Walking Safely

A Report to the Nation

Safe Kids WORLDWIDE®

August 2012

EXECUTIVE SUMMARY

We take it for granted from our earliest years that our simplest way of getting from here to there is walking. From our first steps as toddlers to our first walk to school, we are taught to understand the risks and precautions that are necessary to get where we are going safely. Walking requires motor skills, decision making and an understanding of the area around us.

It seems so simple, yet as we teach children to navigate around cars, roads, cyclists, traffic signals, directions and more, we can appreciate that a walk today requires more than looking left, right and left again. Does the motorist see us as we cross the street? Is there eye contact with the driver, or is the driver distracted by using a mobile device? Is a motorist driving too fast to stop for a traffic light or crosswalk? Walking safely requires the focused attention of both walkers and drivers.

It also deserves the attention of our nation. This is the third report in a series conducted by Safe Kids Worldwide with the support of FedEx to study walking safety. This report examines trends in motor vehicle-related pedestrian injuries and deaths among children ages 19 and under in the United States.

The good news from the report is that there has been a 53 percent decline in the pedestrian death rate and a 44 percent decline in the pedestrian injury rate among children ages 19 and under over the past 15 years. Yet when we take a close look at the death and injury rates over the most recent years, progress has slowed, and in 2010, appears to have changed course.

Each day, an estimated 61 children in the United States ages 19 and under are injured as pedestrians – more than 425,780 children in the last 15 years. In 2010 alone, 501 child pedestrians were killed. Since 1995, nearly 11,053 children have died as a result of being hit by motor vehicles.

The most significant finding in this report is that the leading at-risk age group has shifted since 1995 when 5 to 9 year olds sustained the most injuries, to today when teens are at greatest risk. The death rate among older teens is now twice that of younger children.

Safe Kids hypothesizes that the increase in pedestrian injury affecting teenagers is related to distraction, caused by the use of electronics and hand-held devices while walking—just as there is an epidemic of drivers distracted by the same stimuli. A very recent study issued by the Consumer Product Safety Commission (CPSC), states there is an alarming trend in injury risk involving distracted walkers.

Our nation's youngest walkers, those 1 and 2 years old, are especially vulnerable, as their exuberance in their new mobility knows no (safety) bounds. Deaths among children in that age group are second only to teenagers.

What are the steps we must take to protect our children as we walk into the future? Safe Kids has developed the following call to action to protect children from pedestrian deaths and injuries.

CALL TO ACTION

- Research must be conducted to determine the causes of the negative trends and uncover effective means to reverse them.
- Stakeholders must cast a new focus on education and behavior change about pedestrian safety for kids 14 to 19, while continuing education and programs that have been effective for younger kids.
- Government at all levels must invest in infrastructure to make walking safer for kids of all ages, especially in and around school zones.
- Each of us must commit to walking and driving without distraction. Distraction due to mobile technologies is an epidemic resulting in both deaths and injuries and must end.

Continued evaluation of behavior change efforts, environmental improvements, and advocacy successes will help create a future where pedestrian safety is greatly improved.

PEDESTRIAN SAFETY

BY THE NUMBERS

THE GOOD NEWS IS

53%
THE CHILD PEDESTRIAN **DEATH RATE** IS DOWN 53% SINCE 1995

44%
THE CHILD PEDESTRIAN **INJURY RATE** IS DOWN 44% SINCE 1995

34%
INJURY RATES FOR KIDS 5-9 WERE DOWN 34% IN THE LAST FIVE YEARS COMPARED TO THE PREVIOUS FIVE YEARS

Most at risk are TEENS

In the last five years, injuries among 16-19 year olds **increased 25%** over the previous five years

Could digital devices be a cause?

75% of 12-17 year olds owned cell phones in 2009, up from 45% in 2004

WALK SAFELY

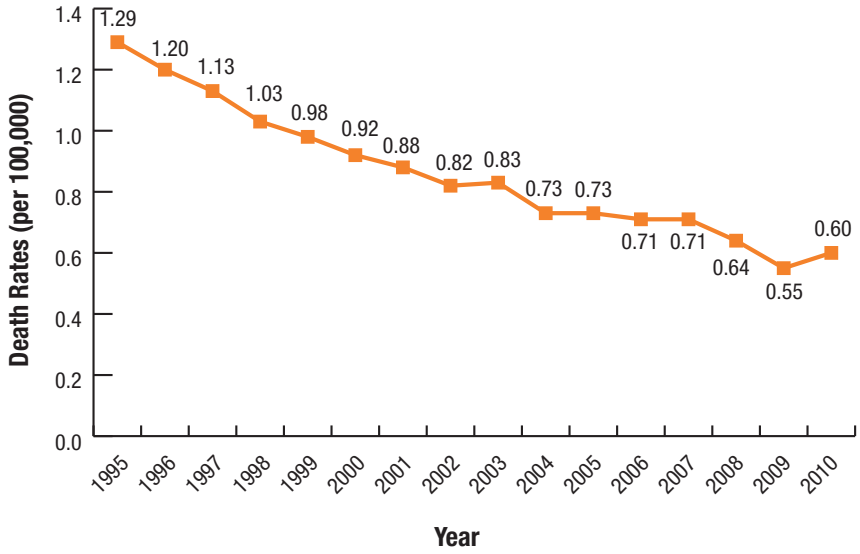
61 kids are hit by cars every day in the United States. Every one of these injuries is preventable.
Learn how at safekids.org

