



# Enhanced Development of the U.S. Rail System: an Economical and Health Benefit to Society

**A Public Health  
Brief for  
Congressman  
Bill Shuster and  
the House  
Transportation  
& Infrastructure  
Committee**



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## Introduction:

We have embarked on the 13<sup>th</sup> year of the 21<sup>st</sup> century with the United States not yet in a position to develop or offer plans on developing an effective national rail system. In this professional brief, the reader will be exposed to the global, health, and economic challenges we have before us as they relate to the strategic importance of a national rail system. Clearly, the media as well as the general public are in need of more information on the subject which had not been readily or widely available to the public. What is available, is often embedded in negative political discourse and presented from a “cost” perspective, only, rather than a more comprehensive “economical and health” perspective.

The Center for Health Promotion and Disease (CHPDP) Prevention at the Windber Research Institute, Windber, PA, serves as a unique resource for educators, health care providers, politicians and the public. Located in southwestern Pennsylvania, the professional staff at CHPDP work diligently to enhance health and wellness of individuals, hospitals, businesses and communities and identify the means to prevent cancer and cardiovascular disease through life style changes and genomic intervention. As a physician and public health researcher, I have the privilege of leading a team working towards finding solutions to improve the health of the individual and community. Nationally and internationally, we work to enhance the safety and well-being of children and their families with the development and evaluation of clinical and school-based health promotion and disease prevention interventions (please see the appendix for a complete list of references).

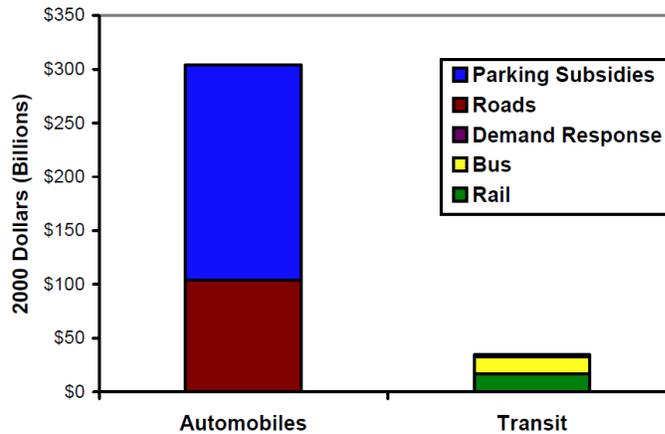
## Rail Use and Fuel Consumption:

It is estimated that freight tonnage in the U.S. railroad system will increase significantly over the next two decades. In the Cambridge Systematics study, an estimated increase of 88% through 2035 was identified.<sup>1</sup> Inversely, the cost of providing railroad service, when measuring per ton mileage costs, has decreased over a five year period from 3.04 cents to 2.26 cents. Though there has been a flattening over the past several years in passenger rail travel due to the economy and possibly other related societal events over the 10 year period from 1997-2007, the commuter rail ridership increased by 28% or 100 million riders. Nonetheless, long term trends and analyses indicate that national and intercity passenger rail travel will continue to grow.<sup>2</sup>



The increase in rail use is noteworthy. As an energy efficient system, today's passenger rail system consumes 30% less energy than automobiles.<sup>3</sup> Furthermore, several independent studies have commented on the enhanced fuel efficiency of railroads as compared to waterborne and truck commerce.<sup>1-2,4</sup> Rail use proves to be upwards of five times more efficient than trucks. When rail versus truck fuel savings are compared from the perspective of gallons of fuel consumed to miles traveled, rail wins out decisively. When gallons of gas consumed are compared against the route distance at less than 300 miles, 300-500 miles, 500-1000 miles, and 1000-2000 miles, truck consumption is approximately two times higher than that of the rail.<sup>2</sup> When comparing distances over 2,000 miles, there is a three-fold difference in truck versus rail gas consumption. It takes 58 large semi-trucks to move the equivalent of what 15 jumbo hopper cars can move, with the rail performing this task in less time, more safely, more efficiently and in a more environmentally friendly manner.<sup>1</sup>

