



Review into TfL's role in promoting better health in London

London Assembly Health Committee

30 September 2016

Living Streets

We want to create a walking nation, free from congested roads and pollution, reducing the risk of preventable illness and social isolation and making walking the natural choice. We believe that a walking nation means progress for everyone.

For more than 85 years we've been a beacon for walking. In our early days our campaigning led to the UK's first zebra crossings and speed limits. Now our campaigns change minds and ensure that every one of us is able to exercise our right to walk and the freedoms and possibilities it brings.

Our local projects deliver real change to overcome barriers to walking and our ground breaking initiatives such as the world's biggest Walk to School campaign encourage millions of people to walk.

This is a joint submission on behalf of national charity Living Streets and the London Living Streets Group. We welcome the London Assembly Health Committee's investigation into Transport for London's (TfL) role in promoting better health in London and would be happy to give evidence in front of the committee.

Introduction

The most significant role transport plays in the health of Londoners is enabling physical activity, particularly from active travel. TfL can help more people choose healthier travel options by ambitiously pursuing policies to increase walking and cycling and reduce private car travel.

In 2014 we welcomed the publication of TfL's first Transport Action Plan to improve the health of Londoners. Disappointingly however, progress on the report's recommendations have been slow and we do not feel health is being taken seriously by the highest levels of the organisation, with activities in this area appearing small scale and relatively low profile.

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Strong Mayoral leadership is needed to prioritise transport policy in London to improve the quality of life and health of people living, working and visiting the Capital. Prioritising a modal shift towards transport behaviours with the greatest health benefits will require measures to reduce demand and need to travel by motorised vehicles, in tandem with measures that will increase the uptake in walking, cycling and public transport.

To prioritise active travel within TfL, The Mayor's Transport Strategy should set ambitious growth targets for walking and cycling, including targets to increase the proportion of children walking and cycling to school, with increased funding and resources proportionate to those target levels.

Key questions

1. What are the main ways in which transport impacts on health in London?

London's road network and transport system as a whole plays an integral role in the health of every person in London. There is potential for much greater positive effects to improve health and reduce health inequalities.

Motorised traffic use impacts on the health of all Londoners through: traffic injuries and deaths, noise, severance, air pollution and climate changeⁱ.

However, the most significant role transport plays in the health of Londoners is enabling **physical activity**, particularly from active travel.

4 in 10 adults and 7 in 10 children in London are not active enough. It is estimated that increasing the physical activity levels of adult Londoners to meet the minimum of 150 minutes per week could deliver a 20% reduction in all deaths every year, which is 8,200 fewer deathsⁱⁱ.

Walking has a number of acknowledged health benefits including improved mental health, a reduced risk of premature death, and prevention of non-communicable diseases and conditions such as coronary heart disease, stroke, type 2 diabetes, depression, dementia, and cancer.

Walking is particularly important to help Londoners get enough physical activity because:

- It is the most likely activity for people to do consistently throughout their livesⁱⁱⁱ.
- It is the easiest way for most people to stay active every day.^{iv}
- It is a universal activity in London - there is very little difference by gender, household income, ethnicity or employment status.^v
- There is potential for it to grow - 36% of car trips in London could be walked in under 25 minutes^{vi}

Air pollution from motor vehicles has a detrimental impact on Londoners' health and quality

of life. The most significant cause of London's air pollution is its road traffic. NO₂ concentrations throughout central London remain above the legal limit of 40 µg/m³.

The Mayor has a number of policies in place to combat air pollution. Of these, the London Assembly's Environment Committee has concluded that the 'major mayoral success has been in traffic reduction'.^{vii}

A holistic approach to London's road traffic pressures should seek to reduce the volume of vehicles on the network in order to tackle the major source of air pollution, whilst promoting healthy and efficient ways for Londoners to get around.

The evidence for increasing active travel and reducing air pollution is set out in 'Improving the health of Londoners: transport health action plan', published by TfL in 2014^{viii}. Other major impacts on health - road danger, noise, access and severance - are associated with the use of motorised road transport and the quality of the public realm, hence a joined-up suite of policies and associated actions using TfL's Healthy Streets approach is endorsed by Living Streets.