THE FINDINGS

Trends: Good News and Bad News

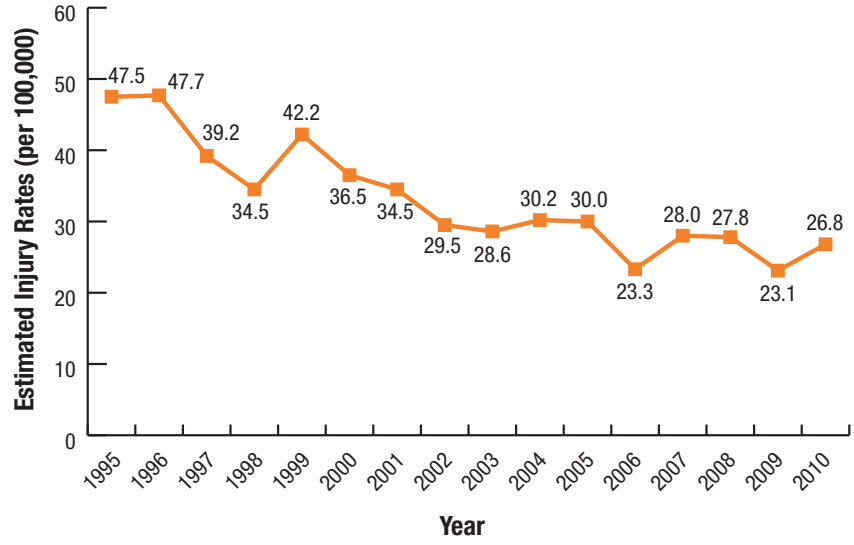
The good news is the death rate for pedestrians ages 19 and under has decreased from 1.29 deaths per 100,000 children in 1995 to 0.60 deaths per 100,000 children in 2010, as shown in Figure 1.[4,6,7,8]

Figure 1: Trends in Pedestrian Death Rates by Year, United States, 1995-2010, Children Ages 19 and Under



Similarly, during the same period, the injury rate among children ages 19 and under has declined from a rate of 47.5 per 100,000 to 26.8 per 100,000, as shown in Figure 2.[5,6,7,8]

Figure 2: Trends in Child Pedestrian Estimated Injury Rates by Year, United States, 1995-2010, Children Ages 19 and Under



Scope of Study

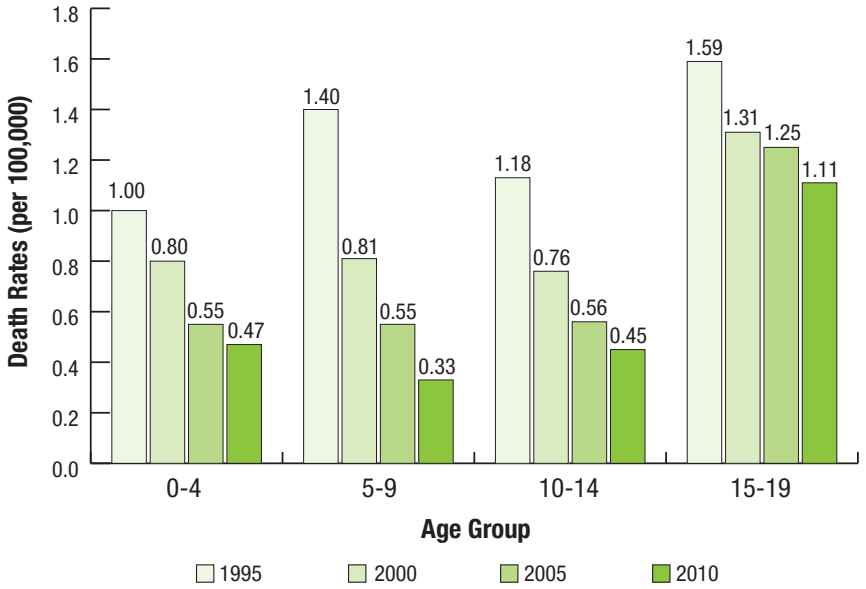
This report examines motor vehicle-related pedestrian injuries among children ages 19 and under in the United States. Fatality data was obtained from the National Highway Traffic Safety Administration's (NHTSA) Fatality Analysis Reporting System (FARS) database which is a compilation of annual nationwide databases of traffic fatalities.[4] Nonfatal data was obtained from NHTSA's General Estimates System (GES), which is based upon a nationally representative sample of motor vehicle crash police records.[5] Population data was obtained from the U.S. Census Bureau and combined with NHTSA's data to calculate rates.[6,7,8]

This progress represents a 53% decline in the death rate and a 44% decline in the estimated injury rate in the past 15 years.[4,5,6,7,8] Yet when we take a close look at death and injury rates over the most recent years, the trend lines flattened and increased slightly in 2010. This change is worrisome. The most recent data demonstrates the need for continued research into whether this is a sustained, upward trend, why the increase is occurring and what steps are needed to reverse it.

Differences in Death and Injury Rates by Year

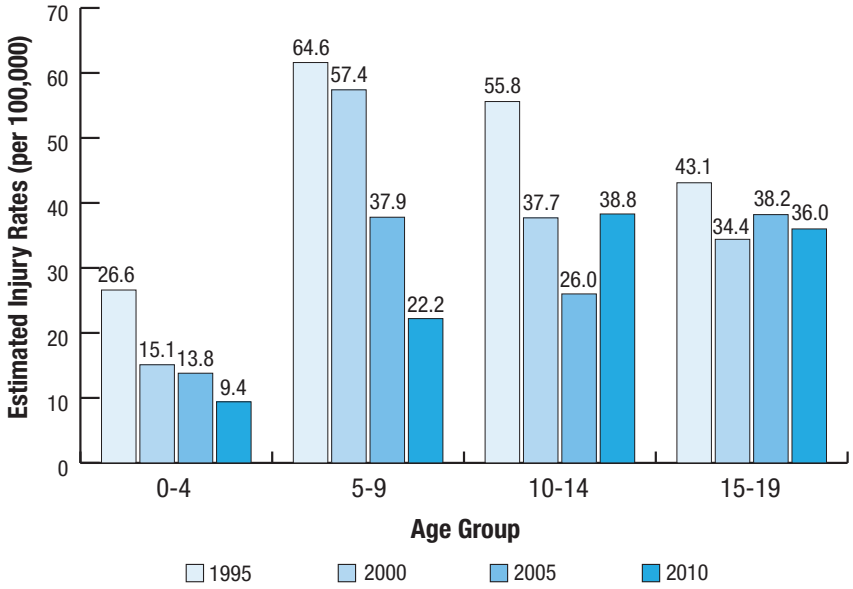
Safe Kids took snapshot views of pedestrian death and injury rates in five year intervals – 1995, 2000, 2005, and 2010 – in age groups 0 to 4, 5 to 9, 10 to 14 and 15 to 19. As shown in Figure 3, the decline in deaths is evident across each age group.[4,6,7,8] Today, the death rate among older teens is twice that of younger kids – 1.11 deaths per 100,000 population as compared to .47, .33, and .45, respectively, in younger age groups.[4,6,7,8]

