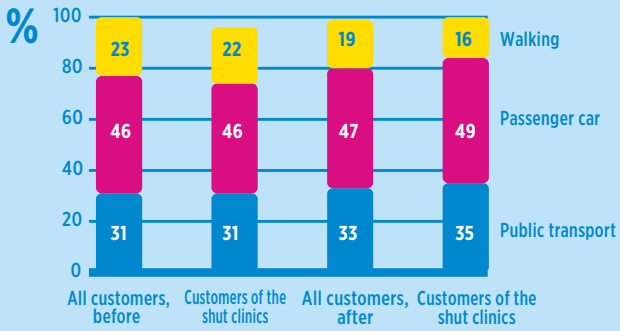
HSL HRT

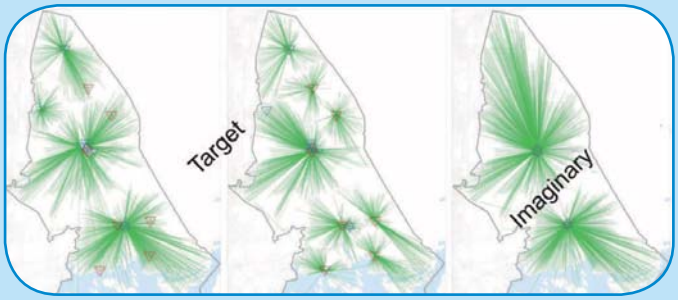
Relocating Public Services and its Effects on Sustainable Mobility

In Finland municipalities are responsible for providing local services to residents. In recent years the trend has been in centralizing services, which has often been done at the expense of local services and based on other motives than mobility. The aim of this project was to study the effects of reorganizations from the point of mobility and to provide information for the basis of planners and decision makers.

The case studies were from three municipalities in the Helsinki Region and included network of maternity clinics, a network of physical therapy services and school network.

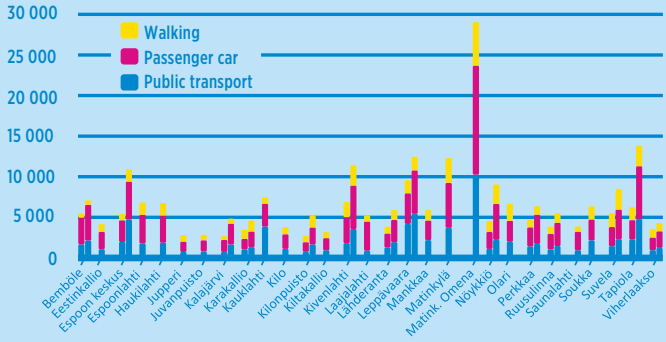


The maternity clinic network was reduced from 27 to 16 clinics but will continue to be quite dense. The clinics are located in places that are well accessible by sustainable transport modes.

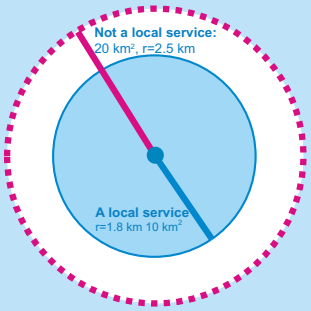


The case of school network included a target network of shutting down one school and opening two new schools, and an imaginary network of extreme centralization to 2 schools. The yearly transport costs of the extreme centralization case were 1.2 million higher than of the target network.

Trips of the maternity clinic customers before and after network reduction



Simulations proved very useful. Traffic analyses can help also in planning the service and its supply: the simulation model forecasted a triple demand to one maternity clinic



A service can be called local, if the area it serves is 5–10 km^2 (1.8 km radius). Increasing the service area of one office by a km^2 reduces the modal split of walking by one percentage point and increases the socio-economical costs by 0.1€/trip

65% of both maternity clinic and physical therapy customers made another trip on the way to or from the service. The negative effects of centralizing can be minimized by locating services to places with other services and good public transport connections.