2. What role can TfL play in promoting and improving health in London?

- TfL should set a long-term vision statement on walking and public realm improvements (in line with Healthy Street principles) that sets out commitment to achieving a transformation in the number of walking trips and making walking the natural choice for short journeys in the capital.
- Substantially increasing active travel should be a central plank of TfL's business plan and include health-related measurements as a Key Performance Indicator.
- TfL's business plan should clearly demonstrate how it will meet the health needs of Londoners, in particular by increasing active travel and reducing discretionary car use.
- A greater proportion of the TfL budget, commensurate with public health needs and potential benefits, should be invested in walking and cycling and on delivering Healthy Streets.
- TfL should prioritise active travel modes in its programmes and policies and reduce motor traffic (see answer 5).
- In combination with improving walking infrastructure, TfL should invest and extend existing behaviour change schemes which are known to work, such as Living Streets' Walk to School campaign and Walking Works campaign.
- TfL should appoint an officer at a senior level to work alongside the new Mayor's Walking & Cycling Commissioner to oversee the implementation of the Healthy

Streets approach and to steer the organization at the highest level.

It is essential that London's transport ambitions are complemented by planning and land-use policies that create an environment that offers everyone convenient, safe, well designed and direct access to workplaces, green spaces, homes, schools and other services by walking and cycling.

A good example of this is the road layout at the Bricklayers' Arms on the Inner Ring Road. Originally constructed as part of the proposed motorway system for Inner and Central London, the flyover, along with the roundabout beneath and the design of the Old Kent Road and New Kent Road at the point serves to sever Southwark in two. The communities on each side of the flyover have less contact than they would otherwise have, experiencing high levels of air pollution and seeing relatively fewer journeys being made through the area on foot or by bicycle than would be expected for such a key location in the Inner Ring Road. For a long time now there have been plans to remove the flyover and reduce the capacity of the road network in the area, using the freed-up space to create much needed housing and green space. Bringing forward this kind of development could not only help deliver the housing that is required but also liberate journeys using active means and promote health in the area by increasing levels of activity and reducing air pollution.

3. How effectively has TfL incorporated health considerations into its work to date?

Transport for London have made a positive step by employing a Consultant in Public Health to advise them on how to incorporate health considerations into their work. This, and the development of several TfL policy papers, including the Improving Health of Londoners Action Plan and Healthy Streets approach have had a positive role in ensuring health has been given a higher profile and is better considered in the work of TfL. Disappointingly however, TfL's annual progress reports do not demonstrate that health is being taken seriously by the highest levels of the organisation, with activities in this area appearing small scale and relatively low profile.

TfL has pursued a number of policies that have made it more difficult to improve the health of people using its road network. Policies focused on smoothing motor traffic flow, have caused particular problems, often resulting in schemes that would have improved places for walking and cycling, being rejected on the basis of traffic modelling that fails to capture the full benefits of increasing active or creating healthier places.

Overall, and with the exception of the Congestion Charging Zone during the hours it is in operation, the disbenefits of travel by motor vehicle on the health, safety and well-being of Londoners are not adequately costed. Until those who drive and/or make use of motor vehicles pay a more appropriate price for that usage then TfL will be limited in their ability to a) fund improvements to public transport and active travel and b) create the capacity in surface transport that these other forms of travel to flourish. The desire to improve health in and through the transport system does not operate in a vacuum. A success of the introduction of the Congestion Charging Zone was a significant fall in motor vehicle usage. For health to be promoted across the capital motor vehicle volumes need to decline further.

Although there has been some welcome investment and attention paid to cycling in recent years, there has been little organisational commitment to walking. We welcome therefore the new Walking and Cycling Commissioner and hope they will be able to work with senior officers at TfL to ensure active travel is given the priority it, and London, deserves.

4. How could TfL prioritise its activity in order to reduce health inequalities in London?

As noted above, walking is a universal activity in London - there is very little difference by gender, household income, ethnicity or employment status.^{ix}

However, the most disadvantaged people generally are disproportionately affected by the poor quality of their street environment – for example children from the lowest socio-economic groups are more likely to be killed in traffic collisions and suffer the worst air quality. These people are most likely to have no choice but spend time as pedestrians or cyclists, living, working, shopping and accessing services along the most heavily trafficked, dangerous and polluted roads (e.g. people living in more deprived areas are also exposed to higher concentrations of air pollution, often because homes of these groups are situated next to roads with higher concentrations of emissions).

TfL should be applying a Healthy Streets approach to London's most heavily trafficked roads, most of which are managed by TfL – making them easier to cross, cleaner, greener, safer, less noisy and less polluted by disincentivising non-essential motorised traffic and prioritising the needs of people walking and cycling.