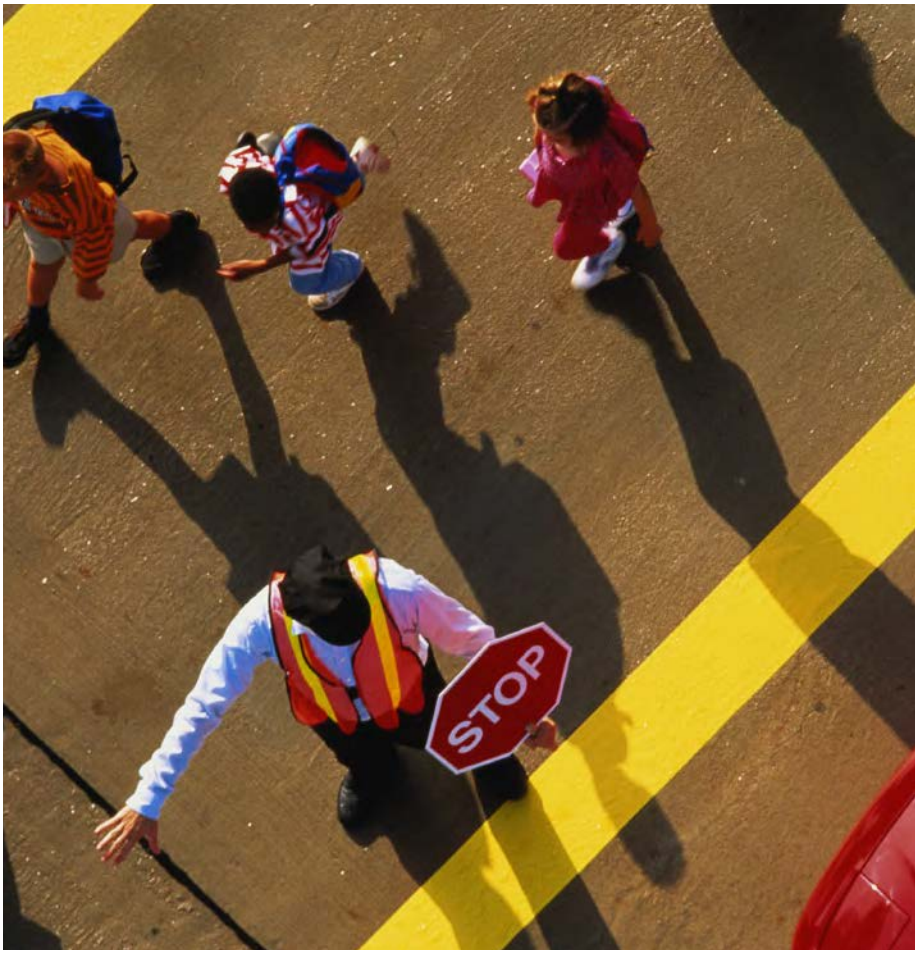
Figure 3: Trends in Child Pedestrian Death Rates by Age Group, United States, 1995-2010, Children Ages 19 and Under



There are similar trends in the estimated nonfatal injury rates by age group, as shown in Figure 4.[5,6,7,8] Some age groups fared better and others worse. In 1995, 5 to 9 year olds led the nation in injury rates. Today, injury rates among that population are down 65%. Among the other age groups, the progress has been less dramatic.

Figure 4: Trends in Child Pedestrian Estimated Injury Rates by Age Group, United States, 1995-2010, Children Ages 19 and Under

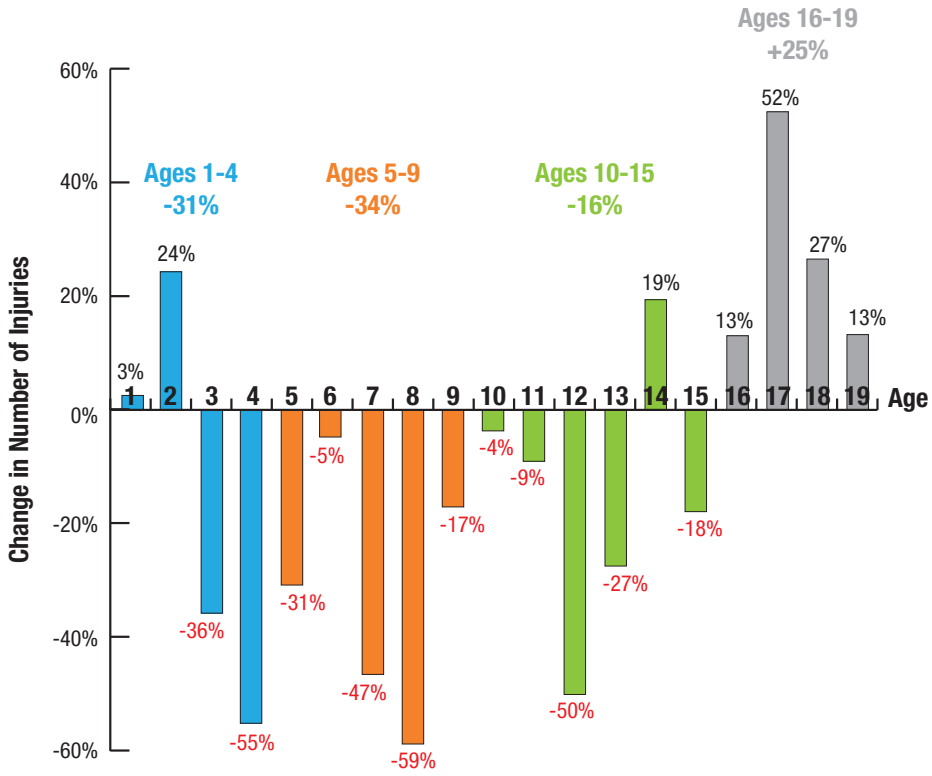




Trends in the Number of Injuries, 2001-2005 versus 2006-2010

An assessment of the change in the number of injuries among children ages 1 to 19 when comparing two recent five-year time periods, 2001-2005 and 2006-2010, reveals that new walkers and older teenagers are at ever-increasing risk. As shown in Figure 5, injuries among both 1 and 2 year olds increased over this time period. Further, there was a 25% increase in injuries among 16 to 19 year olds in the most recent five years as compared to the previous five years.[5] Conversely, injuries decreased 34% for kids ages 5 to 9 and 16% for kids ages 10 to 15 during these two time periods.[5]

Figure 5: Change in Number of Injuries Among Children Ages 1-19, 2001-2005 Versus 2006-2010



Safe Kids believes pedestrian distraction is a critical factor in this increase in injuries among older children. These findings coincide with the increased availability of mobile technologies mid-decade. Older kids, smart phones in hand, cell phones and music in their ears, may be stepping into roads without paying appropriate attention to the risks surrounding them.

