

TRANSCRIPT

LEGISLATIVE ASSEMBLY ECONOMY AND INFRASTRUCTURE COMMITTEE

Inquiry into the impact of road safety behaviours on vulnerable road users

Melbourne—Tuesday 22 August 2023

(via videoconference)

MEMBERS

Alison Marchant—Chair

Kim O’Keeffe—Deputy Chair

Anthony Cianflone

Wayne Farnham

John Mullahy

Dylan Wight

Jess Wilson

WITNESSES

Dr Ingrid Johnston, Chief Executive Officer, and

Kathryn Collier, Deputy Chair, Victorian Chapter, Australasian College of Road Safety.

The CHAIR: Welcome to the public hearing for the Legislative Assembly Economy and Infrastructure Committee's Inquiry into the impact of road safety behaviours on vulnerable road users. All mobile telephones should now be turned to silent.

Evidence given today is being recorded by Hansard and broadcast live on the Parliament website. While all evidence taken by the Committee is protected by parliamentary privilege, comments repeated outside this hearing, including on social media, may not be protected by this privilege.

Witnesses will be provided with a proof version of the transcript to check, and verified transcripts and other documents provided to the Committee during the hearing will be published on the Committee's website. If I could just remind Members and witnesses to mute their microphones when not speaking just to minimise interference.

Thank you, both of you, for your time today. It is much appreciated. I might let you, Ingrid or Kathryn, make some opening statements. You may want to talk to your submission or some extra information you would like to provide, and then I will ask some of the Committee members to ask you some questions.

Dr Ingrid JOHNSTON: Thank you to the Committee for inviting us here today to address this important topic. Sadly, in the months since this Inquiry was called the trauma rates have increased even further. TAC data shows that in the 12 months to 17 August 2023 fatalities were up 10% on the previous 12 months, taking Victoria to the highest number of deaths in more than five years. TAC claims involving hospitalisation in the 12 months to 31 January were down 6% on the previous year, which should be taken as good news. However, when you think about the targets that we have set ourselves to reduce deaths by 50% by 2030, it becomes clear we are not going to get there if things do not change a lot.

The Australasian College of Road Safety is the region's peak membership organisation for road safety, with members including policymakers; health and transport professionals; academics; community organisations; researchers; federal, state and local government agencies; private companies and members of the public. This diverse membership includes experts across all aspects of road safety and provides us with a rich and collaborative environment. Our submission to this Inquiry was written in consultation with almost 250 members across Victoria. Road safety is a complex area with many factors in the system to be considered, multiple causes of any crash and multiple solutions required. If it was simple, with one simple cause and response, we would have fixed the problem by now.

The long-term impacts of COVID are similarly complex, and we are seeing them reflected in the complexities of road safety. COVID saw changes in travel patterns and use, mental and physical health, alcohol and other drug use, social cohesiveness and social capital, where and when we live and work, how we shop in person and with online deliveries, financial stress, community responses to government interventions and much more. Some of these changes are lingering and may continue to do so for some time. As we learn and understand more about what is happening, we need to do everything we can to reduce the trauma rates on our roads, with the firm understanding that it is simply not acceptable for people to die and be seriously injured just trying to get from A to B in their daily lives. Fortunately, we have a list of things we know will make a difference: improving access for everyone in Australia to the newest, safest vehicles with safety standards matching the best in the world; reductions in speed limits to match the road infrastructure we have, including 30 kilometres per hour in areas of high pedestrian, cyclist and other vulnerable road user traffic; safe and separated infrastructure for cyclists, pedestrians and e-mobility; provision of safe, affordable and accessible public transport; effective behaviour change communication; and improving links with other sectors such as education, mental health, alcohol and other drugs and youth in designing and implementing road safety interventions. There is much work to do. Thank you.

The CHAIR: Thank you very much for that. Kathryn, was there anything that you would like to add to that?

