



THE UNIVERSITY OF TEXAS AT AUSTIN
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On Identifying Engineering and Behavioral Countermeasures to Reduce the Occurrence and Severity of Pedestrian Injuries in Vehicle-Pedestrian Crashes

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Motivation

❑ **Walking** is an active transportation mode that **can contribute** to:

- lower traffic congestion levels,
- reduced mobile-source emissions and energy consumption,
- improved public health, and
- vibrant social cohesion opportunities.



❑ Pedestrians are a vulnerable road-user group

(~5000 pedestrian fatalities; 65,000 pedestrian injuries in 2014)

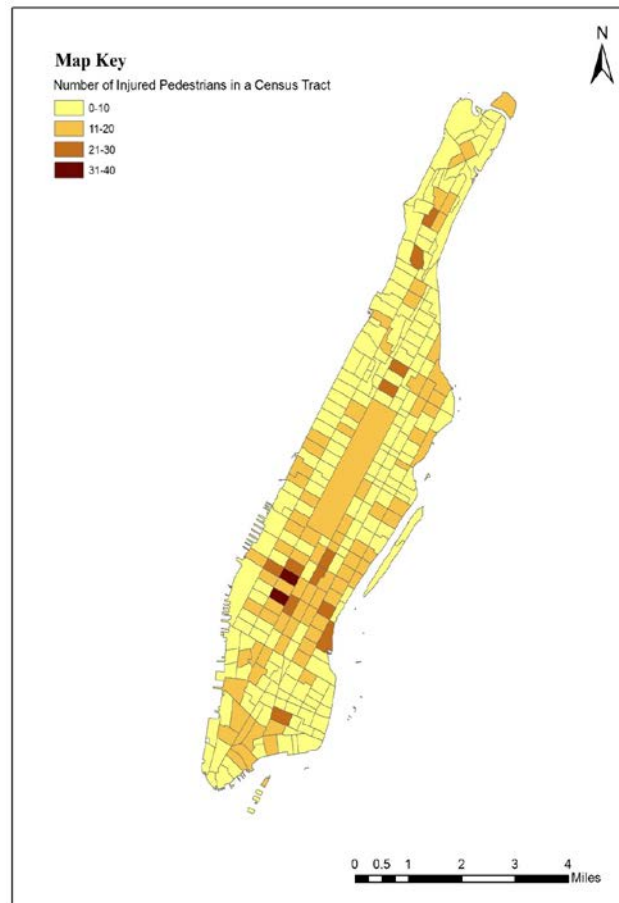
❑ Efforts to promote walking need to be coordinated with strategies that enhance safety.

❑ A good understanding of the risk factors associated with pedestrian injuries in crashes is required.

❑ **Objective:** formulate a macro-level multivariate model to jointly analyze the **count of pedestrians involved in traffic crashes** by injury severity level.

Data

- ❑ All **pedestrian crashes** in the **year 2009** in the **Manhattan area** of New York City
- ❑ **Spatial level:** Census tract.
- ❑ Four injury severity levels:
 - possible injury,
 - non-incapacitating injury,
 - incapacitating injury, and
 - fatal injury.
- ❑ Crash data from the **CrashStat website** (maintained by New York City's Transportation Alternatives organization).
- ❑ Additional data:
 - Socio-demographic information
 - Land-use and road network data
 - Activity intensity data
 - Commute mode shares and transit supply data



Methodology

- ❑ **Proposed model:** comprehensive spatial random coefficients multivariate count model.
 - **Accommodates excess zero data;**
 - Allows variation in the effects of determinant exogenous variables because of **unobserved location-specific factors;**
 - Accommodates **spatial dependency** in the count of pedestrian injuries **based on location proximity**, and
 - Captures **spatial drift effects** through the spatial structure on **constant and slope heterogeneity effects.**

Key Findings

- ❑ Census tracts with a
 - high population density,
 - high proportion of Hispanic residents,
 - high proportion of the population over 19 years old, and
 - with low education levelsare particularly vulnerable to pedestrian injuries.

- ❑ Financially challenged segments of the population face higher injury risk.

Key Findings (cont.)

- ❑ Higher population density → higher risk propensity for all injury levels.
- ❑ However, presence of sidewalks and buffers, traffic lights at intersections as well as low speed limits can moderate the effect for the risk of low-level injuries.
- ❑ In 15% of the Census tracts, an increase in population density is associated with a decrease in the propensity of possible injuries (lowest level of severity).
- ❑ Census tracts with high built-up commercial and residential land-use → high risk propensity
- ❑ Dangerous situation: combination of distraction and pre-occupation with high pedestrian activity.
- ❑ Need for information campaigns.



Key Findings (cont.)

- ❑ Presence of schools and universities increases the long term risk propensity of non-incapacitating injuries.
- ❑ School are localized in high exposure pedestrian areas because the volumes of pedestrians around are significantly larger than average.
- ❑ However, since speeds are controlled and there is abundant signaling, severe pedestrian crashes are not commonly observed.
- ❑ Need for the continuation of programs such as the Safe Routes to School.



Implications for Practice

- ❑ Our macro-level model has the aim of **identifying relatively longer-term planning and behavioral modification solutions.**

- ❑ For example:
 - More equitably channeling resources for pedestrian facility investments if inequities are identified,
 - land use design reconfigurations, or
 - targeting specific demographic groups with information campaigns.

- ❑ Risk factors for different types of pedestrian injuries can be very different.
 - Critical to the identification and prioritization of planning, educational, and enforcement safety countermeasure efforts.
 - Financial and other costs of crashes vary substantially based on the nature and extent of injuries sustained.