People in less walking-friendly neighbourhoods understandably tend to be less active, increasing health risks. Better walking environments and wider scale interventions such as slower speed limits address the social inequalities of health because they benefit everyone but especially deprived communities, which suffer greater levels of road danger, air pollution and noise.

One category for whom walking is not universal is people with disabilities. This is also true of older people especially the over-70s. More thought and effort needs to go into street design to be accessible and inviting to people with disabilities and older people, e.g. by giving more time to cross at controlled pedestrian crossings and via enforcement of restrictions on pavement parking. This is particularly the case with an ageing population.

Enabling the London-wide behaviour change we need will require area-wide infrastructure and cultural changes, rather than simply programmes targeted on specific groups of people.

5. How can TfL encourage people to choose healthier travel options?

TfL can help more people choose healthier travel options by ambitiously pursuing policies to increase walking and cycling and reduce private car travel.

Some 6.4 million walk-all-the-way trips are already being made on an average day in London in 2014. This gives a walking mode share of 24%. Walking plays an essential role in many more door-to-door journeys.

36% of car trips in London could be walked in under 25 minutes^x. An estimated 60,000 years of perfect health could be gained each year across London's population if people swapped from motorised modes for those short journeys that could realistically be walked or cycled instead. This has been monetised as over £2bn each year in health economic benefits^{xi}.

Guidance already exists on increasing active travel in the form of recommendations from the National Institute for Health and Care Excellence (NICE). There is good evidence that making the following changes to roads increases walking and cycling:

- reallocating of road space to support physically active modes of transport (e.g. widening pavements, providing cycle lanes);
- restricting motor vehicle access (e.g. closing or narrowing roads to reduce capacity);
- specific demand management measures;
- introducing traffic calming schemes to restrict vehicle speeds (using signage and changes to highway design);
- creating safe routes to schools (e.g. traffic calming measures near schools, improving walking and cycling routes to schools).

In particular we would like TfL to:

a. Expand road pricing - road user charging is a proven effective measure for delivering health benefits^{xii} and needs to be extended to cover more vehicles and longer periods of the day and week to encourage changes in mode and to deliver further health benefits.

When the Congestion Charge was first introduced it made significant changes to the way people travelled around central London. The decrease in traffic gave space for more sustainable travel: walking, cycling and public transport. It is time to look again at how we pay to use the roads in London.

We want the new Mayor of London to commit Transport for London to complete a feasibility study on the options of an extended road-pricing scheme, bringing together the current congestion charging and ultra-low-emissions zones.

b. Designing streets and public spaces around the needs of people walking, and in consultation with the local community, so that people choose to walk and spend time there.

Flagship initiatives to re-allocate space to pedestrians should become principles firmly embedded in both TfL and borough maintenance and improvement schedules. This should include a focus on London's high streets and town centres along the lines of the Healthy Streets agenda to encourage more to walk and cycle to their local town centres.

c. Developing a high quality network of well connected, direct and easy to follow routes encouraging people to walk, supporting local services and reducing road traffic congestion - building on the Mayors Quietways programme for example.

d. Work with planning authorities and developers to ensure supportive land use and planning, that will help create walkable neighbourhoods and improve access to local centres. The aim should be to allow communities to walk to everyday services and facilities and reduce the need for short journeys by car, avoiding car-centric development which facilitates car-based journeys. Part of what makes London so car dependent is the relatively low population density of the outer boroughs. Encouraging sustainable growth in the outer boroughs will increase their economic mass and make the opening of local businesses to support these denser populations more viable.

e. Tackling road danger at source by managing traffic (for example, by slower speeds and reducing the numbers of HGVs on London streets), rather than restricting pedestrian movements. In particular we would like to see the **increased use of 20mph limits in the areas where people live, work and shop** is a significant action in reducing such danger. A number of councils within London are adopting 20 mph speed limits but more can be done by the Mayor to encourage a greater role out of 20 mph limits, including on mayoral controlled roads. The Mayors Roads Task Force recommended a 20 mph zone covering the whole of central London. The City of London has already introduced a zone covering the square mile.

f. Continue to improve public transport. Over the last 15 years London has experienced strong growth in public transport attributed to a much-improved public transport offering, societal changes affecting car ownership and use, and reductions to available road network capacity. Public transport is a far more efficient use of road space than people travelling by private motorised transport and also increases the number of walk journey stages undertaken by Londoners bringing additional health benefits.

g. TfL should work with the NHS and other health organisations to ensure local transport infrastructure and proposals for urban development support and facilitate active travel.

h. Promotion of sustainable transport choices and behaviour change campaigns to encourage more people to walk their everyday journeys to school, work and the shops.

