

## TITLE OF DECISION: Enfield Healthy Streets Framework

### (1) Reason why decision is being called in:

#### Call In - Enfield Healthy Streets Framework

##### Activity 1

Paragraph one talks of a dedicated cycling infrastructure and to improve the pedestrian environment. Yet again cyclists are favoured and pedestrians appear to be pushed to second best. This will not be the incentive needed to get people to walk more short journeys.

**Response: throughout the report we talk about improving conditions for walking and cycling and the overall purpose of the report is to provide a framework for creating Healthy Streets. The Healthy Streets Approach, advocated by Transport for London through the Mayor's Transport Strategy, aims to make improvements for all types of people walking and cycling. There are 10 indicators (Figure 1 of the Cabinet Report) and these achieve a balance between walking and cycling.**

Paragraph two - further development of the existing cycle hubs at train stations. There are no details as to how these are being used at present. Are they full or is there unused space?

**Response: to clarify, this is not to say expansion of the cycle hubs that are already in place without evidence of demand exceeding supply. But an increase in the number of good quality, secure cycle parking spaces such as those found at our station hubs, is needed at other stations that don't currently have this level of provision. Safe, secure, covered cycle parking can make a difference in enabling people to cycle to stations and contribute towards the target of 80% of journeys made by sustainable modes by 2040.**

Paragraph four talks about getting people to switch shorter journeys from car to foot or cycle but there is little or no mention of public transport within any of these six activities. This would help not only with shorter journeys but longer ones to.

**Response: the paper relates to public transport as the programme aims to facilitate walking and cycling journeys, and most public transport trips will begin on foot (walking to a station or bus stop). The focus of TfL's Healthy Streets Approach is walking and cycling journeys therefore most of the proposals in the paper concern walking and cycling. By enabling more people to walk or cycle for everyday journeys the council will support people who choose not to own or use a car and thus increase people's tendency towards public transport. Bus priority measures are a focus of other areas of work and any impact on buses as part of walking and cycling projects is carefully considered and monitored.**

The same paragraph talks about people who walk or cycle to local town centres spending more than those arriving by car or public transport but there is no data mentioned to support this assertion.

**Response: the evidence for this includes the following:**

Transport for London, *Walking and cycling the economic benefits* briefing pack. <https://content.tfl.gov.uk/walking-cycling-economic-benefits-summary-pack.pdf>

Just Economics, *The Pedestrian Pound*, report for Living Streets <https://www.justeconomics.co.uk/uploads/reports/Just-Economics-Pedestrian-Pound-Living-Streets.pdf>

Arancibia, D. et al (2019) Measuring the Local Economic Impacts of Replacing On-Street Parking With Bike Lanes, *Journal of the American Planning Association*, 85:4, 463-481, DOI: [10.1080/01944363.2019.1638816](https://doi.org/10.1080/01944363.2019.1638816)

Accent Research, 2013, *Town Centres 2013*, report for Transport for London.

## **Activity 2**

Paragraph one says about danger from motor vehicles. For pedestrians there is also danger from the unlawful but increasing use of electric scooters and cyclists riding on the pavement. No mention is made of these two factors which cause alarm particularly for the elderly and disabled.

**Response: Activity 2 is intended to align with the Vision Zero commitment in the Mayor's Transport Strategy, reducing road danger for people who are most at risk. The Department for Transport publishes data on collisions between road users (Reported Road Casualties Great Britain). The most recent year data is available is 2019. The 2019 data shows that on urban roads across Great Britain, 372 pedestrians were hit by a person cycling (five of whom sadly died) in comparison to 15,401 pedestrians hit by a person driving (220 of whom sadly died).**

**DfT publishes data on the relative risk of different modes of transport. For the most recent year data is available, the data shows a casualty rate (all severities) per billion miles travelled of 222 for car drivers, 1,640 for pedestrians and 4,891 for people cycling.**

**The data is indicative of the danger posed by motor vehicles and the most vulnerable road users. The types of projects within the Enfield Healthy Streets programme aim to reduce the volume and speed of motor traffic, provide dedicated space for pedestrians, cyclists and motor vehicles, and improve junctions and crossing points for pedestrians and cyclist.**

DfT datasets are available at <https://www.gov.uk/government/statistical-data-sets/reported-road-accidents-vehicles-and-casualties-tables-for-great-britain#vehicles-in-reported-road-accidents-ras20>.

