessibility:** Develop a community transport scheme to serve residents who are not on main bus routes or who have mobility difficulties. For example, a local shuttle or dial-a-ride service for elderly residents could bridge the gap. Additionally, improving conditions for walking and cycling – such as creating cycle lanes – would provide alternative ways to get around for short trips. This not only offers more travel options but also promotes health and reduces pollution in the long run.

Stakeholder Interviews on Transport Poverty in Northern Ireland

INTRODUCTION

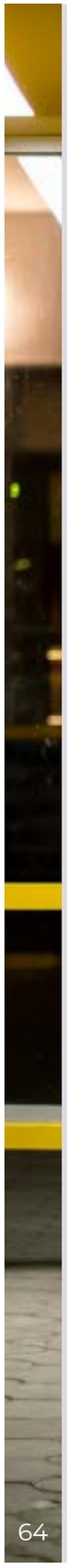
To gain a deeper understanding of stakeholder perspectives, a small number of interviews were conducted with representatives including a transport provider, a charity organisation and a community group. Their insights shed light on the diverse and complex factors contributing to transport poverty in Northern Ireland.

Key themes emerging from these discussions include accessibility, affordability, reliability, safety, and the impact of transport on social inclusion and essential services. The following section outlines the key themes from the interviews.

UNDERSTANDING THE TRANSPORT NETWORK

A major challenge identified across the interviews was the complexity of the transport network. Navigating the system, particularly for those unfamiliar with it, was frequently mentioned as a barrier. “It’s probably the biggest challenge—understanding the network and how to use it effectively,” one respondent noted. While services exist, the lack of intuitive connections often makes journeys unnecessarily complicated. This is particularly true for those who need to switch between different modes of transport in Belfast, such as buses, trains, and the Glider service.

For some users, particularly newcomers and older people, the absence of clear and easily accessible information exacerbates difficulties. “If you’re not familiar with the system, it can be overwhelming. Even just knowing which ticket to buy or how services connect isn’t straightforward,” another stakeholder explained.



While improvements such as the new Grand Central Station in Belfast aim to simplify journeys by providing a centralised hub, further efforts are required to enhance awareness and integration. Stakeholders also highlighted a lack of clear communication regarding updates or disruptions, making it harder for users to plan their journeys effectively.

AFFORDABILITY AND COST BARRIERS

Affordability was a significant concern, especially for those living outside Belfast. While the free bus pass for older people was acknowledged as an essential provision, there were concerns about its potential removal for certain age groups. “Older people spoke out about the fear of losing concessionary travel—it’s not just about leisure, but about getting to healthcare appointments and supporting family members,” one stakeholder explained. For those who do not qualify for concessionary travel, transport costs can be prohibitive, particularly in rural areas where long distances lead to higher fares. “In Belfast, there’s a daily fare cap, but outside the city, a single ticket might cost as much as a full day’s travel in town,” one interviewee pointed out. Some individuals opt for car-sharing or relying on community transport, but community transport services were described as underfunded and often oversubscribed, leading to uncertainty around availability. One interviewee noted, “Community transport is a lifeline, but there’s not enough of it to meet demand, and booking in advance isn’t always feasible.”

ACCESSIBILITY AND FREQUENCY OF SERVICES

The frequency and availability of public transport services emerged as a critical issue. In urban areas, transport was described as relatively well-connected during core hours, but in more rural locations or specific parts of Belfast, services were less frequent and sometimes unreliable. “You might need to go into the city centre and back out again just to get to a neighbouring area,” one interviewee pointed out. This lack of direct routes can add significant time to essential journeys, including those for work, healthcare and social activities. For those with mobility challenges, poor infrastructure and limited transport options further compound difficulties. “If you can’t drive and there’s no bus near your home, you might have to walk half an hour just to reach a stop. For older people or those with disabilities, that’s not feasible,” said one stakeholder. While the accessibility of vehicles was generally praised, concerns were raised about the adequacy of bus shelters, with one interviewee recounting a story of an elderly passenger who “simply gave up waiting after an extended delay and sat in a shelter for hours.”

RELIABILITY AND PUBLIC CONFIDENCE

The reliability of public transport was another recurrent theme. “Buses not showing up and no real-time updates is a major frustration,” a community representative noted. Reports of buses failing to arrive without notification led to a lack of trust in the system, which in turn discouraged people from using public transport. This was particularly problematic for those with medical appointments, where delays could have serious consequences. “I know of people missing a hospital appointment before because the bus just never turned up, and they couldn’t afford a taxi,” one respondent shared.

Night-time transport was another area of concern. While services have improved, some people remain reluctant to travel at night due to safety concerns, particularly in areas with high levels of anti-social behaviour. However, it was noted that major incidents on public transport are rare and often receive disproportionate media coverage, which can exacerbate public perception of risk. “Most services run safely, but the odd bad incident makes headlines and gives the impression that it’s unsafe overall,” explained one interviewee. Additionally, stakeholders highlighted that a visible staff presence, such as conductors or security personnel, would help to reassure passengers, particularly at night.

SOCIAL INCLUSION AND TRANSPORT POVERTY

Transport poverty was frequently linked to social isolation, particularly for older people and low-income groups. Without reliable and affordable transport, participation in social activities is significantly reduced. “Preventing loneliness is a huge public health issue—transport plays a key role in keeping people connected,” an interviewee emphasised. Limited transport options in rural areas further exacerbate this problem, with some individuals effectively cut off from services, shops, and social networks.