Trends in Gender Differences

Males continue to be overrepresented in pedestrian injuries and deaths, yet less so in recent years.[6,7,8,13,14] Figures 6 and 7 show that from 1995 through 2010, males were at increased risk of death and nonfatal injury when compared to females.[6,7,8,13,14] Over time, the gender gap narrowed considerably for injuries, but less so for deaths.[6,7,8,13,14]

Figure 6: Trends in Child Pedestrian Death Rates by Sex, United States, 1995-2010, Children Ages 19 and Under

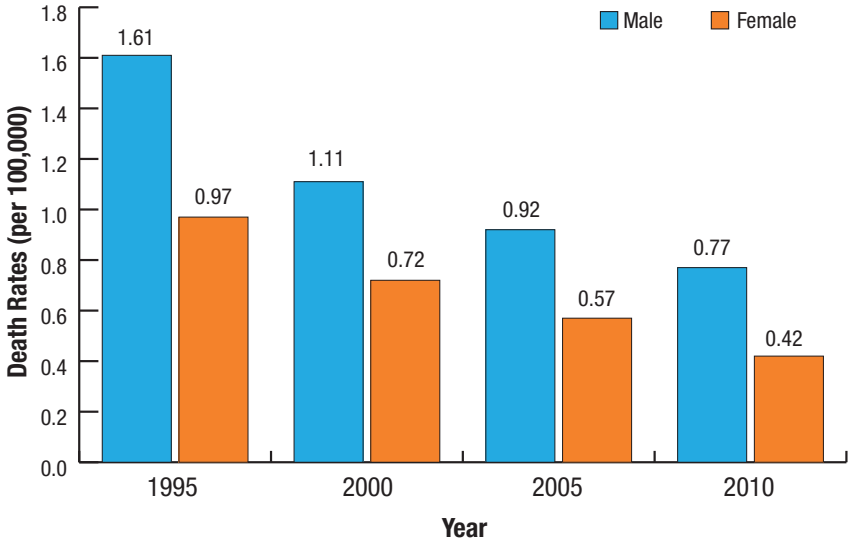
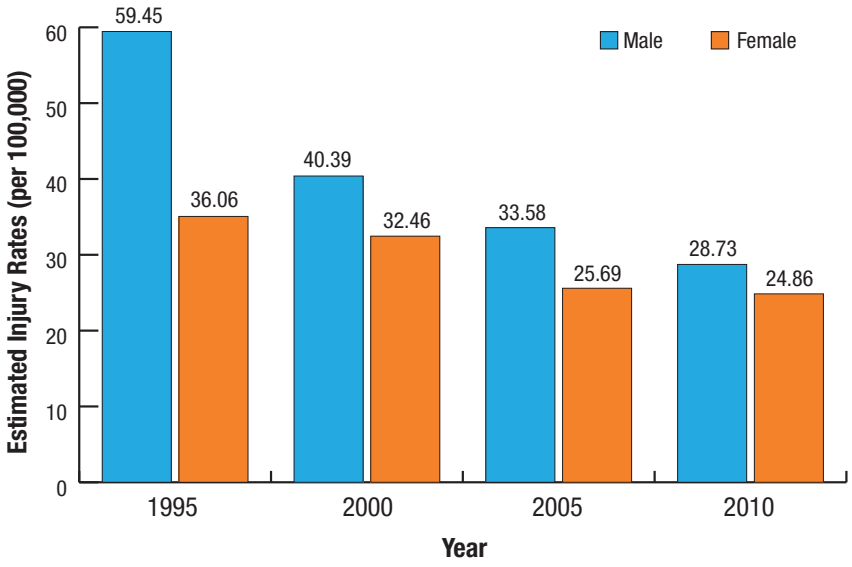


Figure 7: Trends in Child Pedestrian Estimated Injury Rates by Sex, United States, 1995-2010, Children Ages 19 and Under

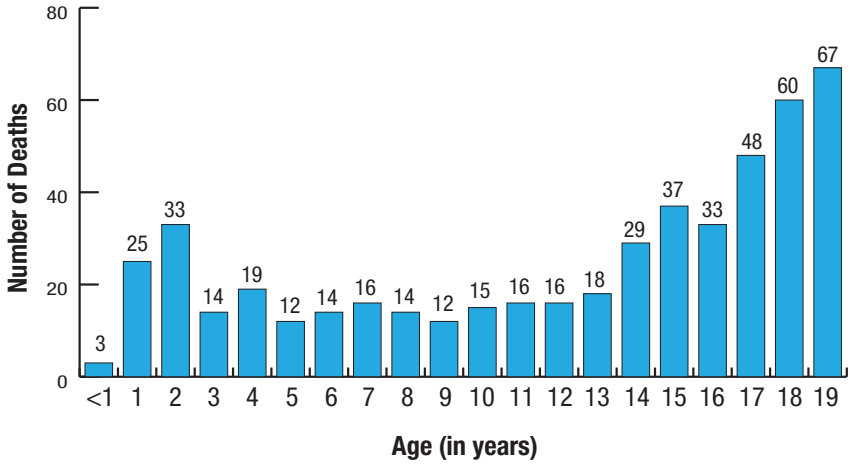


2010 Snapshot for Pedestrian Deaths and Injuries

Who is Being Killed?

