

So-Mo meeting on Pedestrian Safety: 16th March 2018.

Response by Liverpool Pedestrians Association

Concerns about the remit: should not exclude children and infrastructure

The project commission excludes child pedestrians and it excludes changes in infrastructure such as reduced speed limits, better crossings, and pedestrian-only areas. We feel that these are mistakes, and MRSP and Liverpool Council should reconsider. If there are good reasons for these exclusions, MRSP and Liverpool Council should say what they are.

Nature of the commission: should be done to proper scientific standards

So-Mo state that this is not a research commission, just insight work. This does not make sense to us. New data and evidence is being sought, so this *is* research, and it should be carried out to proper scientific standards.

Use of STATS19 recorded contributory factors: should not be relied on

The STATS19 form for road collisions asks for the opinion of the attending police officer as to contributory factors. The form does not include many possible contributory factors such as “speed limit too high”, or “no safe crossing”, and so it should not be treated as reliable as to the cause of the collisions.

Interventions: should be driver behaviour and infrastructure

From our experiences of different cities in the UK and across Europe, the problem in Liverpool is not the behaviour of the pedestrians, but the poor attitude of drivers towards pedestrians and the poor infrastructure. We agree that all possible interventions should be considered, but it needs to be remembered that walking is a safe activity - it is the introduction of motor vehicles travelling at lethal speeds in close proximity to pedestrians that is the cause of pedestrian injuries.

Driver education: should be to comply with the law

We would like the following messages to be emphasized to drivers

- Any speed in excess of the speed limit is an offence
- Parking on pavements is an offence except where signs permit it
- When pedestrians have started to cross a side-road, drivers must give way.
- Pedestrians form 39% of fatal injuries in Merseyside and are the largest group

Explanatory notes are overleaf.

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Explanatory notes

Concerns about the remit: should not exclude children and infrastructure

There are some really important things about children that absolutely require we get vision zero overall to protect children. They do not have the cognitive skills to judge speed and distance accurately and this means that we must make sure that the road environment is shaped by that knowledge and reject the historic emphasis on green cross codes/road safety training in the absence of real interventions to reduce road traffic danger. Lower socio-economic groups get the bigger hit so we kill poor kids more than rich kids and this is very relevant indeed to Liverpool. Child pedestrian deaths and serious injuries are going up; children and parents are scared of traffic danger so do not walk or cycle which leads to one of the highest rates of child obesity in Europe. There are other factors but increasing physical activity is a key focus of World Health Organisation efforts to improve child health. All this is very well known so we cannot understand why children are excluded. There is a good analysis in the book "One false move and you're dead" by Hillman, Adams and Whitelegg (1992):

[<https://mayerhillman.files.wordpress.com/2014/10/one-false-move.pdf>](https://mayerhillman.files.wordpress.com/2014/10/one-false-move.pdf)

Public Health issues Liverpool has a very bad health record so wider public health measures that deal with road safety and physical activity should be a top priority:

[<http://fingertipsreports.phe.org.uk/health-profiles/2017/e08000012.pdf>](http://fingertipsreports.phe.org.uk/health-profiles/2017/e08000012.pdf) The health of people in Liverpool is generally worse than the England average. Liverpool is one of the 20% most deprived districts/unitary authorities in England and about 33% (26,000) of children live in low income families. Life expectancy for both men and women is lower than the England average" If you look at the graphic showing Liverpool's health outcomes compared with England as a whole on 30 indicators you will see about 19 red blobs and a red blob means that this area is significantly worse than England for that indicator. Indicator 25 is KSI (all ages) and is a red blob. Indicator 2, children in low income families, is a red blob, suggesting that that child KSIs are worse than the England average.

The Turning the Corner campaign is led by Chris Boardman and is a campaign to make junctions safer for pedestrians and cyclists:

1.

[<https://takeaction.britishcycling.org.uk/have-your-say-governments-cycle-safety-review>](https://takeaction.britishcycling.org.uk/have-your-say-governments-cycle-safety-review)

2.

[<http://road.cc/content/news/215115-changes-highway-code-could-cut-journey-times-cyclists-says-british-cycling>](http://road.cc/content/news/215115-changes-highway-code-could-cut-journey-times-cyclists-says-british-cycling)

3.

[<https://www.britishcycling.org.uk/campaigning/article/20161220-campaigning-Turning-the-Corner-author-explains-campaigns-aims-0>](https://www.britishcycling.org.uk/campaigning/article/20161220-campaigning-Turning-the-Corner-author-explains-campaigns-aims-0)

Nature of the commission: should be done to proper scientific standards

The way in which the "insights" were arrived at is not clear, and so their reliability is in doubt. Some appear to be little more than anecdotes from unstructured observations.

Use of STATS19 recorded contributory factors: should not be relied on

The STATS19 form for road collisions collects information on 3 pages, and on the

fourth page it asks for the opinion of the attending police officer as to contributory factors. A vital point is that the options given do not include many possible contributory factors such as “speed limit too high”, “no crossing”, “wrong crossing timing”, “crossing located in the wrong place” etc. Any summaries of contributory factors should point out that vehicle speed is a contributory factor in 100% of pedestrian injuries, and that STATS19 recorded information on contributory factors is incomplete.