Living Streets has a record of delivering a range of successful behaviour change campaigns and projects including:

The national **Walk to School** (WtS) campaign, operating since 1995, with an aim to encourage all parents and young people to make walking to school part of their daily routine. The benefits of walk to school initiatives were recognised by the National Institute of Health and Clinical Excellence (NICE) in its Walking and Cycling guidance in 2012.

The Living Streets **Community Street Audit** has been used in enabling public health teams to incorporate the health and environmental needs of their local communities in their work programmes. The audits work to improve streets and get people physically active and can really support the delivery of these shared public health outcomes. For example, working in partnership with the GLA, Living Streets worked with Ealing's public health, transport and regeneration teams to identify where and how to deliver outcomes against the council's healthy weight strategy. We worked with young people to understand the things they do, the places they go, and how this contributes to leading healthy lives.

6. How could TfL's wider business activity (such as its commercial, communication or advertising strategies) support better health outcomes for Londoners?

We would like to see TfL to better use its communication and advertising to encourage more people to walk as part of their everyday lives.

The previous Mayor commissioned Lord Darzi and the London Health Commission to see what more could be done by the Mayor to tackle health inequalities. The report, *Better Health for London*, recommended; '*The Mayor should invest 20% of his TfL advertising budget to encourage more Londoners to walk 10,000 steps a day*' (recommendation 7).^{xiii}

Further, we would like a holistic approach to be taken to TfL advertising, to ensure that mixed messages are not sent out. For example, the use of illuminated advertising hoarding on electronic screens on some roads in London contributes to a hostile street environment for walking and cycling and may contribute to driver distraction, increasing road danger at source.

7. How should streets and stations be designed to maximise potential health benefits?

By applying the Healthy Streets approach which improves health while reducing health inequalities, by delivering inclusive environments in which people choose to walk, cycle and use public transport whenever possible. This is a fully evidence-based framework of 10 outcomes that should lead decision making at every level throughout planning, delivery and maintenance of streets and stations.^{xiv}

In addition, there should be an attempt to develop a high quality network of well connected, direct and easy to follow routes encouraging people to walk to stations.

8. What is TfL currently doing well in regards to public health? What should it do differently/more of?

TfL has led a shift from private car use to public transport use over the last 10 years which has resulted in many health benefits. Health impacts of car in London^{xv}, published by the GLA, shows the range of health benefits that can be delivered by reducing the use of private cars in urban areas.

TfL now needs to embrace the Healthy Streets approach with much greater investment in delivering environments that feel safe and welcoming to all to walk and cycle in while continuing to improve public transport access to areas of London currently under-served and reducing motorised traffic.

9. How can the health benefits of transport schemes be better modelled, monitored and evaluated?

The most sizable health impact of most transport schemes in London are likely to be physical activity impacts. All transport schemes should be assessed using the World Health Organisation HEAT tool to monetise the mortality risk reduction resulting from increased walking and cycling.

The input data for these tools is cycle count and pedestrian count data so this data needs to be routinely collected at baseline for all schemes and then following implementation. A good understanding of how people's daily physical activity levels change as a result of implementing transport schemes is also very valuable.

Transport for London have developed a Healthy Streets Check to apply the 10 indicators of a Healthy Street to measurable qualities of the street. This does not directly measure health outcomes but could serve as a practical tool for delivering health benefits in the transport system.

TfL has been working with Dr Ashley Dhanani from the Bartlett School of Architecture, UCL, to develop a walkability model. This shows the 'technical' walkability of streets. We would like TfL to use this modeling, combined with actual user experience of the pleasantness of the street, to prioritise investment where there is the biggest potential to improve the environment and get more people walking.

10. What examples of good practice are there in London and further afield?

There are many examples of good practice of local measures within London to deliver good public realm or healthy street environments. These need to be replicated at speed and at scale across London to reduce health inequalities and ensure every Londoner gets the benefit of living in a health promoting environment.