Kathryn COLLIER: No, I think we have covered most in that opening statement. My area of specific interest is driver behaviour. As Ingrid said, we know it is not a one-solution problem—multiple solutions are required, and there is a lot of work that needs to be done. I think certainly COVID changed travel behaviours for a lot of people and has continued to do so—a lot of people have changed the way they will work for ever. The enormous amount of infrastructure work that is going on in Victoria I think has definitely impacted people's decisions on how they travel. With interruptions to train lines and things like that, we are seeing

probably more people driving that would not have driven, and also perhaps people who now only have to go to the office a couple of times a week are making different decisions than what they did pre COVID. I think we can safely assume that working Monday to Friday in the office for everybody is not going to return. I think there are definitely going to be changes forever. And that is not a bad thing, it just means we have to adapt the way we move around and the decisions we make in terms of that infrastructure.

The CHAIR: Thank you, and that is exactly what this Inquiry is trying to unpick and unravel—what behaviours have changed from COVID. Thank you. I am sure there will be great questions for you today to unpick that. Deputy Chair, I might head to you first.

Kim O'KEEFFE: Thank you. Thank you so much for your submission. I found it so interesting and so detailed and so helpful—really grateful for that. I wish we could get all of that messaging out straightaway, because it is such important data. Thank you so much. I really had another good read of it last night, so thank you for that. My question really is around getting messaging to community, because we have seen such a shift in traditional media when it comes to promotion and connecting to the community. What would be the most effective way to deliver road safety messages to the community that we know will get to them?

Kathryn COLLIER: I have had exactly those conversations with a number of people in the sector, and certainly the people that already perhaps follow the road safety agencies are the converted. The problem is reaching the people that we are not connected with, and, like you said, people do not consume the media in the traditional ways they used to. I think there is definitely opportunity for VicRoads in particular, being the licensing agency, to perhaps communicate those messages as more and more people have a myVicRoads account, if you like.

We have seen learner permits move to an online format here, and that has been quite successful. The opportunity that came with that is then to have a whole module of information that the learner drivers have to work through before they can undertake their test. There may be opportunity perhaps that we look at a shorter licensing period and that before people can renew their licence maybe they can opt in to some information in terms of changes to road law. We know that there have been a number of changes in the last few years and this year in particular around mobile phone use. I think that was communicated quite well in my life, but then I still listen to the radio and I still read the newspaper. The people that do not do that—it is how do we connect with them. I think we have to look at the opportunity that we have in that online forum now, and maybe government needs to pay for YouTube advertising or social media advertising and so forth. But again, you still need people to actually pay attention and absorb that information.

The CHAIR: Thank you. Thanks so much for that. Jess, we might go to you next.

Jess WILSON: Thanks, Chair. Thanks so much for appearing today and for your submission. I picked up the point you made—and we have not heard a lot about this during the Inquiry, but I suspect it is a consequence of COVID—around the uptake of meal delivery and delivery drivers and the gig economy in that respect. I am keen to get your perspectives on how that growth has happened post COVID and the impact on road usage and vulnerable road users.

Kathryn COLLIER: Ingrid, did you want me to start?

Dr Ingrid JOHNSTON: No, you go, and I will jump in if I want to.

Kathryn COLLIER: Okay, lovely. So, look, I think that has definitely been a huge growth area in terms of movement of people and the way people have changed consumption. Definitely getting food deliveries was something that happened a lot during COVID and post COVID. Traditionally the people that work in that sector are often newish to the country and are working multiple jobs. Also, you know, we even see it with Uber drivers. In that sector the licensing and the training when you sign up as a driver or a rider is more around the company that you are working for—so there is a number of them—rather than road safety and training and things that you need to look for. So I think there is an opportunity to speak with those companies and ensure that they perhaps incorporate some actual training in how to keep them safe rather than just, 'We expect you to deliver within X number of minutes, and this is what we want from you.' It is very easy from those companies' perspectives because they are generally an online platform—they are not a physical presence—and everything is done virtually. So I think there is definitely an opportunity to ensure that those people are covered the same as they would be if they worked in any workplace and to make sure that they are safe.

The CHAIR: Thank you. Ingrid, did you have anything extra?

Dr Ingrid JOHNSTON: No, only that I was thinking that there is such a proliferation of those sorts of deliveries happening now on bicycles and e-bikes, and they are largely vulnerable road users. It is not really that we have added cars; we have added a whole lot of the vulnerable road users to that, and they are time pressured because of the very nature of what they are doing. Then when you have got companies able to say, 'Well, 5 minutes after your last delivery'—or whatever the cut-off is—'you're no longer our problem until you are making your next delivery,' we really need to look at what we can do in the regulation space to protect them.

