

# CHESAPEAKE PSR

## PHYSICIANS FOR SOCIAL RESPONSIBILITY

### Testimony on HB 114 – *Maryland Transit Administration-Funding (Transit Safety and Investment Act)* Appropriations

February 3, 2021

**Position: Favorable**

The Chesapeake Physicians for Social Responsibility (CPSR) SUPPORTS HB114. CPSR works to amplify the health science voice and energize medical and health professionals and health advocates to take action on issues the two major public health crises we face nationally and globally: Climate Crisis and growing threat of Nuclear War. We also address health consequences of toxics in the environment and look for solutions through a social justice prism.

In July 2019, pursuant to §7–309 of the Code of Maryland, the Maryland Transit Administration (MTA) released its first ever Capital Needs Inventory (CNI) to assess the MTA’s ongoing, unconstrained capital needs. The CNI identified \$5.7 billion of capital needs over the next ten years, \$1.5 billion of which is an accumulated backlog of deferred maintenance. The Maryland Department of Transportation’s FY 2020–2025 Consolidated Transportation Program (CTP) does not provide the MTA enough over the next six years to address the annual maintenance and repairs in the CNI. In fact, it will add to the backlog.

The result of the neglected maintenance is buses, light rail vehicles, subway trains and commuter trains that break down more frequently than the MTA’s peer agencies, resulting in poor service and a drop in ridership.

[Transportation is one of the social determinants of health. Regular users of public transportation](#) are more likely to be black, Hispanic, immigrant and under 50. Public transportation allows people access to jobs, schools, healthy food sources, and healthcare facilities. In 2017, 5.8 million Americans [delayed medical care](#) because of problems with access to transportation which disproportionately affected Hispanic people, those living below the poverty level, Medicaid recipients and people with disabilities.

As physicians, we are deeply concerned about the negative health consequences of reduced MTA usage. Specifically, the widespread use of public transportation reduces vehicle emissions, which are known to impair lung function and exacerbate a variety of pulmonary diseases we encounter in our patients. Children in particular are most vulnerable to their effects. Furthermore, the use of public transportation generally necessitates more physical activity than driving. Even a few short walks to and from a bus stop or metro station are integral to mitigating the risk of cardiovascular disease and diabetes, which are among the most commonly encountered diseases in our practices and extremely costly to our economy. Medical studies

have provided evidence that public transit use is associated with increased levels of physical activity, less obesity and other [improved health outcomes](#). There are likely cost benefits. [Public transit improvements](#) are associated with large impacts in safety, pollution reduction, fitness, and basic access to services.

We strongly feel that safe and reliable public transportation is a critical part of the ensuring health of Marylanders, and that passage of the Transit Safety & Investment Act is a substantive step in reaching our shared goal.

We encourage a favorable report for HB 114.

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