One stakeholder highlighted a case where an elderly woman depended on public transport not just for herself, but to accompany her sister to medical appointments. “Without free bus travel, she couldn’t afford to be there for her sister,” she explained. Additionally, young people from low-income backgrounds were identified as another group affected by transport poverty, particularly when seeking employment opportunities. “If you can’t afford to get to a job interview, you can’t break out of that cycle,” one stakeholder noted. The availability of transport directly affects social mobility and employment prospects, particularly for those who live in areas with limited transport links. Potential solutions and future improvements

Stakeholders identified several potential improvements to address transport poverty, including:

- **Better communication and awareness:** Many people are unaware of existing services, concessions, and alternative transport options. Improved signage, multilingual information for newcomer communities and clearer timetables could help bridge this gap. “Even something as simple as a clear, updated timetable at every bus stop would make a difference,” one interviewee suggested. The move towards digital and online timetables can isolate those who are less digitally savvy.

- **Increased frequency and connectivity:** More frequent bus services and better integration between different modes of transport were frequently mentioned as priorities. Rural areas, in particular, require more consistent and accessible transport links. “If there’s only one bus a day and you miss it, you’re stuck. We need services that meet real-life needs,” an interviewee stressed.

- **Enhanced affordability measures:** Expanding concessionary fares, particularly for those on low incomes, and ensuring that community transport services remain funded and available were highlighted as essential. “Affordability should never be a reason someone misses an essential appointment,” one stakeholder noted.

- **Improved infrastructure for walking and cycling:** Investing in well-maintained pathways, safe crossings, and better cycling infrastructure could make active travel a more viable option, particularly for first and last-mile journeys.

- **Collaboration between organisations:** Stronger partnerships between local councils, community organisations, and transport providers were seen as key to delivering long-term, sustainable transport solutions. “Community transport, public transport, and local planning teams need to talk to each other more,” one respondent suggested.

While efforts have been made to improve affordability and accessibility, gaps in service provision, reliability, and public awareness continue to pose challenges. Addressing these issues requires a coordinated approach, ensuring that transport is not only available but also meets the needs of those who rely on it most. As one interviewee succinctly put it, “If transport doesn’t work for the most vulnerable, it doesn’t work at all.”

CONCLUSIONS

This section explored the structural challenges, lived experiences and systemic barriers contributing to transport poverty in Northern Ireland, drawing from both secondary analysis and first-hand accounts. It is clear that transport poverty in the region is a complex and multidimensional issue that intersects with economic inequality, geography, infrastructure, and accessibility. It affects different groups in different ways, yet consistent themes emerge across formal reports and the first hand lived experiences of residents in Belfast.

The findings reveal stark contrasts between rural and urban accessibility, with many areas outside Belfast suffering from low public transport frequency, high car dependency and financial burdens associated with travel. The Department for Infrastructure’s transport studies further underscore congestion issues, poor connectivity, and barriers to active travel, showing that transport poverty is not limited to rural areas but manifests differently in cities and towns. Furthermore. transport poverty is more than just a mobility issue - it has profound consequences for employment, healthcare access and social inclusion. One of the most striking themes was the difficulty of using public transport to access healthcare. Several participants in the focus group and stakeholder interviews described long, multi-stage journeys to hospitals and clinics, often requiring multiple buses or expensive taxis. Some missed appointments due to unreliable services, while others struggled with parking fees and transport costs, reinforcing findings from secondary research that transport poverty directly impacts health outcomes.

While different sources approached transport poverty from varying perspectives, several consistent themes emerged across the secondary analysis, stakeholder interviews and focus group discussions:

1. **Unreliable and infrequent public transport:** Across all sources, service unreliability, long wait times, and inadequate frequency were identified as key barriers. Communication around network links and available services, as well as up-to-date and real-time information on timetables and services could also be improved.

2. **High cost of transport:** Whether due to expensive fares, car dependency, or high taxi costs, affordability remains a major issue.

3. **Limited accessibility and poor integration:** The fragmented nature of transport services, lack of seamless ticketing, and difficulties in multi-modal travel create barriers to efficient and convenient transport use.

4. **Barriers to healthcare and employment:** Transport poverty restricts access to essential services, particularly for older people, those with disabilities, and parents, limiting and impacting on healthcare access.

5. **Safety and security concerns:** Public perceptions of anti-social behaviour, poor lighting at stops, and lack of security staff were repeatedly cited as reasons why people avoid public transport at night.

6. **Car dependency and infrastructure gaps:** Many people feel forced to drive due to unreliable public transport, lack of safe cycling routes, and poor pedestrian infrastructure, leading to higher transport costs and environmental consequences.

The next section of this report will explore data metrics and measurement frameworks that could be used to quantify transport poverty more effectively, ensuring that interventions are data-driven and responsive to real-world needs.

Measuring transport poverty in Northern Ireland - data and metrics

This section identifies some of the metrics which could be used to measure transport poverty in Northern Ireland. The following table shows some of the available metrics which are being collected regarding transport and travel in Northern Ireland. These have been grouped into categories relevant to transport poverty.

TRANSPORT USE

METRIC	SOURCE	DESCRIPTION/KEY METRIC
Journeys by mode	Department for Infrastructure [9] Translink[10]	69% of all journeys are made by car. In 2021, public transport accounted for 3% of total distance travelled. On average, 155 miles were travelled per person on public transport. In 2023-24, there were 78.2 million journeys on public transport; this was an increase of 4.8 million or 6.5% since 2022-23, but a decrease of 6.2% from 2019-20 (83.4 million).
Why people travel	Department for Infrastructure [11]	39% of people travel for leisure or other, 18% for shopping, 17% for commuting or business, 14% for education, 9% for personal business and 4% for other escort.
Car ownership	Department for Infrastructure [12]	In 2021, 85% of households that had access to a car. Two fifths of households (40%) had access to one car and a further 45% of households had access to two or more cars. In 2021, the average number of cars per household was 1.44. For rural residents, 87% of total distance travelled was by car, higher than urban residents (80%). Rural residents also travelled more miles by car (5,448 miles) than urban residents (3,182 miles).
Public transport use	Department for Infrastructure [13 14]	Two fifths (40%) said they don't use local public transport in 2021.
Walking and cycling	Department for Infrastructure[15]	In 2021, walking accounted for 6% of total distance travelled. Cycling accounted for 1% of total distance travelled in 2021.
Traveling to work -mode	Department for Infrastructure[16]	85% of workers travel to work by car. When asked how easy or difficult it would be to make the journey to work in some other way, 58% said it would be quite difficult or very difficult. Those who said it would be difficult were asked why this was the case. The most frequently stated difficulty was that the "journey was not possible by public transport" (64%), followed by "poor connections" (35%) and then "too far/long journey" (27%).