**Transportation Expenditures** (Litman 2009; BTS 2003, Table 3-29a)



Based on Litman's (2012) analysis, 19% of the total government expenditure is used to subsidize transit, primarily supporting roads and parking facilities. Rail transit comprises a small portion of this expense, yet will be means to enhanced global competition.<sup>5</sup>

## Health and Family Finances:

Efficient public transportation is essential to a healthy family unit. The development of a proficient public transportation system will enhance health at the population level by reducing injuries and death, pollution emissions, increasing physical fitness, and improving basic access to medical care and healthy food. The U.S. has the highest per capita traffic fatality rates among a dozen other developed countries;<sup>6</sup> this is despite millions of dollars spent on safety programs, new roads and safer vehicles. There are 36% fewer per capita traffic fatalities when large rail cities are compared to bus only cities and 21% lower per capita motor vehicle mileage use. Clearly, too many cars and trucks traveling on too few roads compromise our health. A 2007

report by Bech<sup>6</sup> demonstrates that public transit has one-twentieth the passenger fatality rate as auto travel. The Victoria report<sup>4</sup> compares the traffic fatality of the Bronx, a more transit-oriented community as compared to areas with a more sprawling approach to community development. For the Bronx, the traffic fatality rate was approximately 4/100,000 people as compared to Miami, Kansas where the rate was almost 40/100,000 people. With over 40,000 people killed, annually, on U.S. roads in traffic fatalities, the American lifespan is reduced by 0.4 years (5%). This accounts for an estimated 1,186,030 years of potential life lost in the U.S. in 2006.<sup>6</sup>

The total estimated economic cost of deaths, injuries, and property damages due to motor vehicle accidents in 2009, alone, was \$1,366,300.<sup>7</sup> This number does not express the monetary, physical, and emotional toll taken on individuals involved in the auto accidents, nor does this include the amount of money lost due to the significant time spent sitting in traffic. On an annual basis, drivers traveling the ten worst U.S. highways and traffic corridors spend an average of 140 hours or about a month of work sitting in their car, on congested roadways.<sup>8</sup> If these drivers earned a minimum wage salary, then the total amount lost would be equal to \$1,015. A reliable and efficient public transportation system would decrease the number of vehicles on the road, in turn, decreasing the number of injuries and deaths, the economic and individual monetary damages, wasted work hours, and the use of our much needed disposable income. Such advancements would result in greater overall health of the public.

In respect to physical well-being, having a public transportation system in place, particularly a rail system, will encourage an increase in the amount of physical activity among the public. People are more likely to walk to a nearby rail station than drive and pay for parking, thus, increasing their daily physical activity. Average medical expenditures are approximately 30% lower for those who are physically active than for those who lead sedentary lives. In plans to develop a light rail transit system (LRT), Charlotte, NC, has projected a health cost savings of \$12 million over nine years when accounting for growing use of the rail system, increased physical activity, and associated subsequent declining obesity rates associated with increased use of a public rail system. LRT users are 81% less likely to become obese over time.<sup>4</sup> If one is always near a rail station with a bike, established walking paths and increased commerce, the studies show that there will be fewer cars on the road, thus, less driving and more walking.

The presence of rail associated walking paths will promote an increase in commerce in the forms of shops and businesses opening along the walking paths to take advantage of the increasing foot traffic. Individuals who commute by train average 30% more walking time and are four times more likely to achieve the 10,000 daily steps



recommended for fitness and health when compared to commuters of car-oriented communities.<sup>9</sup> North Americans walk an average of six minutes daily or 530 steps. Meanwhile, public transit users spend an average of 19 minutes walking, or 2,000 steps.<sup>9</sup> Multiple studies have demonstrated the inverse relationship between obesity rates and the use of alternative modes of transportation (walking, cycling and public transportation).<sup>9-11</sup> In this category, the U.S. is last in positive benefit when compared to Latvia, Switzerland, Netherlands, Spain, Sweden, Germany, Finland, Denmark, Norway, United Kingdom, France, Ireland, Canada and Australia.