The unlawful use of e-scooters and cycles on footways may pose a risk to pedestrians, particularly older or disabled people. Groups representing disabled people (e.g. the charity Guide Dogs) have expressed concern about the increasing use of e-scooters. At this time, there is a lack of robust evidence about the scale and severity of the risks posed to pedestrians by e-scooters, and outside the boroughs participating in TfL's e-scooter trial, the use of e-scooters on the public highway (including footways) is illegal.

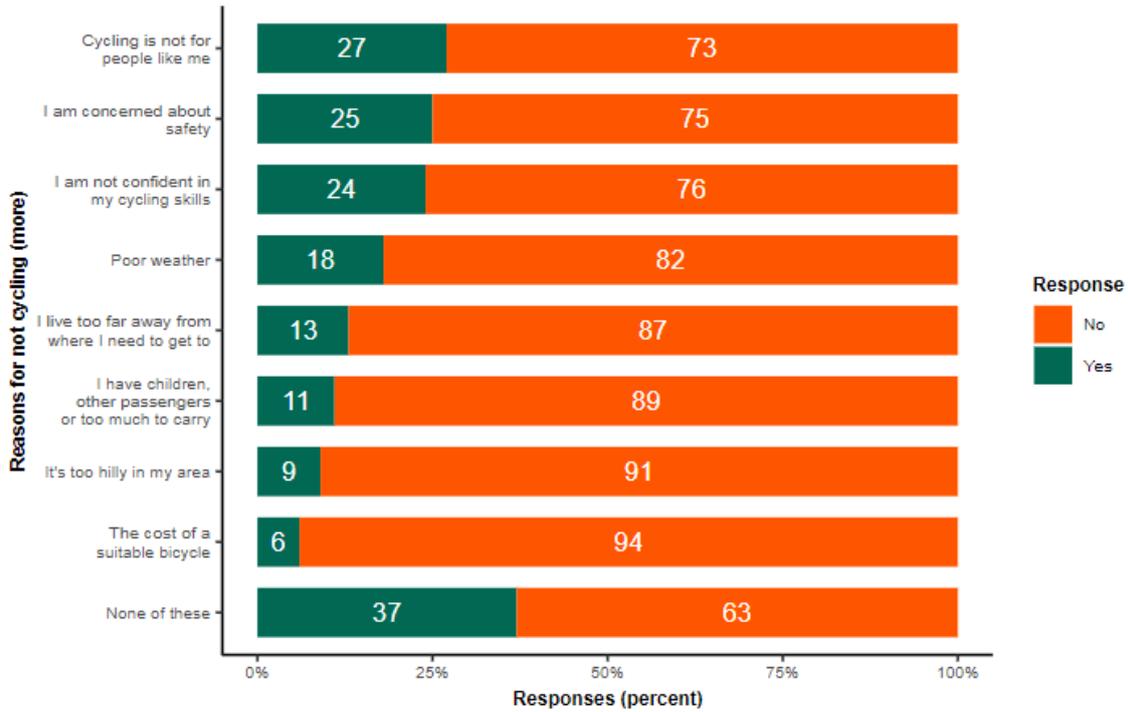
Regarding unlawful footway cycling, various studies have investigated why this happens (see for example Ilhstrom et al. 2021), with fear of sharing the road with motor traffic a key reason. The DfT's call for evidence informing production of the national Cycling and Walking Investment Strategy referenced evidence that 59% of people agreed with the statement "It is too dangerous for me to cycle on roads" with females, older people and non-cyclists most likely to agree. Hence the provision of good quality cycling infrastructure separated from motor traffic (and pedestrians) is a focus of Enfield Healthy Streets.

