Pedestrian Safety and Vision Zero in San Francisco
State Climate Action Team
Public Health Workgroup

October 8, 2014
We're a Walkable City. All trips in San Francisco begin and end with walking.

17%

And walking is the primary mode for 17% of all trips.

Each year in San Francisco,

100

Severely Injured or Killed

At least

800

Injured

5x

Seniors have a higher fatal injury rate than younger adults

Seniors are particularly vulnerable.

6% = 60%

Streets

Severe and fatal Injuries

Pedestrian injuries/death are concentrated in specific areas.

64%

motorists at fault

Motorists often are not yielding to pedestrians, Failure to yield accounts for 41% of the 64% total.

Left turns disproportionately contribute to injuries.

28%

Left turns were the movement preceding collision in 28% of injuries

High vehicle speeds kill.

50% vs. 10%

fatalities at 40 mph

fatalities at 25 mph

$15M

annual medical costs related to ped injuries

Medical costs alone are very high.

$564M

Total annual health-related economic costs are much higher.
High Costs: ~ $15 million/annually

By mapping the admitted patients (most costly) according to Supervisorsial District, we were able to highlight “hotspots” where an economic case can be made for implementing and evaluating sustainable countermeasures.

76% of the total cost was paid for by public funding (Medicare, MediCal, patients)

Evident Inequities

6% of streets account for 60% of severe and fatal pedestrian injuries

Highest severe/fatal injuries per mile = SoMa, Chinatown, the Tenderloin:

Vulnerable populations - low income, disabled, immigrant, non-english speaking, senior residents - that are also heavily reliant on walking, public transit
December 2010: Mayoral Executive Directive 10-03

Established reduction targets for serious and fatal pedestrian injuries
  • 25% reduction by 2016
  • 50% reduction by 2021
  **Also:**
  • Reduce neighborhood inequities
  • Increase walking

Established Citywide Pedestrian Safety Task Force

**2011-2012**  Directed Specific Short-Term Actions, Development of a Citywide Pedestrian Strategy

**2013**  Mayor’s San Francisco Pedestrian Strategy Released

**2014**  San Francisco Adopts Vision Zero – Pedestrian Safety Task Force Expanded to All Modes
2011-2013: Citywide Pedestrian Safety Task Force

**San Francisco Agencies:**
- SF Municipal Transportation Agency (*Co-Chair*)
- SF Department of Public Health (*Co-Chair*)
- SF General Hospital Trauma Center
- SF Injury Center
- SF County Transportation Authority
- SF Police Department
- SF Fire Department – EMS
- SF Department of Public Works
- SF Public Utilities Commission
- SF Planning
- SF Recreation & Parks
- SF Unified School District
- SF Department of Environment
- Mayor’s Office on Disability

**Pedestrian Safety Organizations:**
- Walk San Francisco
- Pedestrian Safety Advisory Committee to the Board of Supervisors
- Senior Action Network/CA Walks

**3 Subcommittees – Also Met Monthly:**
- Data Subcommittee
- Engineering Subcommittee
- Enforcement Subcommittee

- Reported to the Mayor’s Office
- Unprecedented level of City agency coordination on pedestrian safety issues
San Francisco’s Pedestrian Strategy

Goals:
1. Reduce pedestrian injuries
   (50% reduction of severe/fatal by 2021)
2. Reduce neighborhood inequities
3. Increase walking trips
4. Provide high-quality walking environments

And Key Actions...

http://www.sfmayor.org/pedestrianstrategy
Walk SF – Key Community Partner

“We’ve acknowledged that this is a crisis,” said Schneider, “and now we’re calling on city leaders to fund the [Mayor’s] Pedestrian Strategy and implement Vision Zero — zero traffic fatalities in 10 years.”
Vision Zero in San Francisco: 
0 Traffic Deaths by 2024