Over the past decade, research has allowed us to have a better understanding of the deleterious health effects of motor vehicles and trucks in their relationship to injuries, death, heart and lung disease, cancer and lack of exercise. Injury to brain cells and our chromosomes due to exhaust fumes are affecting the learning of our young and memory of our adults. From various health and environmental resources, the Wall Street Journal<sup>12</sup> recently commented on the damaging effects of traffic fumes, smoke and exhaust to the human brain. In Los Angeles, the most congested city in the U.S., high levels of traffic fumes extend up to 1.5 miles beyond the highway. In other large cities within California, infants living within 1,000 feet of a major road or freeway were twice as likely to have autism. In New York City, children with prenatal exposure to high levels of car exhaust had more symptoms by age five of attention deficit disorders, anxiety, and depression. Though the development of the E-Z pass was never intended as a health benefit, low birth weight in New Jersey dropped 11% in areas around highway toll plazas after the introduction of this money and time saving car tag which helps to reduce the idling of cars.<sup>13</sup>

Over a decade ago, researchers at Columbia University in New York demonstrated a change in a newborn's DNA with prenatal exposure to vehicle exhaust. By five years of age, these children had lower IQ scores compared to those children with less exposure. By age seven, the children were demonstrating symptoms of anxiety, depression, and attention problems.<sup>13</sup> Regarding our senior citizens, Boston University performed a study to demonstrate the harmful effects of vehicle exhaust on adults with results suggesting that constant exposure to emissions caused memory and reasoning problems and increased the risk of Alzheimer's disease.<sup>12</sup>

## International Competition:

Over the next five years, thousands of Chinese workers will be able to move more products faster and further within and out of their country. Many of these products will be sold in the U.S. In the upcoming years China will invest \$300 billion in their national rail system, resulting in more than 16,000 miles of high speed rail tracks. However, it is not only China that has taken up the national



effort of a better rail system. Traveling the 250 miles from Philadelphia to Boston on a high speed Amtrak Acela train takes approximately five hours. Traveling the same distance from Paris to Lyon, France would take two hours. "Every other major industrialized nation has recognized that high speed rail is key to their economic growth and mobility," says Petra Todorovich, Director of the American 2050 Program at the Regional Planning Association. "It's time for America to realize that as well."<sup>14</sup>

## **Personal Perspective:**

As a health care specialist, I continue to be disheartened over the death, injury, and pollution related to motor vehicle travel. Each year, we read about our young teens as victims of motor vehicle accidents. This type of unintentional injury is the fifth leading cause of death among Americans.

From my European travels, I have gained further insight into the challenges Americans face in our quest to travel faster, safer and healthier. While in Europe, I was able to appreciate a growing list of advantages to a rail system. Students, folks seeking recreation, families, business men and women, the elderly, and mothers with children were all able to move from point "A" to point "B" with more efficiency and speed than they would have been able to in the U.S. Whether it was my daily trip to the Italian hospital or dropping my sons off at soccer camp, riding the train often required a walk or bike ride to the train station. While on the train, my family and I talked more, read more, and observed more of our surroundings, appreciating more our daily experiences. We talked with others and learned more about their culture, history and people. In walking from our house to the train, we felt better and slept better each night. The local shops along the paths and walkways en-route to the train also benefited from our daily activity. Bottom line, individuals and families from all walks of life were moving and interacting in a way and on a daily basis that we, U.S. folks, have not yet come to fully appreciate as a nation.

As a public health specialist involved in community-based homeland safety and security issues, other practical reasons for a larger, more efficient rail system have come to light. In the U.S., many of our roads and airports are parking lots of congestion, mirrored in frustration and annoyance. U.S. roads and bridges are deteriorating on a daily basis from the growing number of motor vehicles. If a man-made or natural disaster was to occur, it would be difficult, if not impossible, to move large numbers of citizens out of harm's way. In addition to the challenge of logistics of our transportation system, there is also the cost of transportation to worry about. Now more than ever, there are thousands of Americans who do not have the opportunity, either due to cost, age or family situation to afford a vehicle, not to mention the cost of repairs and gas to maintain the vehicle and the cost of tolls required to travel.