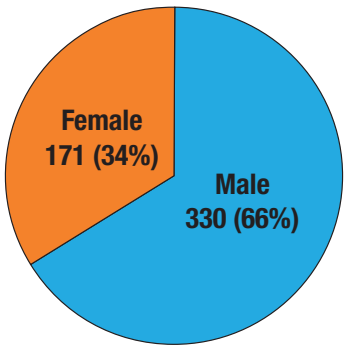
By Age: In 2010, the number of children ages 19 and under who were killed as pedestrians by motor vehicles was not evenly distributed by age, as shown in Figure 8.[4] Of the 501 children who died, children ages 14 to 19 accounted for nearly 55% of the deaths.[4] Children ages 1 and 2 years old made up nearly 12% of the deaths.[4]

Figure 8: Child Pedestrian Deaths by Age, United States, 2010, Children Ages 19 and Under



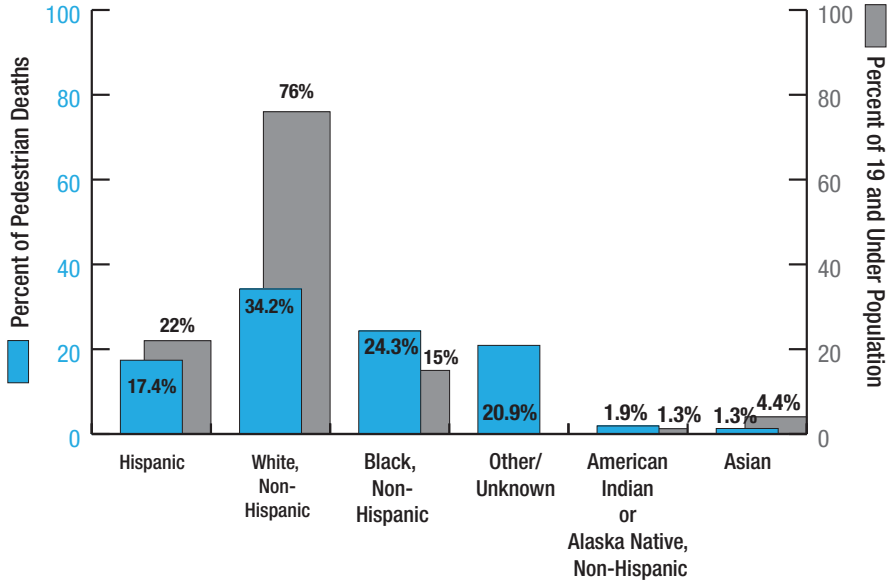
By Gender: Consistent with past trends, males made up a majority (66%) of deaths in 2010, as shown in Figure 9.[15]

Figure 9: Child Pedestrian Deaths by Sex, United States, 2010, Children Ages 19 and Under



By Race and Ethnicity: As depicted in Figure 10, white, non-Hispanic children experienced approximately 34% of pedestrian deaths, yet comprise 76% of the 19 and under population in the USA.[16,17] Approximately 24% of the children who died were black, non-Hispanic, but this racial and ethnic group makes up 15% of the 19 and under population.[16,17] Hispanics sustained about 17% of the deaths, but make up 22% of the 19 and under population.[16,17] Our analysis is tempered given that one in five children who died as a pedestrian was classified in the "other/unknown" race/ethnicity category.

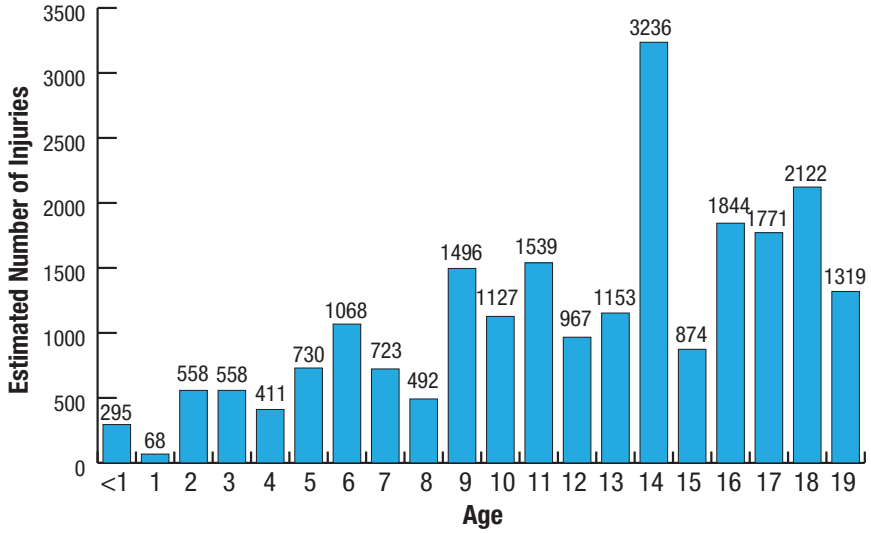
Figure 10: Child Pedestrian Death by Race/Ethnicity, United States, 2009, Children Ages 19 and Under



Who is Being Injured?

As children age, they are generally at increased risk for pedestrian injuries, as shown in Figure 11.[5] In 2010, children ages 14 to 19 years of age accounted for 50% of all the injuries among children ages 19 and under.[5] Children aged 14 years sustained the most injuries by far that year. Yet, analysis of previous years' statistics indicates that this teenage group does not always rank highest; sometimes other teenagers suffer the greatest number of injuries.[5]

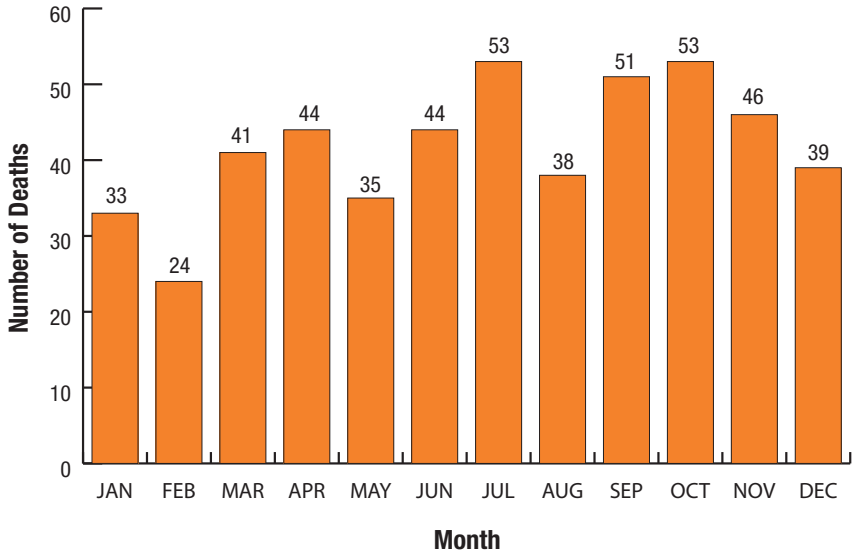
Figure 11: Estimated Child Pedestrian Injuries by Age, United States, 2010, Children Ages 19 and Under



When and Where?