An increasing number of world city leaders are beginning to understand the benefits of getting more people walking or cycling and reducing the number of cars, in order to improve the health and happiness of their citizens.

This is resulting in the rise of new policies centred on encouraging walking and cycling, and putting people back in at the heart of decisions about the built environment. Several cities have already started to take action. Oslo for example is planning to go car-free in its central district by 2019. In Paris there are ambitious plans to semi-pedestrianise seven of its most famous squares by 2020. Madrid's car-free initiative has led to cars being banned from the city's four central districts whilst Buenos Aires is pedestrianising 100 city blocks.

These cities, and others across the world, are increasingly realising that by reducing motor traffic you can create healthier places in which to live and do business.

11. What health commitments would you like to see in the Mayor's Transport strategy?

Strong Mayoral leadership is needed to re-focus transport policy in London to improve the quality of life and health of people living, working and visiting London. Prioritising a modal shift towards transport behaviours with the greatest health benefits will require measures to reduce demand and need to travel by car, in tandem with measures that will increase the uptake in active travel and public transport.

This cannot be achieved if increasing walking and cycling remain a peripheral transport goal, as is the case with the existing Mayor's Transport Strategy. Consideration of health - and particularly a modal shift towards active travel - should be an underpinning theme throughout the new Mayor's Transport Strategy.

- **Ambitious growth targets for walking and cycling should be set with increased funding and resources proportionate to those target levels.**

The Mayor's Transport Strategy (MTS) largely determines how physically active Londoners are. This is vitally important to the health of Londoners since physical inactivity is one of the primary causes of avoidable illness and early death in London. The most cost-effective means of increasing population physical activity is through increasing everyday active travel.^{xvi}

The Mayor's Transport Strategy currently includes modest increases in mode share for walking and cycling; as a result there is not currently anticipated to be any increase in population-wide physical activity levels to 2031. Over the currency of the Mayor's Transport Strategy there has been no meaningful increase in walking levels in London.

The MTS should set out an ambitious, long-term vision statement on walking and public realm improvements that commits to achieving a transformation in the number of walking trips and in the level of walking participation - for example the percentage of the population who walk at least ten minutes (for utility or recreation) at least five times a week.

We support the target set to increase the proportion of adults reporting 2 X 10 minutes of active travel on the previous day (outlined in the Travel in London report 8). At present only 34% of adults in London report having walked or cycled for two ten minute periods or more on the previous day which is the basic level of activity that adults need to maintain good health. However, TfL should be significantly more ambitious and deliver its current target of 70% much sooner than the projected date of 2050. A clear programme of interim targets and strategies to achieve these targets need to be set in order to achieve this far more quickly.

This ambition must be matched with a budget which reflects the importance of walking as a serious transport mode.

- **Ambitious Walk to School Target**

London's children are also alarmingly inactive; 82% of 5-15 year old children in London do not meet the minimum physical activity level of 1 hour per day.^{xvii} Active travel can contribute significantly to children meeting their physical activity needs.

The Mayor's Transport Strategy should set an ambitious target to increase the proportion of children usually walking to school. Considering where London is starting from, we would expect this to at least exceed national government ambitions (to increase the proportion of primary school children that usually walk to school to 55% by 2025).

- **Set an ambitious mode share reduction target to reduce the dominance of motorised traffic in London**

In London, car ownership is the strongest determinant of whether a person is achieving minimum physical activity levels^{xviii} and increasing active travel amongst car users is a public health priority.^{xix} Car use is also at the heart of all the major impacts of transport on health in London: road danger, severance, noise, air pollution. Only policies aimed at reducing the use of cars for all but essential travel (i.e. travel that could not be done by any other mode) will have a holistic impact on improving health and reducing health inequalities. The Faculty of Public Health has recently published guidance on effective policies to reduce the health impacts of cars^{xx}:

It is increasingly clear that the moment is arriving when communities are becoming prepared for action to be taken in relation to car domination. There are a number of triggers for this. Firstly and most strikingly there is the increased awareness of the impact of air pollution and its origins in road transport. The results of the Clean Air Consultation¹ show that a minimum of 67% of Londoners believe that cleanliness in the air is a problem and more than 50% of respondents believed that lorries and vans, vehicles idling and private cars (whether petrol or diesel) were a great deal of the cause of this problem. Other significant changes that have contributed to this change in perception is the increase in vehicles on London's roads which

¹ <http://talklondon.london.gov.uk/blogs/talk-london-team/results-clean-air-consultation>

is partly a result of the increase in freight and deliveries and the increase in private hire vehicle numbers.