Ilhström, J. et al (2021) Immoral and irrational cyclists? Exploring the practice of cycling on the pavement, *Mobilities*, 16:3, 388-403, DOI: [10.1080/17450101.2020.1857533](https://doi.org/10.1080/17450101.2020.1857533)

The final paragraph says that fear of traffic is a reason people often give for choosing not to walk or cycle. There are many other reasons, inclement weather, where to leave a bicycle at destination, carrying shopping if walking etc. but no other reasons are talked about or dealt with in these activities.

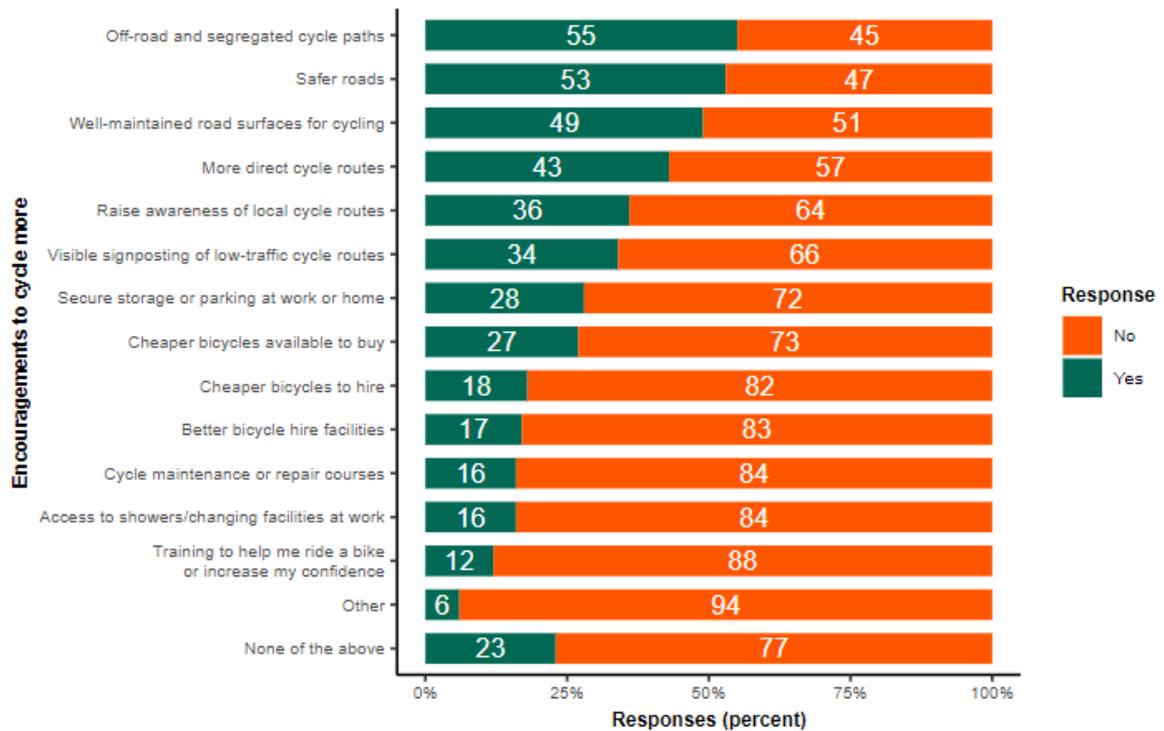
**Response:** the 2021 National Travel Attitudes Survey (NTAS) included a focus on walking and cycling and asked people to say what stops them from cycling and what would enable them to cycle more. 2,554 people were surveyed. The charts below are taken from <https://www.gov.uk/government/statistics/national-travel-attitudes-study-wave-5/national-travel-attitudes-study-wave-5#walking>.