Kathryn COLLIER: Yes, and definitely we know that the vehicle as a workplace is a high-risk area across the board. Of course the people who work on e-bikes and as vulnerable road users are even more vulnerable and susceptible to being injured and/or killed. We have seen some horrific numbers in terms of delivery drivers. Often English is a second language for them as well, so whether that has a bearing on the information that they are receiving I am not sure.

The CHAIR: Thank you for that. Anthony, we might head to you next. Thank you.

Anthony CIANFLONE: Thanks, Chair. And thank you for appearing and thank your submission. It is very comprehensive, and I just wanted to acknowledge your work on that too. Your submission talks about co-design with other sectors as part of the road safety approach, and it suggests bringing in stakeholders from the youth, mental health and alcohol and other drug sectors as well as part of the road safety discussion. Can you just talk a little bit about why you think they should be brought in more than what they currently are and what the benefits would be going forward in having those types of stakeholders as part of the discussion and decision-making process?

The CHAIR: Ingrid, do you—

Dr Ingrid JOHNSTON: Yes. I mean, I think it goes to what we were saying about the complexity of causes of crashes and responses required. COVID really highlighted that there are all sorts of things going on in people's lives. The impacts of things like changes in alcohol and other drug use and in mental health issues and financial stress—they can be things that you take with you when you then get into a vehicle, and then that is affecting the way that you are able to concentrate on the driving task. If we going to reach our goals in terms of eliminating road trauma, then we have to be using every tool we have got. That is also going to include the other things that are going on in people's lives and figuring out what impacts that that is having for road trauma, first of all, so that we can understand the extent of the problem and then also be co-designing solutions. Because if you have got someone who is persistently getting behind the wheel when they have been consuming alcohol, for example, that is not only an issue for their road safety behaviour, it is potentially also an issue in all sorts of other aspects in their lives, and liaising with alcohol services could be something which is beneficial in co-designing solutions that work for more than one element. If we are both addressing the problem, then maybe there are solutions which are in common as well.

The CHAIR: Kathryn, do you have anything to add to that?

Kathryn COLLIER: No, I would agree with that. I think a lot of health issues cross over into driver behaviour and also road behaviour in general. If we look at the traditional relationship between vehicle drivers and cyclists, there is a little bit of an us-and-them mentality. You often hear of people saying, 'Well, I'm paying for the roads and I'm paying for this.' But I think changing the public perception—the road space is not just for cars. Traditionally it has been designed predominantly for cars, but I think we have in the last number of years certainly come to the realisation that if we want to make sure everyone is safe, then we have to look at that holistic approach. That comes down to behaviour as well as infrastructure. Behaviour is one of the hardest things that we can affect, and certainly, as we discussed earlier, traditional methods of communicating with road safety campaigns—looking out for motorbikes and looking out for cyclists—are quite challenging now. The road safety agencies I think are quite challenged in how they do communicate that information.

Making sure that as our new drivers come into play we look at that space again holistically—are you driving when you are not tired? If you drive when you are angry or if you are running late, all of those things affect your decision-making. Certainly if you throw drugs and alcohol into the mix, that is a whole different thing. Traditionally there are some people who are serial offenders, and probably there is not a lot we can do there. I

mean, you can take people's licences away and you can impound their vehicles and you can do all sorts of things, but those people traditionally fall outside the rule, if you like. They are usually the exception.

I think communicating with the broader public and letting people know that you have a responsibility as a driver to look out for other road users, for pedestrians, for cyclists and for motorbikes and making sure that that is incorporated from the outset when you are learning to drive and not that they are seen as a nuisance—we all have a right to use the infrastructure that is there and we all have a right to use it safely. I think changing that attitude is something.