9. https://www.infrastructure-ni.gov.uk/system/files/publications/infrastructure/tsni-in-depth-report-2021.pdf
10. Public Transport Statistics Northern Ireland 2023-24 | Department for Infrastructure
11. https://www.infrastructure-ni.gov.uk/system/files/publications/infrastructure/tsni-in-depth-report-2021.pdf
12. https://www.infrastructure-ni.gov.uk/system/files/publications/infrastructure/tsni-in-depth-report-2021.pdf
13. https://www.infrastructure-ni.gov.uk/system/files/publications/infrastructure/tsni-in-depth-report-2021.pdf
14. https://www.infrastructure-ni.gov.uk/publications/public-transport-statistics-northern-ireland-2023-24
15. Attitudes to Walking Cycling and Public Transport in Northern Ireland 2021-22
16. https://www.infrastructure-ni.gov.uk/system/files/publications/infrastructure/tsni-in-depth-report-2021.pdf

AFFORDABILITY MEASURES

METRIC	SOURCE	DESCRIPTION/KEY METRIC
Passenger Journeys by paid and subsidised travel	Department for Infrastructure[17]	Approximately 54% (34.8 million) of bus passenger journeys in 2023-24 were made by paying customers, while 78% (10.8 million) of rail passenger journeys were made by paying customers. Full fare concessions comprised 13% of bus passenger journeys and 16% of rail passenger journeys in 2023-24. The remaining 33% of bus passenger journeys and 6% of rail passenger journeys were in relation to subsidised school journeys.
Percentage of basic expenditure spend on travel by low and high income households.	Consumer Council NI household expenditure tracker[18]	In lowest income households 12% of basic income is spent on transport, compared to 16% on housing, gas, electricity and other bills (2024).
Expenditure on transport	Family spending in the UK[19][20]	14% of income spent on transport, second highest after housing. Weekly household spend on transport £71
Fuel costs	Consumer council fuel price checker[21]	Updated weekly see: https://www.consumercouncil.org.uk/fuel-price-checker

17. https://datavis.nisra.gov.uk/infrastructure/public-transport-statistics-northern-ireland-2324.html#Public_Transport_Journeys
18. https://www.consumercouncil.org.uk/research/q2-2024-northern-ireland-household-expenditure-tracker
19. https://www.ons.gov.uk/peoplepopulationandcommunity/personalandhouseholdfinances/expenditure/bulletins/familyspendingintheuk/april2022tomarch2023
20. https://www.investni.com/sites/default/files/2023-03/economic-intelligence-family-spending.pdf
21. https://www.consumercouncil.org.uk/fuel-price-checker

GEOGRAPHICAL FACTORS

METRIC	SOURCE	DESCRIPTION/KEY METRIC
Accessibility of public transport	Translink	Route maps, timetables, and coverage information for public transport services
Population density and proximity to services	NISRA[22]	NISRA's Geographic Information Systems (GIS): Includes spatial data on population density, proximity to services, and rural/urban classifications that can be overlaid with transport networks
Active travel routes	Department for Infrastructure[23]	DfI's Active Travel Delivery Plan publishes active travel routes and has consulted on future routes.

AVAILABILITY AND RELIABILITY

METRIC	SOURCE	DESCRIPTION/KEY METRIC
Service availability and customer satisfaction	Translink[24] Department for Infrastructure[25]	Of those who used local public transport, almost four fifths (78%) said they were satisfied with their local public transport services. The most popular improvements to local public transport services were "more frequent day services" (16%), "more frequent evening services" (15%), "more destinations or routes" (14%) and "more frequent weekend services" (14%). In 2021, just over 6 in 10 households (62%) lived within six minutes walk of a bus stop or place where they could get a bus. Translink reports on reliability to the Department for Infrastructure. This is not publicly available data but would be relevant when exploring transport poverty metrics.

22. https://www.nisra.gov.uk/publications/geography-data-zone-boundaries-gis-format
23. Active Travel Delivery Plan | Department for Infrastructure
24. https://www.translink.co.uk/Corporate/customersatisfactionresults
25. Attitudes to Walking Cycling and Public Transport in Northern Ireland 2021-22

ACCESSIBILITY

METRIC	SOURCE	DESCRIPTION/KEY METRIC
Movement limited due to accessibility	Department for Infrastructure[26]	24% of people living in a household whose day-today activities are limited do not have a car or van available for use. 20% had some difficulty with travel due to a physical disability or long-standing health problem.
Access to services	NISRA	Northern Ireland Multiple Deprivation Measure (NIMDM) 2017 includes an "Access to Services" domain, assessing deprivation based on travel times to key services. This measure provides insights into areas where residents may face challenges in accessing essential services, indirectly highlighting regions potentially affected by transport poverty.

SAFETY

METRIC	SOURCE	DESCRIPTION/KEY METRIC
Safety on public transport	Department for Infrastructure[27] PSNI	95% said they feel 'very safe' or 'fairly safe' when using public transport (from the Continuous Household Survey 2021/2022)

TIME

METRIC	SOURCE	DESCRIPTION/KEY METRIC
Journey Time Statistics	Department for Infrastructure[28]	The average time spent travelling was 291 hours per person. The 2021 travel survey doesn't provide specific numbers on travel for health activities, eg hospital appointments.