Interventions: should be driver behaviour and infrastructure

Other Cities – experience from individuals:

London- Islington has a lot of 20MPH side roads and their positive effects are well documented. I also know Green Lanes as it runs through Hackney & Haringey, which makes for one of the longest traffic jams in London. Plus there are many improvements to the area around Kings Cross following the Bikes Alive protests of 2012:

[<https://www.theguardian.com/uk/gallery/2012/jan/10/bikes-alive-protest-kings-cross>](https://www.theguardian.com/uk/gallery/2012/jan/10/bikes-alive-protest-kings-cross)

Having moved to Liverpool in 2013, it was a total shock to experience just how many dangers face pedestrians in the city centre: we do need to follow the example of what has happened in Oslo which was in part achieved by sit downs at road crossings in the 1970s and a lot of campaigning for better bike routes. Oslo does have the major advantage of a good tram system, which is something that should be re-introduced in Liverpool, though this scheme was scuppered some years ago:

[<https://www.theguardian.com/uk/2005/jun/14/politics.communities>](https://www.theguardian.com/uk/2005/jun/14/politics.communities)

People have walked safely for thousands of years, and have evolved in an environment that is safe for walking. Walking on roads is a safe activity unless vehicles are permitted to travel at dangerous speeds. This is the reason for apportioning different responsibilities to the different road users. When people talk about “dangerous pedestrian behaviour”, what they mean is safe pedestrian behaviour made dangerous by poor infrastructure, wrong speed limit or dangerous driver behaviour.

We should consider all effective options, but a review by Road Safety Analysis [1] did not find any behaviour change interventions to be effective other than basic education, and warned that some programmes might actually be harmful. If we have a poster campaign highlighting the danger of walking with a mobile phone, this might benefit some pedestrians who see the campaign and remember to change their behaviour, but it might make the danger to pedestrians worse by changing driver behaviour - suggesting that they do not need to slow down near a pedestrian using a mobile phone, since if the pedestrian is hit, “it will be the pedestrian’s fault”.

Further points

Not to present conclusive answers: though these could be a secondary outcome endpoint.

Understanding is being sought in various areas:

When: What is the traffic mix and density at these times? What are the actual speeds (not just speed limit) and driver behaviours?

Where: Have speeds been recorded as average and range? Are actual speeds appropriate or excessive for the conditions?

How: Location of contact (road, pavement, other)? Is speed known at moment of impacts?

Who: if alcohol is to be considered there is a need for blood levels, breath test, or at least a history of amounts consumed. Is blood alcohol level known in fatalities; if so, what

values were found? An inverted road user hierarchy has a role, given that pedestrians rarely kill car occupants on impact, though the converse is not unusual.

Invalid Excuses ('I did not see the pedestrian'): So-mo cites' inattentional blindness' as a reason for drivers not seeing pedestrians. Inattentional blindness occurs when people passively watch an event without being instructed what to look for. Drivers, on the other hand, should know what they are looking for and should focus their attention on the road and the presence of other road users including pedestrians. A major reason why drivers fail 'to see' pedestrians is because they are distracted by GPS, mobile phones etc and are not able to pay attention to the road. So, "Sorry Mate I Didn't See You" should never be an acceptable excuse for a collision.

Legal framework: what protections exist for vulnerable users in law and in the courts (e.g. strict presumed liability) ? How does this differ from other areas of Europe? What is the status and ordering of our actual and perceived road user hierarchy?

The Safe System: Einstein exhorts us to do what we know works: Vision Zero, adopted by LCC and many others, embraces 20mph, car-free streets, road width reduction, railing removals, all-red traffic light phasing. Within a Safe System, whether sober, drunk, drugged, texting or unobservant, a pedestrian's behavioural aberration should not result in death from impact with a vehicle.

Statements:

Arterial routes / dual carriageways: Are mean and actual speeds available for these roads?

Pedestrian crossings where waiting times are high encourage dangerous crossing manoeuvres and data apparently confirm higher risks on such roads. Might reducing to single carriageway, narrowed, 20mph corridors improve eye contact and safety?

Night time economy: What percentage of vehicles are taxis (14% of pedestrian collisions)? Public transport enhancement of bus and rail services, throughout the night and at fair and reduced cost, could be considered to reduce the size of the higher-risk taxi cohort in Liverpool. Could taxi fares be allowed to rise to cover this change?

Hanover street is a high risk area but could be calmed by closing the mid section at Bold Street / Church Street and installing turn-around areas either side of the closed section; these could incorporate taxi stands.

Where lies the duty of care? 'Victim Blaming' is when the victim of a crime or wrongful act is held entirely or partially at fault for the harms that befall them [Wikipedia]. Alcohol sales are profitable and encouraged, yet alcohol impairs judgement and increases risk; so must the duty of care for known, drunken pedestrians then pass to others, such as the pub landlord, the town planner, the police, or the vigilance of vehicle drivers? Asking the drunken pedestrian to exercise caution through sharply focused awareness is unlikely to prove fruitful. Perhaps real commitment would see removal of alcohol sales from the City centre.

Mobile Phone Use: Given the extensive and habituated use of these devices, it seems unlikely that this aspect of pedestrian behaviour could be significantly changed; to lower risk would seem to require changes in the 'texting environment'.

References

[1] *Seizing the opportunities: safer road users* (2017)

<http://www.pacts.org.uk/wp-content/uploads/sites/2/Safer-Road-Users.pdf>