



PUBLIC TRANSPORTATION AND ACTIVE TRANSPORTATION DURING THE PANDEMIC

COVID-19 and Urban Health in Latin America



Key Points

- Public transportation and active transportation are essential for building healthier and more equitable cities.
- Public transport and active transport (such as cycling or walking) have multiple benefits for the health of the population and the environment.
- There are ways to reduce the risk of contagion of SARS-CoV-2 while using public transportation.
- Investing in public transport and active transport to maximize benefits and minimize risks remains essential even during a pandemic.

Public Transportation in Latin America

- Public transportation and active transportation represent 68% of all trips in Latin American cities; however, only 0.8% and 1.2% of road space is designated to these modes, respectively.¹
- Areas with a better public transportation network tend to be the ones most used by private cars, resulting in traffic congestion and increased travel delays.
- The outskirts of cities are more likely to experience low quality and coverage of public transportation services.
- Lack of investment in public transport systems and low institutional capacity to manage reforms have contributed to slow, uncomfortable and unreliable services.¹

PUBLIC TRANSPORTATION AND ACTIVE TRANSPORTATION

Concept	Definition
Active transportation (Examples: walking, riding a bike)	Self-propelled transportation, on foot or using a bicycle, rollerblades, wheelchair, or similar device. ²
Public transportation (Examples: bus, metro)	Transportation that mobilizes groups of passengers. In general, public transport operates with fixed routes, predetermined schedules, and a set rate, although it may also include less formal alternatives. ³



>50%

of the population depends on public transport on a typical working day in large cities such as Bogotá, Mexico City and Panama City.⁴



1/3

of trips are made on foot in large cities such as Bogotá, Mexico City, Santiago de Chile, São Paulo and Buenos Aires.⁵

Passengers who use public transportation use active transportation options more frequently.⁵

Public transportation and COVID-19

- During the pandemic, public transportation has provided a critical service for health workers and patients, as well as other workers who perform essential activities.
- If adequate safety measures are not implemented, the use of public transport may increase the risk of contagion of SARS-CoV-2.⁶
- Disadvantaged groups depend the most on public transport and suffer the most from its deficiencies.
- The COVID-19 pandemic has highlighted inequities in both mobility and health.



Between **55%** and **80%** of people in Latin America do not have the option of working remotely.⁷

RECOMMENDATIONS

Key recommendations to reduce the spread of SARS-CoV-2 and other respiratory diseases while using public transportation include:

RECOMMENDATION 1- Wear a mask at all times. Face masks are a vital tool for stopping the spread of SARS-CoV-2 in closed spaces or where it is not possible to maintain distance. Masks must cover the nose, mouth, and chin.⁸



UP TO
86%

of COVID-19 cases may present no symptoms (called asymptomatic cases).⁹



UP TO
44%

of COVID-19 cases may have resulted from infection by an asymptomatic person.¹⁰

RECOMMENDATION 2- Limit the number of passengers. Compliance must be monitored, and these limits should be compensated with more frequent availability of transportation (e.g., buses or trains). Similarly, staggering school and workdays may reduce peaks in passenger traffic.



Signs on chairs and floors should indicate appropriate distance.

RECOMMENDATION 3- Limit speaking, singing, eating, and shouting during journeys, even while using a face mask. Communicating with other passengers or talking on a cell phone may play an important role in transmitting the virus.

This measure has been implemented by the Mexico City metro system since June 2020.¹¹



Photo credit: Economía Hoy

RECOMMENDATION 4- Keep windows open on transportation vehicles. Viruses can linger longer indoors. Increased ventilation may reduce the risk of airborne transmission. If air conditioning systems are used, they should be modified to increase the circulation of fresh air and avoid recycling indoor air.



Prioritize the **use of natural ventilation** and avoid the use of air conditioning that recirculates indoor air.

RECOMMENDATION 5- Limit travel time whenever possible, ideally to less than 30 minutes. Exposure time appears to play a role in determining risk of contagion. Reducing travel time may require:

- Staggering work and school hours.
- Restrictions in the use of private cars to reduce congestion.
- The designation of exclusive lanes for public transportation.
- Redesigned or redesignated stops to keep traffic flowing.



In Latin America, the average commute time to work is **40 minutes**.¹³



67
MINUTES

Average commute to work in Panama City.¹⁴



63.4%

Percentage of trips to work that take more than half an hour in Mexico City.¹⁵

RECOMMENDATION 6- Install hand washing stations. These stations should provide instructions for handwashing with soap and water, or the application of hand sanitizer, before getting on and off public transportation and upon arriving at the destination¹⁶.