26. https://www.infrastructure-ni.gov.uk/news/transport-accessibility-statistics-northern-ireland-report-has-been-published-today
27. Travel Survey for Northern Ireland In-depth Report 2021
28. Travel Survey for Northern Ireland In-depth Report 2021

GAPS IN DATA

Public Transport Reliability:
Data on delays and cancellations are not publicly available.

Safety Perceptions:
Surveys on safety concerns (e.g., harassment or crime on public transport) may be underreported.

Health appointments:
Journey times to health appointments/services are not collected and the number of appointments missed due to transport issues is not available.

Model approach to addressing transport poverty

Addressing transport poverty requires innovative and multidimensional strategies that go beyond traditional transport planning. Model approaches incorporate data-driven analysis, cross-sectoral collaboration and sustainability principles to ensure equitable access to mobility for all.

This section explores three case studies that demonstrate effective responses to transport poverty: Public Health Scotland's (PHS) Theory of Change, the European Union's Approach to Transport Poverty, and Fermanagh and Omagh District Council's Data Mapping Approach. These examples illustrate how targeted interventions, strategic planning, and robust evaluation mechanisms can address the root causes of transport poverty while promoting inclusion, sustainability, and economic opportunity. By examining these models, we can identify actionable lessons that could inform policy development and practical solutions for regions such as Northern Ireland.

PUBLIC HEALTH SCOTLAND (PHS) – THEORY OF CHANGE FOR TRANSPORT POVERTY

Public Health Scotland (PHS) is addressing transport poverty by employing a Theory of Change within a Whole System Approach. This strategy aims to understand and tackle the root causes of transport poverty and its impact on health inequalities.

In January 2024 PHS published a briefing titled "Transport Poverty: A Public Health Issue." This document outlines the causes of transport poverty and details how it influences health and health inequalities. The purpose was to inform discussion and shape future policy, action and evaluation to ensure the causes of transport poverty are addressed and that there are more equitable transport options for all.

‘Theory of Change’ in addressing transport poverty:

1. **Identifying root causes:** PHS’s Theory of Change begins by pinpointing the systemic factors contributing to transport poverty, such as inadequate infrastructure, high costs, and policy gaps.

2. **Engaging stakeholders:** It emphasises collaboration with local authorities, transport providers, and communities to co-create solutions that are context-specific and sustainable.

3. **Implementation:** The approach involves designing and executing targeted actions, like enhancing public transport services and ensuring affordability, to alleviate transport poverty.

4. **Evaluating outcomes:** Continuous assessment of the interventions’ effectiveness in reducing transport poverty and improving health outcomes is integral to the process.

Collaborative efforts

PHS works in partnership with local authorities, transport providers, and community organisations to ensure that evaluation processes are comprehensive and inclusive. This collaboration facilitates the sharing of data and resources, enhancing the overall effectiveness of evaluation efforts.

Continuous improvement

Findings from evaluations are used to refine and adapt strategies, ensuring that interventions remain responsive to emerging challenges and community needs. This iterative process supports the development of sustainable solutions to transport poverty.

In summary

Public Health Scotland (PHS) has adopted a comprehensive approach to addressing transport poverty, recognising its significant impact on health and well-being. This strategy involves defining transport poverty, identifying its causes, and understanding its influence on health inequalities. PHS’s approach is rooted in integrating transport considerations into public health frameworks, ensuring that policies address both mobility and health disparities. By highlighting the links between transport poverty and issues like access to healthcare, employment and social opportunities, PHS promotes equitable and health-conscious decision-making.

One of the strengths of PHS’s approach is its holistic understanding of transport poverty. The model examines both direct and indirect factors that contribute to transport deprivation, such as affordability, accessibility, and safety. This comprehensive view allows for the development of targeted interventions. Additionally, PHS has successfully integrated policy and stakeholder engagement into its strategy, fostering collaboration across sectors. By involving local authorities, transport providers, and health services, the approach encourages a coordinated effort to tackle the multifaceted nature of transport poverty.

However, the approach is not without its limitations. Comprehensive data collection is essential for accurately assessing transport poverty and its health impacts, but gaps in data availability can hinder the effectiveness of interventions. Furthermore, implementing wide-ranging policies and projects requires significant resources, which may be challenging to secure. The complex interdependencies between transport poverty and broader socio-economic factors also present challenges, as isolating and addressing specific causes often requires tackling systemic issues like income inequality and rural infrastructure deficits.

Lessons for Northern Ireland

Northern Ireland can learn valuable lessons from PHS’s work. Adopting a public health perspective on transport poverty could lead to more integrated policy responses, particularly if transport is framed as a determinant of health. Collaborative frameworks that engage multiple stakeholders - including health services, transport authorities and community organisations - can enhance the effectiveness of interventions. However, while the overarching principles of PHS’s approach are transferable, any strategy in Northern Ireland must be tailored to its unique demographic, geographic, and socio-economic contexts to address the specific challenges faced by rural and urban communities.

THE EUROPEAN UNION'S APPROACH TO TRANSPORT POVERTY

The European Union (EU) offers a comprehensive policy-driven approach to addressing transport poverty, incorporating it into broader goals of sustainability, social equity, and climate neutrality. While not a formalised theoretical model, the EU's framework is a practical policy model that prioritises both environmental justice and social inclusion. This approach is particularly relevant for addressing systemic inequalities in mobility and ensuring that disadvantaged populations are not left behind in the transition to sustainable transport systems.

Key elements of the EU approach

1. **Recognition of transport poverty as a social and environmental issue**
   The EU defines transport poverty as the lack of adequate, affordable, and accessible transport services that enable individuals to meet daily needs and maintain a reasonable quality of life. It recognises that transport poverty is closely linked to social vulnerabilities, such as income inequality, old age, and disabilities, as well as regional disparities between urban, rural, and remote areas.