It definitely can happen. I mean, if we look at the way people behaved many years ago in terms of alcohol and driving, it was not socially acceptable but it was almost socially acceptable. Now most young people are very responsible in that space, so I think we have come a long way in making those messages stick and people understanding that they have a responsibility to be sober, and even double zero when they are probationary drivers, which is fantastic. I think just broadening that to make sure that if you get put on medication or if you have a medical situation, it is your responsibility to make sure that you are still going to be a safe road user, and that could be also if you are a cyclist or if you are a motorbike rider. I think we have to make sure that we make these decisions for all road users, not just for drivers.

Dr Ingrid JOHNSTON: I would also add that I think that talking to other sectors can also help when we are trying to get community support and acceptance for measures. Everyone has different motivations for what they support and why, and different understandings of issues, so if you think about wanting to, for example, lower speed limits somewhere, if you are just talking from a road safety angle, well, that is one. And yes, speed limits being reduced will mean that you are taking energy out of a potential crash and the consequences will be less severe—you are less likely to have the crash in the first place. But if you are talking about the environmental benefits with reduced emissions, that is going to speak to a whole new audience, and if you are talking about the benefits in terms of making vulnerable road users feel safer and children being able to walk and cycle to school and feeling safer to do so, that again is an entirely new audience for the same message of 'Should we be reducing the speeds in this area?'

The CHAIR: Thanks, Ingrid. Thanks, Kathryn. Wayne, I might go to you next. Thank you.

Wayne FARNHAM: Thank you, Chair. Thank you for your submission. It was very good. I will have a chat about the increased use of public transport, and I think one way we can all agree to avoid trauma and congestion is public transport. But it seems as though it has not returned to prepandemic levels. I would like to know why that is. How can we encourage people to get back on the public transport system?

Kathryn COLLIER: I would certainly say that I think probably one of the reasons that a lot of people have not returned is because of that infrastructure work that I referred to initially. If you have got to drive to the station, then get on a bus and then from that bus you go to another station and then you get on the train, sometimes you could be doubling your commute time, so a lot of people have probably not returned to that. They are waiting for all of that work to be finished. And I am not saying the work is not necessary. I think there are some particular train lines that have been impacted more than others, and certainly a train line that I use has been that way. In some instances there have actually been some very good solutions put in place to move people around, but in other instances, as I said, if you are going to change your commute from 45 minutes to an hour and 40, most people are going to go, 'Well, you know what? I'm either going to work from home or I'm going to jump in my car once a week when I have to go into the office because I have to, and the rest of the time I'll work from home.' I also think during COVID a lot of people obviously did not want to use public transport because they did not want to get sick. We saw a lot of single drivers in Vic. Also, we saw a lot more vehicles on the road with one person in them, rather than those people returning to public transport.

The CHAIR: Thank you. I am mindful for time, so I am going to jump to the next question, if we can, to get as many questions out as we can for this session. John, I might head to you next, please.

John MULLAHY: Excellent, thank you. Thank you both for your submission. Your submission goes into those little objective data to determine the impact of COVID-19-related changes to the safety of vulnerable road users. My question is around data quality and how we can get access to better road trauma data and the quality of that data to improve road safety planning.

Kathryn COLLIER: I think I will probably let Ingrid speak to that, but I know it is something that we have discussed quite extensively at the college. But Ingrid is probably more expert in that area.

Dr Ingrid JOHNSTON: Sure. I mean, the quality and availability of data on road safety is a key topic nationally, and there is great variability among the jurisdictions in terms of what is collected and the quality of what is collected, and then how that translates into what is available to form a national picture. But then when you are trying to understand complex issues, like the impacts of COVID, you want to get into a whole extra level of detail that is likely to only be available at a jurisdictional level really. In Victoria, for example, you will be starting to rely very heavily on TAC data, but it also is a fast-moving—I mean, road safety is fast moving anyway; if you just think about e-scooters now compared to 10 years ago, it is a changing space, and we have to keep up with that in terms of looking at what type of data we are collecting and why. Then you throw in something like COVID and it highlights all sorts of other areas that you need to be looking at in order to form a good understanding of this complex picture.

