

**LONDON ROAD SAFETY COUNCIL
PRESIDENT'S CHALLENGE STATEMENT – JUNE 2020**

Road safety challenges for London in a changing society

Between 2015-2018 the number of vulnerable^[1] road users killed or seriously injured has nearly doubled in London from 2092 to 4065 (data provided by TfL, 2020). Since 2015 (to June 2019) 14,431 road users have been killed or seriously injured in London and 80% of these were vulnerable road users. This situation is unacceptable and is likely to get worse because there are a number of societal trends that may adversely affect the safety of road users.

Population growth is a driver of increase in traffic and this is particularly true in London where population is set to reach 9.3 million in 2021. With this growth, there will be more people travelling, more vehicles and more demand for goods and services.

Research from UCL (forthcoming report to RoadSafe <http://www.roadsafe.com/>) will show that, nationally, a significant number of pedestrians are killed or seriously injured by people driving for work. Walk through London during peak hours and nearly every other vehicle is clearly used for work and nationally vans have seen the largest percentage increase in new vehicle licences^[2].

Companies that develop ride-hailing apps may have reduced the cost of 'taxi' services but have introduced more vehicles into London. Increasing e-commerce means that vulnerable road users will need to navigate traffic where drivers and riders are delivering goods under pressure for companies that seem to show a high interest in profit and a low interest in safety. Consumers seem unaware of the poor conditions of workers in the gig economy. The workers themselves are rarely trained in safe working practices^[3]. There is also the growth of the night-time economy especially in London and the associated traffic which creates excess risk to pedestrians.

There are also rising levels of poverty. The Black Report in 1980^[4] identified the strong gradient between poverty and risk of being a road casualty relationship for child pedestrians, research shows this relationship persists today^[5].

Over the past 10 years austerity measures have been marked by public spending cuts which have seen road safety teams and youth services diminish or disappear and in some areas the decommissioning of speed cameras to 'stop the war on the motorist'.

In parallel to these social, economic and political changes, there is a public health crisis with rising levels of obesity and lower levels of mental wellbeing. The hostile nature of traffic reduces social connectedness and deters walking and cycling^[6].

^[1] People who walk, cycle or ride powered two wheelers

^[2] https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/800502/vehicle-licensing-statistics-2018.pdf

^[3] Christie, N., & Ward, H. (2019). The health and safety risks for people who drive for work in the gig economy. *Journal of Transport and Health*. doi:10.1016/j.jth.2019.02.007

^[4] *Inequalities in Health: Report of a Research Working Group*. Department of Health and Social Security, London, 1980.

^[5] O'Toole, S., & Christie, N. (2018). Deprivation and road traffic injury comparisons for 4–10 and 11–15 year-olds. *Journal of Transport & Health*. doi:10.1016/j.jth.2018.08.003

^[6] Ancaes, P., Jones, Peter, Mindell, J (2015). Community Severance: Where Is It Found and at What Cost? *Transport Reviews*, Volume 36, 2016 - Issue 3, Pages 293-317.

So, what does this mean for road safety in London? The risks associated with the way people drive or ride for work need to be addressed at company board level as all the evidence shows that safety culture starts with leadership^[7]. We need to work with these companies to see how they can produce safer working practices.

The infrastructure does not support the needs for vulnerable road users in an equitable way. People who cycle in London are largely white, male and middle class and at times 'fast and furious'. We need to ask the question what infrastructure would encourage more people from ethnic minorities, women, children and older people to cycle?

TfL is arguably world leading in addressing some of these challenges in the programme for healthy streets. These healthy streets interventions can address road danger and deliver a sense of place and opportunities for healthy behaviours. Such interventions need to be targeted in the most deprived areas where the burden of hostile traffic is the greatest in terms of road casualties.

Most importantly, we need to make the business case for investing in road safety to show that by addressing danger posed by traffic we can meet other governmental objectives such as reducing air pollution or increasing active travel and wellbeing. All the research shows that multi-agency partnerships, especially between public health, place and transport teams are key to delivering this. But there needs to be dedicated resources. There is also a greater move to start developing interventions by engaging with the community 'bottom up' but arguably a dearth of evidence on how to do it well. London is well placed to start addressing some of these challenges and has an excellent forum to share good practice via the London Road Safety Council. We need to be proactive, argue the case for safety and generate a safer London for all; there is no room for complacency.

Finally, the COVID-19 crisis and subsequent lockdown has provided a glimpse of a London with little traffic and people walking and cycling for their permitted exercise and to access food. Potentially, more homeworking, more home deliveries, more use of the urban environment for exercise, more fear of travelling in crowded public transport may lead to changes in the way people travel. This situation will have implications for safety, we don't yet know what these are but we need to be prepared for a changing world because it is unlikely that it will be 'business as usual'.

On the 6th May 2020 The Mayor of London announced fast track transformation of London's roads including new cycle lanes and routes and wider pavements to enable social distancing. This will create new walking and cycling routes along major corridors. The 'streetspace plan' is being implemented to support an expected 10 fold increase in cycling and five-fold increase in walking post COVID19 lockdown^[8]. Whilst more cyclists may mean greater safety – the safety in numbers effect - It is possible that more cyclists may increase cycle2vehicle, cycle2cycle and, with the increase in people walking, cycle2pedestrian conflicts. This changing nature of urban mobility means that safety will be more important than ever. However, road safety staff are being diverted to support the extra demands for other services to support communities during the crisis. Cycle training has all but ceased and more work is needed to enable it to restart in a way that meets social distancing and protects health. Cycle training cannot be delivered online, it needs to be practical and progressive^[9]. When many public health practitioners in local authorities are focusing on the virus, road safety officers should be seen as a central public health asset supporting safe active travel and its benefits for the health and recovery of individuals, communities, wider society and the planet.

^[7] Helman, S., Christie, N., Ward, H., Grayson, G., Delmonte, E., & Hutchins, R. (2014). A strategic review of the management of occupational road risk. Retrieved from <http://www.rospace.com/drivertraining/morr/info/morr-strategic-review.pdf>

^[8] <https://www.london.gov.uk/press-releases/mayoral/mayors-bold-plan-will-overhaul-capitals-streets>.

^[9] <https://trl.co.uk/sites/default/files/TRL214.pdf>