2. **Integration into broader policie**s
   Transport poverty is explicitly addressed in major EU initiatives, such as the Fit for 55 package, which aims to achieve climate neutrality by 2050. The inclusion of transport poverty in these policies reflects a systemic understanding of its role in exacerbating health and social inequalities, as well as its intersection with environmental goals.

3. **Equity in decarbonisation**
   The EU emphasises the need to ensure that low-income households and disadvantaged populations are not disproportionately affected by climate policies, such as increased taxation on fossil fuels or the transition to electric vehicles. The establishment of the Social Climate Fund within the Fit for 55 framework exemplifies this commitment, providing financial support to households facing mobility challenges during the green transition.

4. **Data-driven decision making**
   The EU promotes the development of indicators to assess and monitor transport poverty across member states. This evidence-based approach ensures that interventions are targeted effectively, resources are allocated equitably, and progress is measurable.

5. **Cross-sector collaboration**
   The EU's strategy involves collaboration across sectors, including transport, housing, and health, as well as partnerships with local governments, private transport operators, and civil society. This integrated approach addresses transport poverty as a multifaceted issue requiring coordinated efforts.

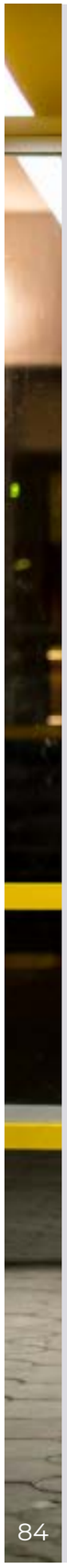
Policy measures and interventions

1. **Social Climate Fund**
   A core element of the EU's approach, this fund provides financial assistance to households and individuals who are disproportionately affected by the costs of transitioning to low-carbon mobility. By mitigating the economic strain on vulnerable populations, the Social Climate Fund directly addresses the affordability dimension of transport poverty.

2. **Sustainable and smart mobility strategy**
   This strategy emphasises the importance of modernising transport systems to expand accessibility, particularly in underserved rural and urban areas. Initiatives include investments in public transport infrastructure, promotion of active travel, and policies to reduce car dependency.

3. **Urban mobility framework**
   The framework supports sustainable urban planning, encouraging cities to reduce car dependency by investing in public transit, cycling, and walking infrastructure. It also prioritises inclusive transport systems that cater to the needs of marginalised groups.

The EU's approach highlights the importance of aligning transport poverty alleviation with broader sustainability goals, providing a scalable and adaptable model for other regions. However, the complexity of implementing policies across diverse member states and the potential gaps in localised targeting present challenges. Additionally, while the approach ensures equity within the context of decarbonisation, it may not fully address all dimensions of transport poverty, such as safety or last-mile connectivity.



Lessons for Northern Ireland

Northern Ireland can draw from the EU's model to develop a tailored approach to transport poverty, which could include:

- Financial mechanisms: Establishing subsidies or local funds to assist low-income households in accessing affordable transport.
- Integrated policies: Aligning transport initiatives with health, housing, and sustainability strategies to address systemic barriers.
- Data and indicators: Developing localised metrics to identify transport-poor populations and measure the effectiveness of interventions.
- Collaborative frameworks: Encouraging partnerships between public agencies, private operators, and communities to design inclusive solutions.

By adopting these principles, Northern Ireland can address its unique transport challenges while encouraging greater social equity and sustainability. The EU's approach serves as a practical and adaptable policy model for tackling transport poverty in the context of broader regional and global goals.

FERMANAGH OMAGH DISTRICT COUNCIL DATA MAPPING APPROACH

Fermanagh and Omagh District Council (FODC) has implemented a comprehensive data mapping approach to address transport poverty, recognising its significant impact on residents' access to essential services and overall quality of life. This initiative is part of a broader effort to understand and mitigate the effects of multiple forms of poverty—namely fuel, transport, and food poverty—within the council area.

Collaborative research initiative

In 2022-2023, FODC collaborated with Ulster University to investigate the spatial patterns of fuel, transport, and food poverty across the council area. The research aimed to determine whether rurality increases the risk of these forms of poverty and to provide detailed maps to inform targeted interventions. The study utilised a mixed-methods approach, integrating various datasets into a Geographical Information System (GIS) to visualise areas at risk. This methodology allowed for a nuanced analysis of how different factors, such as accessibility to services and socio-economic status, contribute to transport poverty.

Data Collected:

1. **Population density and settlement classification:**
   - Data on population distribution across different settlement types, including urban areas, villages, and open countryside, to understand the spatial dynamics of transport accessibility.
2. **Public transport accessibility:**
   - Information on the frequency and availability of bus services during weekdays and weekends, mapped to assess public transport coverage.
   - Proximity of households to bus stops, specifically identifying properties more than a 10-minute walk from the nearest stop.
3. **Vehicle ownership statistics:**
   - Census data detailing the percentage of households without access to a car or van, highlighting potential dependence on public transport.
4. **Socio-economic indicators:**
   - Multiple Deprivation Measures to identify areas experiencing higher levels of deprivation, which may correlate with transport poverty.
   - Income levels and employment status to understand economic factors influencing transport affordability.
5. **Demographic information**:
   - Age distribution, focusing on vulnerable groups such as the elderly and young renters, who may face unique transport challenges.
   - Health data indicating populations with disabilities or long-term illnesses that affect mobility.
6. **Travel times to key services:**
   - Data on travel times to essential services (e.g., healthcare facilities, supermarkets) using both private and public transport, to evaluate accessibility.

7. **Geographical Information System (GIS) Data:**
    - Spatial data integrating the above variables to create visual maps identifying areas at high risk of transport poverty.