This chart shows the range of reasons people don't cycle:



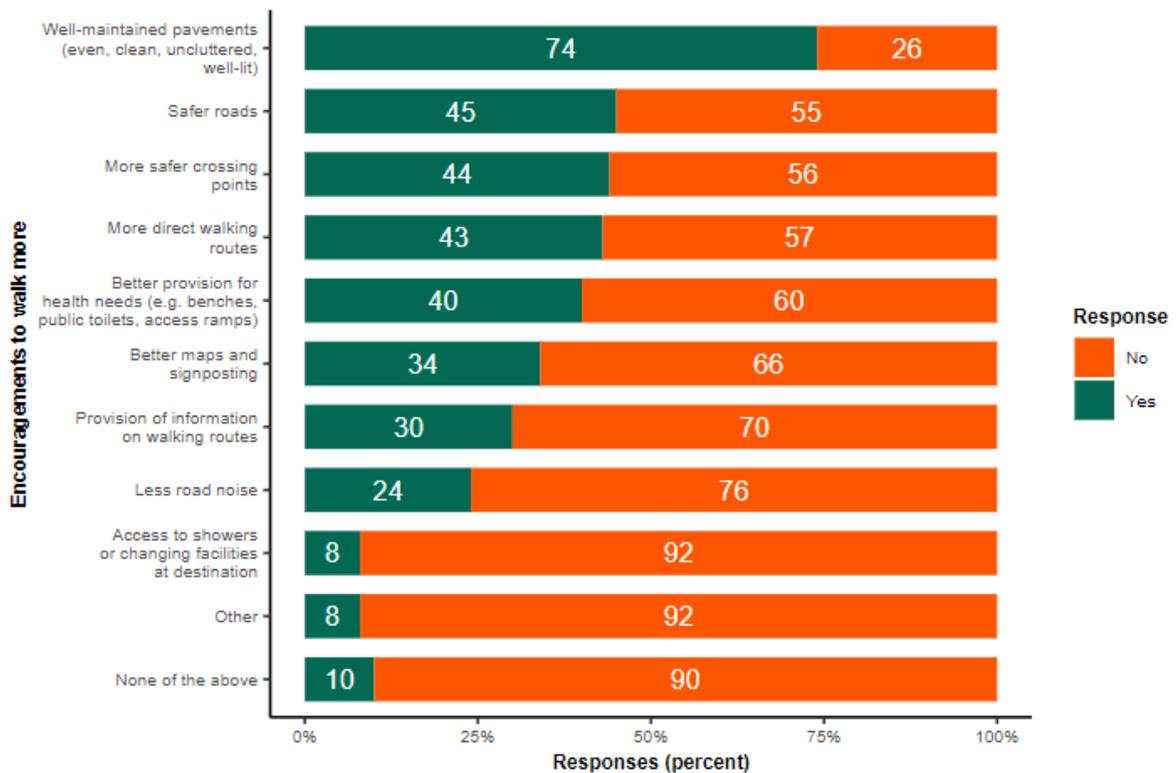
\* Was only asked to respondents who stated that 'none of the above' would encourage them to cycle more.

**This chart shows what people said would encourage them to cycle:**



\* Was not asked to respondents who stated that their disability makes cycling impossible.

**This chart shows what people said would encourage them to walk:**



In addition to the fear of traffic, the Healthy Streets activities address a range of barriers to walking and cycling, for example:

**Activity 3** – addresses lack of access to cycles through the provision of loan bikes, a hire scheme, bike markets offering affordable bikes and cycle maintenance to training.

**Activities 4 and 6** – aim to broaden the appeal of active travel across all our communities through community co-production, addressing the barrier that some people feel cycling is not for them.

**Activity 5** – aims to improve the quality of the urban realm in line with the Healthy Streets indicators such as places to rest, shade and shelter, easy to cross, not too noisy, which in turn align with the reasons given by respondents in the charts above.

### Activity 3

Paragraph two says 'we will SEEK to involve those with protected characteristics in the project design .....'. In order to ensure that any projects are as equitable as possible they will need to do more than seek to involve people.