RECOMMENDATION 7- Diversify public transport options. Local governments should promote strategies that increase public transport options and facilitate active transport (for example: discounts or subsidies for users with fewer resources, better connectivity between public transport stations and active transport routes).

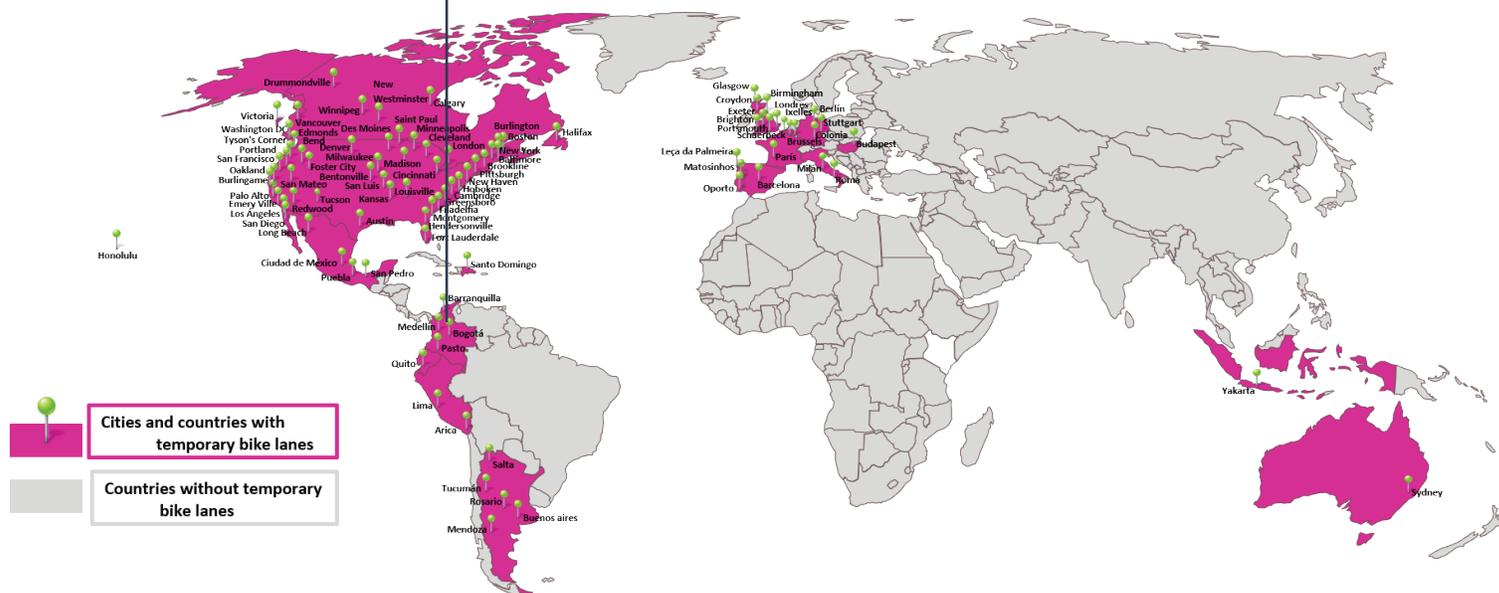
TEMPORARY BIKE LANES

93 cities

20 countries

Bike lanes are specific areas designated for cycling using signage and/or physical barriers. Temporary bike lanes have been implemented in 93 cities around the world.

In Bogotá, Colombia, 80 kilometers of temporary bike lanes were created beginning in March 2020, and work is underway to convert 21km of these into permanent bike lanes.



Geographic distribution of cities and countries with temporary bike lanes in 2020

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Salud Urbana en América Latina (SALURBAL), Urban Health in Latin America, is a five-year project that studies how urban environments and urban policies impact the health of city residents throughout Latin America. SALURBAL's findings inform policies and interventions to create healthier, more equitable, and more sustainable cities worldwide. SALURBAL is funded by the Wellcome Trust.

The Urban Health Network for Latin America and the Caribbean (**LAC-Urban Health**) seeks to promote regional and multisectoral collaboration in order to generate evidence on the drivers of urban health and health equity and translate this evidence into policies to improve health across cities in Latin America and the Caribbean.



More information about LAC-Urban Health and SALURBAL

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