Key Findings

The research identified significant disparities in transport accessibility within the district:

- **Rural vulnerability:** Rural areas were found to be more vulnerable to transport poverty, with limited public transport options exacerbating residents' ability to access essential services.
- **Urban pockets of vulnerability:** While rural areas were more affected, certain urban areas also exhibited high levels of transport poverty, indicating that the issue is not confined to rural settings alone.
- **Co-occurrence of multiple poverties:** The study revealed that 52 small areas within the district are at risk of at least two of the three types of poverty (fuel, transport, and food), with four small areas experiencing all three. This co-occurrence suggests a compounding effect, where multiple forms of deprivation intersect, leading to more severe outcomes for affected populations.

Implications for policy and Interventions

The detailed mapping of transport poverty has provided FODC with a robust evidence base to inform policy decisions and allocate resources effectively. By identifying specific areas where transport poverty is most acute, the council can implement targeted interventions, such as enhancing public transport services or developing community-based transport solutions. This strategic approach aims to alleviate the compounded effects of multiple poverties and improve residents' access to essential services, thereby enhancing their overall quality of life.

The data mapping approach

FODC's data mapping approach serves as a model for other regions grappling with similar challenges. By leveraging collaborative research and advanced spatial analysis, the Council has gained a comprehensive understanding of transport poverty within its jurisdiction. This informed perspective enables the development of targeted, effective interventions that address the specific needs of vulnerable populations, ultimately fostering a more equitable and accessible community.

The data mapping approach provides a sophisticated framework for understanding and addressing transport poverty, particularly in rural and semi-urban areas. By utilising Geographic Information Systems (GIS) to identify at-risk areas, the approach integrates variables such as income levels, car ownership, accessibility, and public transport frequency. This spatially aware analysis offers a detailed understanding of the geographic and socio-economic factors contributing to transport poverty. Additionally, the incorporation of cluster analysis allows for targeted interventions in areas identified as "High-High" clusters, ensuring that limited resources are allocated to the most vulnerable populations.

The methodology's strengths lie in its ability to address the unique challenges of rurality, where public transport options are often sparse, and private car dependency is high. By combining socio-economic indicators with geographic data, the approach offers actionable insights for policymakers, such as increasing public transport frequency, addressing transport deserts, and developing multi-modal connectivity solutions. Furthermore, the model's focus on localised solutions ensures that recommendations are tailored to the specific needs of the Fermanagh and Omagh District.
However, the approach also has limitations. Its reliance on data from the 2011 UK Census and other older sources may not fully capture the current socio-economic realities, particularly in light of the COVID-19 pandemic and ongoing cost-of-living crises. The lack of qualitative insights from affected communities is another drawback, as it limits understanding of the lived experiences and specific barriers faced by those in transport poverty. Additionally, the absence of weighted indicators, such as income and car ownership, risks oversimplifying the complexities of transport poverty. The report itself acknowledges that the lack of "ground truthing" may impact the accuracy of transport poverty indices, which could lead to misaligned interventions.

Lessons for Northern Ireland

This data mapping approach has potential for broader application across Northern Ireland, with adjustments for local contexts. For example, its ability to identify transport deserts and areas of high car dependency is particularly relevant to the rural transport challenges experienced throughout the region. In Belfast, however, the approach would need modifications to address urban-specific issues like congestion, fare affordability and last-mile connectivity. Adding data on active travel infrastructure and community mobility patterns would be crucial for adapting the model to a denser urban environment.

To improve the approach, updated demographic and economic data should be incorporated alongside community surveys to provide qualitative insights. Equity-focused measures could enhance the framework by accounting for diverse needs, such as those of elderly individuals, women and people with disabilities. Field-level verification, or “ground truthing,” would also ensure that the identified high-risk areas align with actual conditions on the ground. Collaboration with community groups and local councils could further refine intervention strategies and enhance their impact.

Overall, the Fermanagh and Omagh District Council’s approach offers a robust foundation for tackling transport poverty. While the methodology is particularly suited to rural settings, with refinements and contextual adaptations, it holds promise for broader implementation across Northern Ireland and in urban areas like Belfast. Its focus on data-driven, actionable solutions provides a valuable model for addressing transport inequality.

Implementing effective models in Northern Ireland

Each model presents key strategies that Northern Ireland can adopt to reduce transport poverty and improve mobility:

- Public Health Scotland’s model highlights the need to link transport and health policies, ensuring mobility is treated as a social determinant of health.
- The EU model emphasises financial aid mechanisms, sustainability and integrated planning, which Northern Ireland could adopt to fund transport accessibility improvements.
- Fermanagh and Omagh’s data mapping demonstrates how spatial analysis can guide targeted interventions, an approach that could be scaled to regional and national levels.

To effectively tackle transport poverty, Northern Ireland must adopt a hybrid approach, combining data-driven planning, stakeholder collaboration, and targeted investment in affordable and sustainable transport solutions.

Conclusions and Recommendations

CONCLUSIONS

Transport poverty in Northern Ireland is a significant challenge that affects social inclusion, economic participation and health outcomes. The evidence gathered in this report highlights how limited accessibility, high travel costs, and inadequate infrastructure contribute to disparities in transport provision, disproportionately impacting rural communities, low-income households, and vulnerable groups such as the elderly and people with disabilities.

Drawing on the three model approaches explored - Public Health Scotland’s Theory of Change, the European Union’s policy-driven framework, and the Fermanagh and Omagh District Council’s data-mapping approach - it is evident that a multi-faceted and collaborative strategy is required to address transport poverty effectively. A health-focused model that integrates accessibility with public health outcomes, equity considerations, and sustainable mobility initiatives offers the best path forward for Northern Ireland.

A proposed model for addressing transport poverty should include the following key components:

1. **Integrated public health approach**
   Transport poverty should be treated as a public health issue, recognising its impact on physical and mental well-being. Poor transport access leads to reduced healthcare access, social isolation, and lower physical activity levels, all of which contribute to poor health outcomes. Addressing transport poverty through a health lens ensures policies focus on improving accessibility to healthcare, health implications and social engagement opportunities.