As shown in Figures 12 and 13, there is a decrease in pedestrian deaths and injuries in the winter followed by an increase in the warmer months.[11,18] Even within this general pattern, however, there is some variability in the number of deaths and injuries. For example, Figure 12 shows that children are most likely to be killed in the months of July, September and October and least likely in February.[18]

Figure 12: Child Pedestrian Deaths by Month, United States, 2010, Children Ages 19 and Under



As shown in Figure 13, the number of nonfatal injuries is highest in the months when most students end and begin the school year (June, August and September), peaking in September.[11]

Figure 13: Child Pedestrian Estimated Injuries by Month, United States, 2010, Children Ages 19 and Under

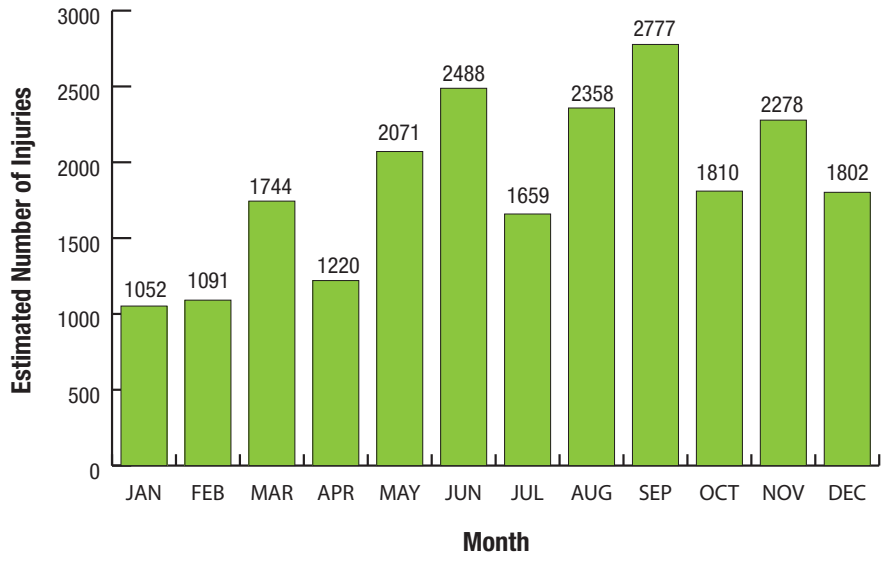
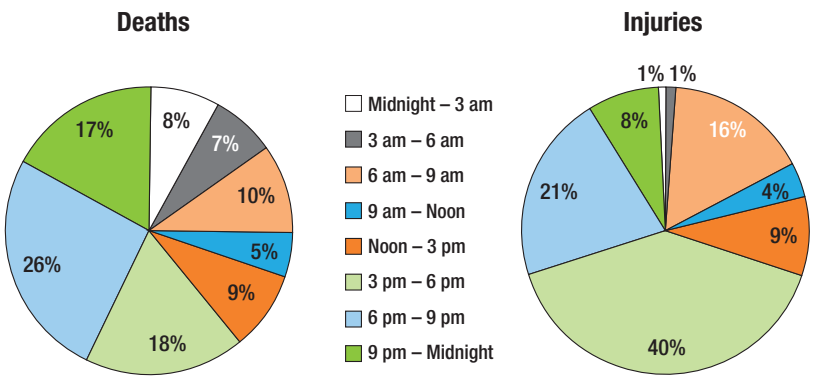


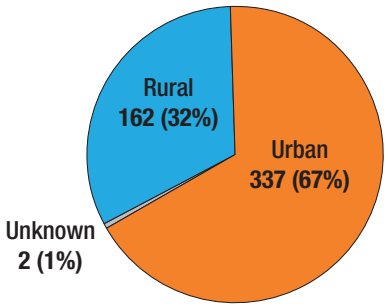
Figure 14 indicates that child pedestrians are most often killed or injured in motor vehicle-related incidents in the afternoon and evening.[12,19] Of the children killed, more than 44% of the incidents occurred between 3 pm and 9 pm.[19] Among those nonfatally injured, kids are twice as likely to be injured from 3 pm to 6 pm than any other time of day.[12] The next largest number of children (16%) are injured in the morning between the 6 am and 9 am, a common time that children travel to school.[12]

Figure 14: Child Pedestrian Deaths and Estimated Injuries by Time of Day, United States, 2010, Children Ages 19 and Under



In 2010, a majority, 67%, of deaths occurred on urban roads.[20] This is consistent with the literature which states that children in low-income, densely populated, urban residential areas are at a substantially higher risk of pedestrian-related incidents.[21]

Figure 15: Child Pedestrian Deaths by Location, United States, 2010, Children Ages 19 and Under



In terms of location, 39% of child pedestrians died as a result of being hit in intersections in 2010 and 56% were killed in other locations on the road.[22] In addition, 76% of deaths occurred in locations without traffic control devices such as pedestrian crossing signals, stop signs or other warning signs.[23]

Among children killed, 8% of cases involved speeding by the driver; in all other cases, the driver was found to be traveling within the speed limit.[24] Yet speeding data as a risk factor for pedestrian crashes may not be reliable, as it often relies on witness reports or driver disclosure.

EMERGING ISSUES

Why is it that older children are more at risk today?

Distraction

Distraction itself is not new, but among drivers and pedestrians it is a growing danger.[30] Distractions such as eating, smoking, listening to the radio, talking to a fellow passenger or anxiety about being lost, late or both have been issues for many years. Today, there is a world wide web of diversions: looking up directions on a smartphone, reading an article on a tablet, talking or texting on cell phones. U.S. Secretary of Transportation Ray LaHood has been passionate about confronting the challenge of distracted driving, the twin danger to distraction on foot. He said:

> "People continue to assume that they can drive and text or talk at the same time. . . . The safest way to get from one place to another is to hang up and drive. Powering down your cell phone when you're behind the wheel can save lives - maybe even your own."[25]

Or the life of a child.

