

	Transport Research Institute	То:	Transport & Health Policy Makers, & Practitioners
			Prof Adrian Davis, TRI, Edinburgh Napier University
		Date:	9 th December 2022
Part of Edinburgh Napier University		Subject:	Essential Evidence 4 Scotland No.61 Prioritising the health of
			our children by reducing road traffic deaths

Top Line: Prioritise our health by making roads safer. We can't afford not to if we want to look after our planet and the coming generations.

In an article addressing child road traffic injuries an orthopaedic surgeon highlights the issue of road traffic collisions and the direction of UK transport policy. She noted that in 2021, 27,450 people were killed or seriously injured on Britain's roads. If these deaths or serious injury from road traffic crashes were a cancer, they'd represent the fifth leading new cancer diagnosis in the UK—with only prostate, lung, breast, and bowel cancer higher. This is a public health matter, and health inequalities play a big part. Children in the most deprived 20% of areas are six times more likely to be injured than those in the least deprived 20%, and 16 children are killed or seriously injured in road crashes every week on their way to or from school.

The author notes that we know how to prevent such deaths and serious injuries: a combination of environmental and driver behavioural changes. Some real examples show what's possible. In Edinburgh a change to 20 mph limits has reduced road traffic casualties by 40%. Oslo and Helsinki have eliminated pedestrian deaths with Vision Zero—an initiative including car-free zones around schools. And all types of fatal collisions fell by 49% when San Francisco introduced segregated cycle lanes. The author says:

"we should stop seeing the world through our windscreens. The government's economic analysis of its £27bn (€31.3bn; \$32.4bn) funding for major road traffic schemes focuses on a hypothetical reduction in traffic delays, without acknowledging the increased road travel and resulting incidents created by expensive, new, widened roads."

Children make up 21% of the UK population. Only 76% of mothers with dependent children are in employment, compared with 92% of fathers. In a cost of living crisis, running a car is one of the biggest household expenses. But if children can cycle, walk, or scoot to school safely, the household may need only one car (or not at all -Ed). Furthermore, walking or cycling has clear benefits for health by reducing sedentary lifestyles, as well as for the environment. The result of past and current transport policy means that there is a vicious cycle where 34% of children are driven to school, 62% of UK adults say that it's too dangerous to cycle, and 59% of car journeys are under five miles. Only 5% of walking journeys are over two miles, so a modal shift from cars requires better infrastructure for cyclists and pedestrians, with better public transport. Electric cycles allow older people and people with disabilities to cycle more easily, especially on hills and for longer distances.

In parallel, a new Systematic Review poses the question 'which transport policies increase physical activity of the whole society?'. The authors' findings include that friendly infrastructure and urban design is a policy action assigned among others to safer urban and street design, safer parking provision and design, traffic calming, reduced motor traffic volume, limiting parking spaces and improving changing facilities for those who walk and cycle. All of these were associated with a significant-positive effect on physical activity. Regarding children, the Review found that policies promoting active transport to school as part of a multi-component approach can have a positive effect. This is supported by a strong evidence base.³

¹ McNally, S. 222 Prioritising the health of our children by reducing road traffic deaths, *British Medical Journal*, 379:o2862 https://doi.org/10.1136/bmj.o2862

² Zukowska, J. et al, 2022 Which transport policies increase physical activity of the whole society? A systematic review. Journal of Transport & Health, 101488 https://doi.org/10.1016/j.jth.2022.101488

³ E.g. No 186 Active Travel & Physical Activity. Evidence Review. - Travelwest