Some of it is going to be about improving the road safety data that we are collecting, all the way from when the police officer is at the scene of a crash and understanding exactly what questions they should be asking in order to determine why did the crash happen, not just from the perspective of should there be charges laid but from the perspective of how we can prevent this crash from happening again. It needs better data from the hospitals in being able to reliably identify that an incident was road trauma, and better linkages between those two so that you can put the different elements of the puzzle together, but then also to make better use of data linkage more broadly so that we can start drawing in the data that we have got available from other sectors, such as the alcohol and other drugs sector or whatever.

Kathryn COLLIER: And also bearing in mind that in Victoria there will be a whole range of crashes that are not recorded at all from a government perspective because there is no requirement to report a motor vehicle collision unless someone has been injured. That is a whole other statistic that we are not really capturing. Do we need to capture it? I do not know. But that is a whole different question again.

The CHAIR: John, do you have a follow-up?

John MULLAHY: Just a follow-up on that. Do we have access to insurance companies' data that feeds back in? I know we have got TAC access, but do we have access to private insurance companies' data, where that has not been reported to police but someone has made a claim to fix a car?

Dr Ingrid JOHNSTON: I think that would depend on the individual insurance company and their willingness to share that data.

Kathryn COLLIER: Absolutely.

Dr Ingrid JOHNSTON: Yes. What is theoretically available, especially in the private sector? A lot. But what is readily available—yes, a different question.

John MULLAHY: Okay.

Kathryn COLLIER: Yes.

The CHAIR: Thank you. Dylan, we might squeeze one in—we are really pressed for time, but if you can ask your final question, that would be great.

Dylan WIGHT: Sure, and I will be quick because I am aware of time. Your submission goes to the significant increase since COVID in the purchase of SUVs and light commercial vehicles and the significant percentage of the fleet that those vehicles now make up. I am just wondering how the Victorian Government can work with different jurisdictions to try and sort of discourage or limit the sale of large SUVs.

Dr Ingrid JOHNSTON: Yes. It is a problem right around the country. In other areas of the world, cities have tackled this head-on by doing things like having road user charges for coming into the CBD: if you are coming into the CBD in a vehicle which is over a certain weight or size or whatever, then you have charges applied. If you are coming in because you are delivering goods in a truck, that is one thing, but if you are coming in because you feel like driving around in an enormous SUV in the middle of the city for no particularly good reason, then you might think that a road user charge is a good reason not to. Obviously,

importation taxes and things could be looking at the issue of vehicle size as well in a way that they are not necessarily currently.

Kathryn COLLIER: I might just add to that as well that certainly there is quite a difference between vehicles if you look ANCAP ratings in terms of pedestrian and vulnerable road user safety. Some companies do it way better than others in terms of softer metals, that sort of thing. So, yes, size is an issue, but it is not the only issue. A smaller vehicle that is not particularly well designed in terms of the impact on vulnerable road users could score way worse than a larger car that has the softer bonnet and the crumple zones that are more protective of the people around the vehicle as well as the people in the vehicle.

Dylan WIGHT: Sorry, Chair. I know that we are busting for time, but I think this is an important follow-up. In respect to a road users charge, I assume that would look something like: somebody that has a large SUV or four-wheel drive in an urban area would have an extra charge when they go and register that vehicle. What about for somebody that is using that vehicle for recreational use on weekends et cetera?

Dr Ingrid JOHNSTON: I mean, there are different models of how you could do it. You could do it for adding to the registration fees. You could do it for allocating particular areas of the CBD, for example, where in order to go into there you actually have a charge, like they did in London. There are various different ways it can work depending on exactly what it is you are hoping to change in the particular area.

Kathryn COLLIER: And then I guess it is also looking at the data around those vehicles and the damage that they do—making sure that we are making good decisions around the statistical data of those particular vehicles. Some people have large vehicles because they need to tow something or they might be caravanners. That is a whole different road safety issue, and that is something that I work in as well. But a lot of people will have a vehicle not just because it is big but because it is fit for purpose for their requirements. I do not know that they are the people that would be driving into the city generally anyway.

The CHAIR: I am sorry to interrupt there. I think we could interview you all day, both of you. That has been absolutely insightful, and we really appreciate your submission and appreciate you answering the questions today. I thank you for your time.

Dr Ingrid JOHNSTON: Thanks very much.

Kathryn COLLIER: Thank you very much.

Witnesses withdrew.