According to NHTSA, in 2010 more than 3,000 people were killed and 416,000 injured in motor vehicle crashes involving a driver who was distracted in some way.[26] Exploring distraction that directly endangers children, Safe Kids conducted an observational study of more than 41,000 drivers in school zones in 2009 and found that one in six drivers were involved in conduct that could be distractive.[27]

In addition, nearly 20% of fatalities involving a distracted driver in 2009 included use of a cell phone.[28] People who text while driving are 23 times more likely to crash than those who drive without distraction.[29] While these studies relate to distracted drivers, there is cause to see analogous results among distracted walkers.

A recent study by the U.S. Consumer Product Safety Commission reported that in 2011, 1,152 people of all ages were treated in hospital emergency rooms in the U.S. for injuries suffered while walking and using a cell phone or some other electronic device. Reports of injuries to distracted walkers in emergency rooms have more than quadrupled in the past seven years, and are believed to be underreported.[9] Another study found that between 2004 and 2011, 116 pedestrians were hit by vehicles while wearing headphones or ear buds; more than a third of those injured or killed were younger than age 18.[31] Research from the Pew Charitable Trust revealed that 75% of 12 to 17 year olds now own cell phones, up from 45% in 2004. Today, 72% of teens use text-

messaging as compared to only 51% of teens in 2006. One in three teens sends more than 100 text messages a day.[32]

A 2009 study by researchers at the University of Alabama used a simulated road environment to evaluate road crossing behaviors among children while they were distracted by a phone conversation.[33] The study found that while on the phone, children were less attentive to traffic, waited longer before deciding to cross the street, left less time in the decision to cross the street when there was an approaching passing car and ultimately experienced more collisions and close calls with the virtual vehicles.[33]

The increase in the nonfatal pedestrian injury rate among older children may provide further evidence of the negative impact that distraction has as children multi-task on sidewalks and intersections.[5,33] Middle school-aged children, those who are more likely to cross roads independently, may be at increased risk due to the likelihood that they have their own cell phones.

More research is necessary to expand our understanding of the risk associated with distracted walking, who is in the greatest danger and what the most effective solutions will be.

The Number of Children Walking and the Distance They Travel

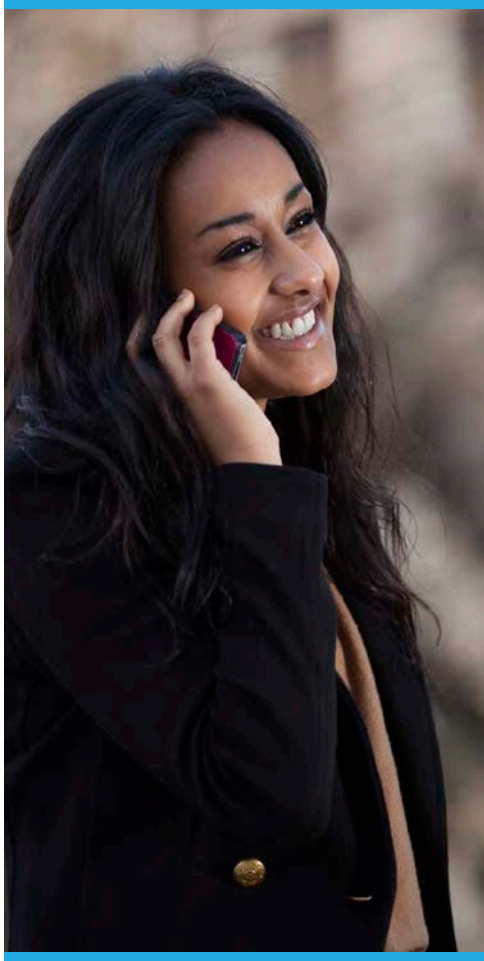
The National Center for Safe Routes to School found that the number of children walking to school has decreased dramatically, potentially decreasing their exposure to vehicles and contributing to the decline in pedestrian deaths.[34] In the late 1960s, nearly 50% of school-aged children walked or biked to school, while in 2009 this number declined to only 13%.[34]

On the other hand, the Federal Highway Administration's National Household Travel Survey indicates the total number of miles traveled on foot by children ages 5 to 15, including trips to school, religious services, recreational or social activities, increased from 2.8 billion in 1995 to nearly 4.1 billion in 2009.[35] Development of more exact exposure data will be important to determine the impact it has in pedestrian safety.

Urban and Rural Factors

Urbanization is a complex component of child pedestrian injury risk. Pedestrian risk increases in areas with more exposure to traffic, multifamily dwellings, a lack of playgrounds, major roadways, increased traffic volume, curbside parking and child attractions (e.g., ice cream vendors), among others.[36, 37]

The density of U.S. population centers continues to grow.[38] Today, more than 80% of the U.S. population lives in urban areas with many occupying the suburban neighborhoods.[38] Urban sprawl, or the relocation of inner city residents to outlying areas, may be increasing motor vehicle exposure in a broader swath of a metropolitan area—more and more people rely on vehicles for their commute to and from the suburbs and exurbs.[39] To counteract the changing environment, modifications in the roadway and land use planning will be critical, especially to protect children for whom even modest interventions have been found to provide substantial benefit.[36] Improving the design of roadways and pedestrian facilities, providing access to public transit options and facilitating walking through planned community design are just some of the options for getting people walking and walking safely.[40]



Rural areas have unique challenges when it comes to child pedestrian safety. While one-third of child pedestrian deaths occur in rural areas, the causes of these deaths are much different and require different solutions. The challenges include the following:

- Fewer paved sidewalks.
- Less signage and fewer streetlights.
- Higher speed limits.
- Longer distances between home and school.
- Longer distances to medical and trauma centers, increasing the risk of turning a severe injury into a death.[41]

Transportation policy must consider the challenges when designing transportation solutions for rural areas.

WHAT THE NATION HAS ACCOMPLISHED

In Safe Kids' first report on child pedestrian safety 10 years ago, a call to action was sounded which outlined critical steps for improving child pedestrian safety. The recommendations focused on several key areas: modification of walking environments, implementation of engineering measures to protect pedestrians, improvement in safety education, empowerment of all who play a role in child safety and finally enactment and enforcement of laws and regulations to promote safe walking. Undoubtedly, achievements have been made in several of these fields due to the contribution of various stakeholders, including transportation officials, health organizations and safety advocates.