The net result is that communities are looking for solutions and policies that start to restrain the domination of motor vehicles. Living Streets local groups, for example, are reporting an increase in the number of enquiries from communities that want to know how to close their street to through traffic

- **Commit TfL to complete a feasibility study on the options of an extended road-pricing scheme**

When the Congestion Charge was introduced in February 2003, it made significant changes to the way people travelled around central London. The decrease in traffic gave space for more sustainable travel: walking, cycling and public transport. It brought revenue into London's transport system to pay for public realm and public transport improvements that have made London a better city to live, visit and work. It is time to look again at how we pay to use the roads in London.

We want the new Mayor of London to commit Transport for London in the MTS to complete a feasibility study on the options of an extended road-pricing scheme, bringing together the current congestion charging and ultra-low-emissions zones and incorporating the wealth of available evidence on the benefits of mode shift to active travel, and act without delay on the outcomes of that study.

- **Reduce road danger**

Road danger is a public health issue and a greater integration between road safety and public health at all levels would help to create both safer and healthier environments .

Road danger should be addressed at a strategic level through a road danger reduction approach that addresses the factors that put people walking and cycling at risk, rather than seeking to discourage people walking and cycling from making the trips they want to make.

We would like to see the MTS commit to develop a plan based on the principles of road danger reduction which considers the wider impacts of its policies on public health and London's environment, with danger tackled at source. Actions should focus on creating a more 'forgiving' street network where people both feel safer and casualties are reduced.

The MTS would be strengthened by including specific targets to reduce the number of pedestrians and people cycling killed and seriously injured on London's streets.

- **20mph on streets where we live, work and shop**

Levels of walking and cycling are directly related to the speeds and volume of motor traffic. Research by Par Hill in 2013 found that "Studies have shown correlations between active

travel and slow speeds, and anti-correlations with car-oriented neighbourhoods. Community-wide urban designs that are pedestrian-friendly have been shown to be effective means of increasing walking and cycling^{xxi}.

Speed is the single most important determinant of road danger in road transport systems. Speed affects the risk of a crash occurring: the greater the speed, the less time there is to prevent a collision. In addition, the greater a driver's speed, the more severe the consequences once a crash has occurred.

Reducing vehicle speeds on London's streets is one of the single biggest measures to transforming London's streets into safe, people-centred streets, rather than simply corridors for traffic. Research by the London School of Hygiene & Tropical Medicine has found that when vehicle speeds are reduced to a maximum of 20mph (in this case through traffic calming in 20mph zones) casualties fall by 42% (over and above any background rate of decline in casualty levels).^{xxii}

We are calling for MTS to commit TfL to significantly reduce road danger in London for everyone by committing to introducing a 20 mph speed limit on the parts of the Transport for London Road Network where people live, work and shop and support, and further to encourage and support boroughs to make 20 mph the default limit on borough-controlled roads.

The Pedestrian Safety Working Group which was established by TfL and the GLA in the light of the Road Safety Strategy of 2013 gave clear pointers as to how to increase levels of compliance with 20mph speed limits. These were:

- The use of improvements in road design (eg the removal of gyratory road systems or the removal of centre lines on roads (which can reduce average speeds by 3mph)).
- Active enforcement – underscoring the role of the police and (average) speed cameras. In order to strengthen enforcement activity in the capital, TfL and the Metropolitan Police are working jointly on the roll-out of Community Roadwatch.
- New Technology. Following successful trials of Intelligent Speed Adaptation (ISA) or mandatory speed control on two of its bus routes, TfL is introducing mandatory speed limiters on all new buses acquired post 2017.

Each of these additional elements that re-enforce lower speed limits should be actively encouraged in the MTS.

- **Create space for people**

Transport provision in London is not balanced. As the population of the capital continues to rise, so the space afforded to different modes needs to be reconsidered on an ongoing basis. Flagship initiatives to re-allocate space to pedestrians (for example Oxford Street) should become principles firmly embedded in both TfL and Borough maintenance and improvement schedules.

Where a satisfactory balance between road users cannot be achieved, some sort of framework for identifying priority between them must apply. Principles of ‘capacity to cause’ harm (health, climate change, noise, danger to others and air pollution) must underpin decision-making.

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