- Vision Zero Task Force - Co-Chaired by SFDPH and SFMTA
  - **Enforcement** - “Focusing on the 5” causes of death and injury for all modes as well as prosecuting traffic crimes
  - **Engineering** – improving streets and sidewalks to increase safety
  - **Education Campaigns** – support larger cultural shift, focus on road safety
  - **Evaluation and Monitoring** – monitor progress and target interventions
  - **Policy** - advance awareness, enable programs and projects that support zero deaths
  - **Engagement and Advocacy** – community holding City agencies accountable and representing populations disproportionately affected by these tragedies
Saving Human Life is the Highest Priority

• A safe system that forgives
  – In every situation the person might fail – the road system should not.
  – The consequence of individual mistakes should not be death or serious injury – the system should be designed to anticipate and reduce the consequences of human error.
2010 Primary Transportation Mode (All trips begin and end with walking)¹

- Pedestrian: 17.5%
- Transit: 17%
- Bicycling: 3.5%
- Taxi: 1.0%

Driving: 61.0%

2013 Fatalities, % by Transportation Mode (Medical Examiner)

- Pedestrian: 60%
- Motorcyclist: 14%
- Cyclist: 9%
- Passenger: 7%
- Driver: 9%
- Transit: 17%

Equity: Protecting our most vulnerable
High Injury Corridors Network: San Francisco, California

- Pedestrian High Injury Intersection
- High Injury/Pedestrian Volume Intersection
- Cyclist High Injury Intersection
- Cyclist High Injury Corridor Where Overlap with Pedestrian High Injury Corridor (22 miles)
- Cyclist High Injury Corridor, No Overlap (20 miles)
- Pedestrian High Injury Corridor, No Overlap (48 miles)
- Community of Concern
- Supervisor District

Source: SFDPH 2014; Statewide Integrated Traffic Records System (SWITRS) 2007-2011

City and County of San Francisco Department of Public Health: Environmental Health Program on Health, Equity, and Sustainability

www.sfpghes.org

Equity: Protecting our most vulnerable
SFCTA Board Vision Zero Committee

City Vision Zero Task Force Community and Staff

City Agency Boards and Commissions

Vision Zero Steering Committee
Staff

Engineering Subcommittee

Education Subcommittee

Enforcement Subcommittee

Evaluation and Data Subcommittee

Policy Subcommittee

Working Groups:
City Vision, Communications, Funding, Schools

Community and Stakeholders (As appropriate)
TransBASESF.org: Linking Transportation Systems to our Health

Evaluation and Analysis
WalkFirst Capital Improvement Program

**EFFECTIVENESS:** 68% of severe/fatal injuries on High Injury Network targeted by WalkFirst Pedestrian Safety CIP

**COST:** $50M for implementation of WalkFirst Pedestrian Safety CIP

**TIMEFRAME:** Years 1–5 for implementation of WalkFirst Pedestrian Safety CIP

San Francisco Pedestrian Safety Capital Improvement Program: A Step Towards Vision Zero

SFMTA Municipal Transportation Agency

SAN FRANCISCO PLANNING DEPARTMENT

Department of PUBLIC HEALTH

Vision Zero SF

Engineering
Vision Zero in San Francisco:

0 Traffic Deaths by 2024

• Two-Year Action Strategy: Release in December 2014

• Longer-Term Strategy: City Vision
  – Best Practices and Peer Cities Review
  – Evidence-based Approach

What Will It Take?
Vision Zero in San Francisco: 0 Traffic Deaths by 2024

A Cultural Shift – *Valuing Human Life as the Primary Metric*

- Identifying Local and State-Level Actions to help achieve our goals: e.g., Automated Enforcement?
- Changing Business As Usual: Injury and Death are not an expected by-product of the system
- Critically Analyzing Priorities: Are we prioritizing saving lives where we see the greatest burdens? Are our initiatives evidence-based?
- Resolving internal bottlenecks to expedite delivery
Thank you!

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