**Response:** we cannot force people to be involved in the project design and development process. This is about taking steps to enable participation from people across the 10 protected characteristic groups recognised by the council. The Equalities Approach accompanying the cabinet report describes the proposed approach to community involvement, including the establishment of a Healthy Streets Disability Reference Group (HSDRG),

**consisting of approximately 15 people with representation across the impairment types. The HSDRG members would be paid for their time and contribution.**

#### **Activity 4**

This, and activity 6, should be much higher up the list. Although the word proactively is used there is no other mention of exactly how they will ensure that a wide range of views and opinions are heard, listened to and acted upon. Simply saying there will be consultation is not good enough. For these schemes to have any chance of success a wide ranging and extensive consultation is needed.

**Response: The Equalities Approach that accompanies the cabinet report describes how a wide range of views and opinions will be sought. Activities are not ranked in priority order.**

#### **Activity 6**

This should have been activity 1. Simply putting things in place does not work if residents feel they have been imposed and can't understand the reasons behind them.

Point 2.f.i - yet again we are saying we are delivering Cycle Enfield whilst then going on to say encouraging more walking in the Borough. The title needs to be changed so that more people understand what is trying to be done.

**Response: Section 2 shows how the need for this Healthy Streets framework has arisen. 2.f refers to the Enfield Transport Plan. 2.f.i. is one of the objectives of the Enfield Transport Plan. 2.c does talk about the transition to a holistic view of active travel building on Cycle Enfield.**

Point 10 - This is one of the few references to public transport services. If one of the rationale behind Healthy Streets is to have less use of cars then getting people to use public transport needs to be supported alongside cycling and walking.

**Response: increasing walking, cycling and public transport use will all contribute towards local achievement of the Mayoral target of 80% of trips to be made by sustainable modes by 2040.**

Point 41 - Although the sentence says 'these indicators will include but will not be limited to increases in....' there is only one mention specifically related to pedestrians and this is an increase in crossing facilities whereas there are three related specifically to cycling. This does make it seem that cycling is still the preferred way for people to get about and walking is just added as an afterthought. This will not help to change attitudes to Healthy Streets.

**Response: four of the indicators listed in paragraph 41 relate to pedestrians (number of pedestrian crossing facilities, proportion of the borough road**

**network with a 20mph limit, planting and greenery and number of improved public places).**

Point 55 - this mentions an increase in trips made by active, efficient and sustainable modes but doesn't say what percentage increase is needed to make a difference. This should be included in order for residents to see how much or how little could help the climate.

**Response: paragraph 55 is a reference to the Climate Action Plan and quotes relevant actions from the plan. Data published by Transport for London indicates the share of trips made by active, efficient and sustainable modes is 55% in the London Borough of Enfield. (2019-20 data from LIP3 MTS Outcomes, spreadsheet available at <http://planning.data.tfl.gov.uk/>)**

Point 57 - Community engagement - council needs to recognise that not everyone has access to a computer or knows how to use one. Other ways to feed back concerns etc. need to be used and advertised.

**Response: this is understood and is why our engagement includes letters and documents posted to homes which include details on how those residents that prefer can request paper copies of the information. Aside from the restrictions during the pandemic, engagement events in person are also held.**

Annex A - point 1.4 - This mentions a 2016 Analysis of Walking Potential and then states that the majority of trips are below 5km and could be cycled. This is using data from one survey specifically about walking for another use and hopefully not suggesting that 5km could easily be walked as well.

**Response: the Analysis of Walking Potential is based on analysis of the London Travel Demand Survey, which covers all journey types and modes. Londoners are asked about all the journeys they make over a given time period, including distance travelled. It is therefore not the case that people have responded to a survey specifically about walking in the section quoted.**

Point 1.5 - This is a minor point but there is a mixing of metric and imperial measurements i.e. 500m and up to a mile. Please use one or the other and, if possible use both as there are many older residents who would not be able to visualise distances in metric.

**Response: noted.**