## **Summary/Conclusion:**

In our research, we were impressed by the lack of comprehensive information available to the public on the issues and discussions related to enhancing the U.S. rail system. Most of the information obtained through the media comments on the subject from purely a financial

perspective and very rarely including safety, health, or international relevance. Evidently, we are not moving quickly enough to develop an enhanced level of a safer quicker rail system. Adjusting our current strategy to any new transportation policy should include a larger and more efficient rail system that will improve our overall health and well-being as well as open new and employment and economic opportunities for many thousands of Americans. As we attempt to create jobs, we should look at our national rail systems as a source for providing an opportunity for economic growth and better health. An enhanced national rail service will serve as an important connection between families, communities, and businesses; a social happening many other countries already possess.

Randel O'Toole, a senior fellow with the Cato Institute, argues that an enhanced rail system lacks efficiency and poses a greater expense to our country.<sup>15</sup> However, views such as O'Toole's seem to be in conflict with other official and independent studies such as those of Anthony Perl,<sup>16</sup> a Professor of Urban Studies and Political Science at the Simon Fraser University in Vancouver, British Columbia and William Schroerer, Policy and Research Director for Smart Growth America. Perl and Schroerer both endorse the concept of trying to get some part of an organized and enhanced rail system placed in the U.S. Schroerer presents it in a perspective that the younger population will appreciate and hopefully inspire them to enact change.<sup>16-17</sup> "Refusing high-speed rail is a little like refusing high speed internet," Schroerer says. "You're saying you don't want to be connected to people in a fast and convenient way..."<sup>17</sup>

Regarding recent political interest to fund the repair of highways and bridges, it can be argued that a strategic moratorium should take place on such work and further discussion should occur on developing a more appropriate and efficient rail service in a more defined period of time. To fund repairs on roads and bridges that erode in a short period of time may not be the most practical or cost-effective approach. A larger, more durable and faster rail service may serve as a substitute for a deteriorating road system or, at the very least, allow for longer and safer use of our roads and bridges.<sup>16-17</sup>

It should be expected that our politicians and transportation agencies have the moral and ethical responsibility to make all the information regarding the personal and societal benefits of a rail service available to the public. When evaluating the benefit of expanding our public transportation system or planning and implementing land use reform, all factors and benefits should be considered, including safety and health benefits. Whether it is traffic safety, less pollution, a more physically fit population, better mental health, affordability or just getting from point "A" to point "B" to access essential goods and services, an enhanced rail service will positively impact all of the above. A 2004 Brookings Institute report found that, "motorist and truck congestion delay declines in a city as rail transit mileage expands, but increases as bus mileage expands, apparently, because bus transit attracts fewer motorists, contributes to traffic congestion and has a less positive impact on land use accessibility."<sup>5</sup>

Passenger rail transportation enhances connections and relationships, and it does so in a significantly safer and healthier manner than vehicle-based transportation. Not only will an advanced rail service create a greater number of manufacturing, technological, and general labor jobs, but it will also allow us to compete as the rest of the industrialized world continues to move ahead in developing and enhancing their own high speed rails. Environmentally, a growing rail

system will reduce greenhouse gases and pollution caused by roadway vehicles as well as challenge our auto and truck industries to think and grow in a more environmentally friendly manner. Competition is good. “Green” competition is better. A larger strategically designed rail service will allow multiple and larger segments of our population and those visiting the U.S. to move from our exciting cities to our beautiful coastal beaches and around our magnificent mountains and valleys more frequently and in a safer manner. As a Pennsylvanian, I can think of no better location to strategically evaluate the development of an enhanced rail system, as a model project, than the Commonwealth. Taking into account Pennsylvania’s significant size, geography, many poor roads and bridges, high unemployment rates, distance from tertiary and quaternary medical care, and number of colleges and universities, it seems that “someplace to start”, as endorsed by Professor Perl,<sup>16</sup> may just be our home state of Pennsylvania. At this moment in time, we simply do not have the technological or manufacturing expertise to move forth in further developing our U.S. rail service; thus, an opportunity.

This document was not necessarily developed to serve as a comprehensive public health statement regarding the present state and/or future of our national rail service. It was developed to inform our citizens, local and regional businesses, politicians, academic centers and other interested groups of the benefit of an enhanced rail service. This report will hopefully serve as a resource to better identify the multitude of opportunities associated with a political will to enhance our national rail service. There will be employment opportunities benefitting thousands of Americans, better health for individuals and the community, and an augmentation of our national identity and security.