2. **Health Impact Assessment (HIA) integration**
   A Health Impact Assessment (HIA) should be embedded within transport planning to systematically evaluate the health consequences of transport policies and projects. This assessment should:

- Identify how transport accessibility influences health inequalities, including respiratory conditions from air pollution and mental health impacts from social isolation.
- Assess potential health co-benefits of sustainable mobility policies, such as increased active travel reducing obesity and cardiovascular disease.
- Ensure transport interventions prioritise reducing health disparities and enhancing access to essential health services.

3. **Data-driven decision making**
   Building on the Fermanagh and Omagh District Council's data-mapping initiative, policymakers should leverage Geographic Information Systems (GIS) and other data tools to identify high-risk areas and prioritise interventions. Updated demographic and economic data, alongside community insights, should inform targeted transport solutions tailored to local needs.

4. **Sustainable mobility solutions**
   Inspired by the European Union's strategy, a focus on sustainable and equitable mobility solutions is key. This includes expanding active travel infrastructure, enhancing public transport services and implementing initiatives that reduce car dependency, particularly in rural areas.

5. **Collaboration across sectors**
   Addressing transport poverty requires a cross-sectoral approach involving government departments, health services, transport providers and community organisations. A collaborative governance framework will help ensure that transport interventions are aligned with broader health and social policy goals.

6. **Affordability and accessibility measures**
   Policies should focus on reducing the financial burden of transport, particularly for low-income groups. This could include fare subsidies, concessionary schemes and flexible transport services to improve accessibility to essential services.

RECOMMENDATIONS

1. Convene a 'Strategic Transport Poverty Forum'

Belfast Healthy Cities should lead the formation of a 'Strategic Transport Poverty Forum' comprising key stakeholders from public health, transport planning, community representatives, and policymakers. The forum would develop the model for addressing transport poverty and facilitate cross-sector collaboration to coordinate efforts and track progress against clear goals.

2. Develop a 'Transport and Health Strategy' for Northern Ireland

The 'Strategic Transport Poverty Forum' should work towards establishing a strategic framework that aligns transport planning with public health objectives. Including:

- Ensuring public transport routes prioritise healthcare facilities, employment hubs, and social spaces to promote well-being and social inclusion.
- Implementing a Health Impact Assessment (HIA) process, with guidance from Belfast Healthy Cities, to measure the health effects of transport interventions.

3. Invest in community transport solutions

- Expand flexible, demand-responsive transport services to cater to rural communities and individuals with mobility challenges.
- Support local community initiatives that provide affordable, reliable transport options.

4. Enhance public transport accessibility

- Improve the affordability of public transport through targeted subsidies and fare integration models.
- Increase service frequency and reliability, particularly in areas with identified transport poverty hotspots.

- Improve communication and information around transport networks and fair caps.
- Improve integration across existing services, particularly in relation to fares and tickets.

5. Promote active travel infrastructure

- Expand safe walking and cycling routes to encourage healthier, more sustainable travel habits.
- Invest in public awareness campaigns to promote the benefits of active travel for health and the environment.

6. Strengthen data collection and monitoring

- Establish a comprehensive monitoring framework to assess transport poverty trends over time.
- Engage communities in co-designing transport solutions that reflect their lived experiences and needs.

7. Policy integration and stakeholder engagement

- Encourage stronger collaboration between transport, health and planning departments to ensure a coordinated response.
- Engage with local authorities, businesses and community groups to deliver place-based solutions.

By adopting a holistic and health-focused approach to tackling transport poverty, Northern Ireland can create an equitable transport system that enhances quality of life, reduces health inequalities, and supports economic and social inclusion.

Limitations

This report provides an analysis of transport poverty in Northern Ireland, highlighting its causes, consequences and potential solutions. However, several limitations should be acknowledged to ensure a balanced interpretation of the findings.

Data gaps and availability

The absence of consistent, real-time transport usage and accessibility data makes it difficult to quantify the full extent of transport poverty. Additionally, while this report explores the health impacts of transport poverty, there is a lack of longitudinal studies directly linking transport deprivation to health outcomes in Northern Ireland.

Generalisability limitations

The findings are informed by localised case studies, including a focus group in North Belfast. While these provide valuable insights into transport poverty, they may not fully capture regional variations across all of Northern Ireland. Transport challenges differ significantly between densely populated urban areas like Belfast and less populated suburban and rural areas. Consequently, while the themes presented in this report are broadly applicable, individual areas may experience transport poverty in unique ways that require tailored policy responses.

Subjectivity and lived experience accounts

Qualitative insights gathered from focus group discussions and stakeholder interviews offer critical perspectives on transport affordability, accessibility, and reliability. However, these accounts are inherently subjective, reflecting personal experiences rather than objective transport performance metrics. While these narratives highlight key challenges and barriers, they do not necessarily provide a statistical representation of the wider population's experiences. Additionally, public perceptions of transport reliability and safety may sometimes differ from actual service data due to factors such as media influence, anecdotal experiences, or localised issues.

Policy and infrastructure changes

The report considers recent and ongoing transport policy and infrastructure developments, including the Belfast Grand Central Station project and the All-Island Strategic Rail Review. However, these projects are still in various stages of development, and their long-term impact on transport accessibility remains uncertain. Additionally, policy changes regarding rural transport subsidies, fare structures and sustainability initiatives could significantly alter the landscape of transport poverty after the publication of this report.

Economic and external factors

Transport affordability is directly influenced by economic conditions, such as fuel prices, inflation, budget measures and cost-of-living fluctuations. These factors are difficult to predict and can rapidly shift affordability trends, particularly for low-income households. Additionally travel patterns, including changing work-from-home trends and shifts in public transport demand, could influence long-term transport usage in ways not fully accounted for in this report.

