

MRC/CSO Social and Public Health Sciences Unit Consultation Response

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| **Title of consultation** |
| Restricted Roads (20 mph speed limit) (Scotland) Bill |
| **Name of the consulting body** |
| Scottish Parliament |
| **Link to consultation** |
| https://[www.parliament.scot/parliamentarybusiness/CurrentCommittees/109932.aspx](http://www.parliament.scot/parliamentarybusiness/CurrentCommittees/109932.aspx) |
| **Why did the MRC/CSO Social and Public Health Sciences Unit contribute to this consultation?** |
| This was an open consultation but SPHSU was invited to respond on the back of a response that we provided to the initial consultation when the Safer Streets Bill was launched. The bill has now moved to the Rural Economy and Connectivity Committee for scrutiny and they have launched their own fresh consultation. We responded to reiterate the original evidence that we  provided and to update in light of a major evaluation study of the particular topic (signed only 20mph limit areas). |
| **Our consultation response** |
| The MRC/CSO Social and Public Health Sciences Unit, University of Glasgow conducts world- leading research to understand the determinants of population health and health inequalities, and to develop and test interventions to improve health and reduce inequalities. In this submission we respond to the questions about the public health impacts of the measures proposed in the Bill, and how these might be evaluated.  **Is reducing the speed limit to 20mph the best way of achieving the aims of the Bill?**  The aims of the Bill include a number of important public health outcomes: improving road safety, encouraging active travel, reducing inequalities in casualties between deprived and non- deprived areas and curbing pollution from vehicle emissions. It is impossible to judge from existing evidence how much a default 20mph limit will contribute towards achieving these aims. Strengthening the evidence base should be one of the aims of introducing legislation, so that the effects of a default 20mph limit can be compared with those of other ways of achieving these outcomes.  In our response to the 2017 consultation on the proposal for a Bill to make 20mph the default speed limit for restricted roads in Scotland, we noted that the evidence from previous evaluations of reduced urban speed limits was inconclusive with respect to the effects on public health of lowering the default limit to 20mph. The strongest evidence available related to reductions in collisions and even this was patchy. There was strong evidence that 20 mph zones with physical traffic calming measures reduced traffic speeds and collisions, with a stronger effect in more deprived areas. The evidence that sign-only 20mph limit areas had such effects was much weaker, and derived from small local studies or from models of the relationship between traffic speeds, collisions and vehicle emissions, rather than from well- designed, adequately powered evaluations of the implementation of 20mph limit areas. |

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| Since then, the UK DfT has published the findings of a major evaluation of signed only 20mph limit areas, incorporating 12 case studies. This found that the introduction of limit areas reduced average (median) traffic speeds, with a larger effect on faster drivers and on roads where average speeds were faster before the introduction of the lower speed limit. The evaluation also found high levels of public support, which increased post implementation, and positive effects on perceptions of active travel.  Evidence for effects on health was less conclusive. There was a significant reduction in collisions and casualties in only one of the case study areas and no evidence was collected on effects on air quality, or on health inequalities. The authors concluded that evidence for environmental and health effects remained ‘weak, inconclusive, or complex.’  This new evidence reinforces the importance of coupling any extension of 20mph limits in Scotland with a thorough programme of evaluation. This should include a wider range of outcomes than previous evaluations, including effects on air quality and active travel behaviour, as well as collisions, casualties, and attitudes towards active travel. Evaluation should explicitly incorporate a focus on health inequalities and should consider longer-term outcomes, as driving and active travel behaviours are likely to evolve over time post implementation. The DfT report notes that there is currently no national database of speed limits, although a project is underway to produce a speed limit map for the UK. Such a map would be extremely useful for evaluation. The Scottish Government should support its development, and ensure that it is easily and freely accessible to researchers in Scotland.  **It is proposed that a national awareness campaign is required to introduce a 20mph speed limit. Do you agree with this? And if so – what shape should any campaign take? Should Police Scotland be required to take additional enforcement action, over and above that used to enforce the current 30mph limit, following the introduction of a default 20mph limit on restricted roads?**  The DfT evaluation notes that making 20mph the default will reduce the speed limit on roads which are larger and faster than those where 20mph limits have traditionally been implemented. Compliance with a default 20mph limit may therefore be lower. To achieve high levels of compliance, the report recommends embedding 20mph limits within a programme of ‘high profile and integrated engagement activity,’ and implementing them alongside enhanced enforcement and complementary health, education, environment and transport policies. How the effectiveness of a 20mph limit varies according to what kinds of engagement activities are undertaken, and other features of the local policy context, is another important focus for evaluation.  **Do you have any comments on the impact that the Bill might have in relation to human rights or equalities for any particular group of people, sustainable development, or island, rural or remote communities?**  As noted above, we recommend that health inequalities and environmental impacts should be included among the outcomes of evaluation. |
| **When was the response submitted?** |
| 28/01/2019 |
| **Find out more about our research in this area** |
| [https://www.gla.ac.uk/researchinstitutes/healthwellbeing/research/mrccsosocialandpublichealth](https://www.gla.ac.uk/researchinstitutes/healthwellbeing/research/mrccsosocialandpublichealthsciencesunit/programmes/previousresearch/ev/hrh/transhia/) [sciencesunit/programmes/previousresearch/ev/hrh/transhia/](https://www.gla.ac.uk/researchinstitutes/healthwellbeing/research/mrccsosocialandpublichealthsciencesunit/programmes/previousresearch/ev/hrh/transhia/) |
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