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# Appendix



**Matt Masiello, MD, MPH**  
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Dr. Masiello presently serves as **Director of the Center for Health Promotion and Disease Prevention**, at the Windber Research Institute (WRI), in Windber, PA. He is also a Pediatrician with additional training in Critical Care Medicine.

In 2004, Dr. Masiello received his Masters of Public Health degree from the George Washington School of Public Health and Health Services. His team of public health professionals develops and implements large population-based public health initiatives. The programs and grants that the Center has been able to identify, develop, and implement, address such issues as childhood obesity, the human rights of children in a war time setting, violence, bullying prevention and injuries in children, combat-related stress in our military, and worksite wellness.

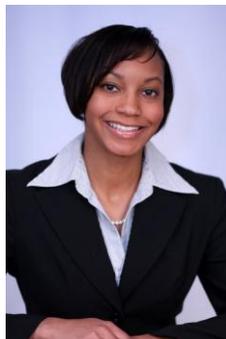
Over the past two decades, Dr. Masiello has had the opportunity to comment on health promotion and disease prevention issues at various national and international forums and through numerous publications and reports. He served on the governance board of the World Health Organization Health Promoting Hospital Network and currently directs the Pennsylvania network of WHO-Health Promoting Hospitals. Academically, he is an adjunct faculty member at Saint Vincent College, Latrobe, PA, with a similar position at Saint Francis University, located in Loretto, PA. Dr. Masiello also serves as a consultant in the development of undergraduate public health curriculums.

His pediatric practice now consists of supporting Somerset Hospital with their pediatric program and serving as Chief Wellness Officer at Somerset Hospital and Medical Director of the University of Pittsburgh Johnstown Health Clinic.

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Charvonne Holliday, MPH assisted with the development of this document.

## Recent Publications from WRI:

### Journal articles submitted

Schroeder, B., Barto, S., Messina, A., Schroeder, D., Good, K., Masiello, M. The Implementation of a High School Bullying Prevention Program and Its Effectiveness. Submitted for publication Nov 2011. (Journal of School Health)

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- PSEA Summer Leadership Institute, Gettysburg College, Gettysburg, PA, July 2009
- Prevention, Health & Wellness Expo, Pasquerilla Conference Center, Johnstown, PA, May 2009
- 17<sup>th</sup> International Conference on Health Promoting Hospitals & Health Services, Crete, Greece, May 6-9, 2009
- (Barto, S., & Good, K.) Institute on Family & Neighborhood Life Symposium, Clemson University, March 2009.
- Evidence Based Health Promotion Programs - WHO Winter School, Windber Research Institute, February 2009
- (Saylor, J.) Society for Public Health Education, 2009 Annual Meeting
- (Barto, S., Messina, A.) National Association of Health Education Centers Joint Conference, Harrisburg, June 2009
- (Schroeder, D.) Blueprints for Violence Prevention Annual Conference, San Antonio, April, 2010
- (Barto, S.) American Federation of Teachers, School Health- Education and Leadership Conference, Washington, DC, May 2010.

Barto, S. Bullying Prevention Successes at the School Level. International Bullying Prevention Association Annual Conference, Pittsburgh, PA, December 2009\_

Masiello, M.G. Health Reform- The Role of a Health Promoting Hospital. Memorial Medical Center-Grand Rounds, Johnstown, PA, October, 2008

Masiello, M.G. Implementation of the Standards and Practices of the World Health Organization Health Promoting Hospital & Health Services Network. Pennsylvania Public Health Association Annual Meeting, Philadelphia, PA, October, 2008

Masiello, M.G. A Health Promoting Hospital: A Strategy in the Re-design of the U.S. Health Care System, Pennsylvania Public Health Association, Philadelphia, PA. October, 2008

Masiello, M.G. Obesity & Diabetes. University of Pittsburgh, Johnstown, May 6, 2008  
Health Literacy and the Health Care System, Pennsylvania State PAACE Conference, State College, PA, February 2008



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