The limitations outlined above highlight areas where further research and policy analysis are needed. Addressing these gaps through improved data collection, regional case studies, and ongoing policy evaluation will be essential in ensuring that transport interventions are equitable, effective, and sustainable for all communities in Northern Ireland.

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Appendix 1: About Belfast Healthy Cities

As a proud member of WHO European Healthy Cities Network, which comprises over 88 cities and 20 national networks, Belfast Healthy Cities has been at the forefront of this global initiative since 1988.

Our work aligns with the goals of WHO European Healthy Cities Network Phase VII (2019–2026), focusing on health equity, sustainability, and well-being. With over 35 years of experience, we are a trusted partner in challenging health inequalities and improving the quality of life for all citizens here.

Collaborating with key stakeholders and Government at all levels, we remain dedicated to creating a healthier Belfast for current and future generations. At Belfast Healthy Cities, our vision is to be a leader in creating a healthy, equitable, and sustainable city. We are committed to promoting a Belfast where every individual has the opportunity to live a healthier, more fulfilling life within an inclusive and sustainable environment.

Our mission is to promote health and well-being, provide inspiration and facilitate innovative collaborative action, and driving effective policies.

We achieve this through:

- Leadership and learning: Drawing on our membership of WHO European Healthy Cities Network to inform and inspire action.
- Evidence and capacity building: Supporting research, sharing evidence, and enhancing the capacity of organisations to address health inequalities.
- Innovation: Introducing and piloting forward-thinking concepts and approaches to improve public health.
- Maximising impact: Enabling partners to amplify their impact on health and inequalities across Belfast.

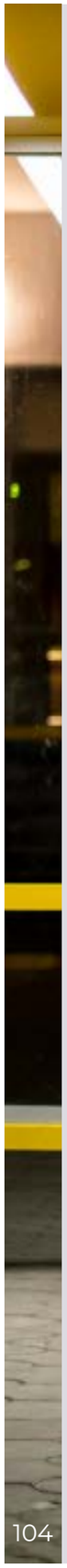
One key area of focus for BHC is sustainable transport, having led numerous initiatives addressing transport poverty, car dependency, and the links between transport and health. Notable projects include piloting community-focused interventions such as the Walking Bus initiative (2022), advocating for equitable transport access through policy submissions, and highlighting the critical role of active travel in improving urban health outcomes. With extensive experience in convening cross-sector partnerships, conducting health impact assessments and influencing local policy and planning decisions, BHC continues to play a leading role in creating a healthier, more equitable, and sustainable transport system for Belfast.

Appendix 2: International Healthy Cities Network: Lessons for Belfast

As part of WHO Healthy Cities Network (HCN), Belfast has access to innovative international examples illustrating how urban design and active travel strategies can effectively reduce transport poverty and improve health outcomes. Notably, Professor Carlos Moreno's "15-minute city" concept, emphasises neighbourhoods designed so that essential services and amenities are accessible within a 15-minute walk or cycle. This model directly tackles transport inequalities by reducing reliance on private cars, improving local accessibility, and enhancing community resilience (Moreno, 2023).

Further insights can be drawn from WHO HCN cities such as Kuopio, Finland, and Freiburg, Germany. Kuopio's "Ring City Model" integrates land-use planning and transport infrastructure to actively promote cycling, walking, and public transit, significantly reducing car dependency while enhancing public health outcomes (Belfast Healthy Cities, 2014). Freiburg has set global benchmarks through comprehensive urban strategies prioritising pedestrian-friendly zones, extensive cycling networks, and efficient public transport systems, which have resulted in exceptionally high levels of active travel and community health improvements (Belfast Healthy Cities, 2014).

Luxembourg provides an exceptional international case in addressing transport equity through policy innovation. In 2020, Luxembourg became the first country worldwide to offer free public transport across its entire network, including buses, trains, and trams, accessible to all residents and visitors without cost. This policy was explicitly introduced to reduce car dependency, mitigate transport poverty, and tackle issues of environmental pollution, traffic congestion and social inequality. By removing financial barriers, Luxembourg's approach ensures equitable mobility, encourages a shift toward sustainable transport modes, and positions transport access as a fundamental public right (Luxembourg Government, 2025).



Copenhagen, Denmark, offers another exemplary model through its comprehensive commitment to cycling infrastructure and integrated public transportation. Known internationally as the ‘City of Cyclists’, over 60% of Copenhagen’s residents commute by bicycle daily, enabled by extensive networks of dedicated cycling lanes, cycle-friendly traffic signals, and secure parking facilities. This high cycling adoption has notably reduced transport costs, air pollution, and congestion, while significantly improving residents’ physical and mental health. Additionally, Copenhagen boasts a fully integrated public transport system, combining metro, bus, rail, and water transport seamlessly within a single fare and ticketing structure, greatly enhancing convenience, affordability, and accessibility. This integrated approach further encourages public transport use, reduces reliance on private cars, and ensures equitable mobility across socioeconomic groups and city districts (City of Copenhagen, 2023).

Additionally, the influential work of urbanist Jan Gehl, showcased by Belfast Healthy Cities at events such as the “Reuniting Planning and Health” conference (2014), advocates designing cities around human well-being. Gehl’s approach prioritises pedestrian and cyclist needs, fostering inclusive, vibrant, and healthy urban spaces (Belfast Healthy Cities, 2014).

Finally, Scotland’s ‘Place Standard Tool’ serves as another valuable resource[29]. This structured framework helps communities and urban planners systematically evaluate how well a location supports health, well-being, and sustainable transportation. Its practical application enables identification of transport poverty and promotes informed, participatory dialogue on enhancing urban accessibility and quality of life.

By considering these international examples and resources, Belfast can strengthen its strategic approach to transport poverty and active travel, developing tailored solutions that enhance equity, sustainability and public health.

29. https://www.ourplace.scot/tool

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HSC Belfast Health and Social Care Trust

HSC Public Health Agency

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