Transportation Policy

Improved pedestrian safety has been approached at the national level. The Congressional passage of the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU) law in 2005 included provisions that made highways and streets safer for kids.[42] The SAFETEA-LU law established Safe Routes to School (SRTS) as a federal program that supports children walking and biking to school by funding both environmental modifications to create safe walking areas and education to encourage safe pedestrian behavior.[43, 44]

Safe Kids Engagement

Over the last decade, Safe Kids addressed pedestrians issues through its programs, research, advocacy and educational efforts.

Safe Kids Worldwide and program sponsor FedEx created the Safe Kids Walk This Way program to teach drivers and child pedestrians about safe behaviors and to create safer, more walkable communities. The joint initiative aims to encourage walking while preventing pedestrian-related injuries to children. Since the launch of the program in 2000, Safe Kids Walk This Way has reached families in thousands of communities around the globe. What started as a pilot program in three U.S. cities has grown to a global program established in ten countries: Brazil, Canada, China, India, Mexico, the Philippines, South Korea, Thailand, the United States, and Vietnam. Safe Kids Walk This Way is a multifaceted program that involves promoting pedestrian safety through education, awareness, environmental changes, research and advocacy.

The Safe Kids Walk This Way program has evolved to address the emerging issues in pedestrian safety. In the 2002 pedestrian research report, Safe Kids described the need to assess school zones and residential areas, as well as identify pedestrian safety issues and the methods to address these environmental dangers. In response, Safe Kids established the Environmental Task Force initiative in which Safe Kids partners with experts from the University of North Carolina Highway Safety Research Center to assess areas where child pedestrians are at risk. More than 60 permanent pedestrian safety interventions have been completed, including the installation of crosswalks, refuge islands and curb bulb-outs and the addition of pedestrian crossing signs, countdown timers and lights.

Safe Kids also encouraged parents to play an active role in the safety of their children walking to and from school through education and empowerment programs. Each year in the United States, Walk to School Day activities involve nearly 300,000 participants who hold educational assemblies, press conferences and large group walks to and from schools. The School Safety Committees program was later initiated to encourage partnerships between school officials, parents and students to determine an effective action plan to increase walking, physically improve pedestrian environments and/or advocate for the enforcement of traffic regulations in each community.

In 2008, Safe Kids launched PHOTOVOICE: Children's Perspectives on Road Traffic Safety, a photojournalism and participatory research project, which engages child pedestrians to identify risk areas and advocate for the creation of safer pedestrian environments. Photographs taken by students are presented to community planning bodies and other decision makers to encourage the prioritization of making pedestrian improvements. Since the inception of the program, Safe Kids coalitions in 110 communities have participated in the PHOTOVOICE project.

Safe Kids released a report titled *Distracted Drivers in School Zones: A National Report*, highlighting the findings of an observational research project focused on distracted driving in school zones in 2009. The report showed that one out of every six drivers is distracted while driving on the roads near schools. This is particularly dangerous because previous studies report that distracted drivers have the same diminished skills as drunk drivers.[27] Safe Kids has targeted messages to drivers about the necessity to avoid distractions while driving in school zones.

After the National Highway Traffic Safety Administration released data finding the rate of children ages 1 to 4 was on the rise for pedestrian-related accidents and motor vehicle crashes continued to be the leading cause of death for children from 3 to 14 years, Safe Kids implemented *Start Safe: A Safe Travel Program for Families of Preschoolers* in 2010. The program brings transportation safety education to more than 300 Head Start centers in at-risk areas across the United States to reach the caregivers of pre-school-aged children. At this age, constant supervision and parent knowledge is essential to prevent tragic injuries and deaths.

WHERE WE NEED TO GO: A CALL TO ACTION

Despite the tremendous progress made for the safety of child pedestrians, we cannot rest on our success and instead must continue to follow emerging trends—such as distraction—and innovate. Together, Safe Kids Worldwide and its 600 U.S. coalitions, transportation officials, health organizations, environment and safety advocates, and other stakeholders, can contribute the expertise and resources required to further reduce child pedestrian injury and death. The steps described below can serve as a framework upon which a system of effective and sustainable pedestrian safety efforts can be built.

Educate Populations at Greatest Risk — Teenagers

By the age of 10, children begin to cross streets without adult supervision. Parents continue to need information in order to be pedestrian role models so that children can learn how to take responsibility for their own safety. Yet given this study's findings, we must now turn our attention to changing teenagers' behaviors to walk more safely.

Research Root Causes and Solutions

Evidence-based pedestrian safety programs rely on well-designed studies. Many facets of the Safe Kids Walk This Way program have been informed by solid data analysis and best practice research. One of the first steps in reducing the pedestrian risk is to better understand the causes behind pedestrian injury and deaths. Building upon this information, education on pedestrian safety for these urban populations, combined with infrastructure improvements, will provide the next steps for reducing the burden of pedestrian-related injury in these areas.

Improve Walking Environments

There is a continued need for the creation of safer and more walkable communities. Infrastructure improvements to encourage walking will benefit the environment as well as the health of children and adults who walk in the area. Such improvements include but are not limited to: more sidewalks, crosswalks, effective signage (particularly around schools and in residential areas) and the creation of environments in which pedestrians can walk while separated from traffic.

Eliminate Distracted Walking

Given the rapid increase in the use of cell phones and other technologies, only a few studies have been conducted to determine the impact of walking while distracted by these devices. Even fewer have looked at the impact of distracted walking among children. Further research needs to be conducted in this field so that this emerging risk can be better

understood and reduced, especially in light of the 2010 data which revealed the risk to teenagers.

Safe Kids will join others in the safety community to tackle this important topic over the next year.

Advocate for Kids

We cannot step backwards in protecting our children from injuries and death as they walk and bike, activities that we should be encouraging, especially as child obesity rises and children become more sedentary.

Safe Routes to School

While a recently passed law governing highways, Moving Ahead in the 21st Century (MAP-21)[45] was progressive in dealing with some areas involving child safety, one area found to be lacking was how it moved the Safe Routes to School (SRTS) program to the side of the road. Going forward, Safe Kids will focus its advocacy efforts on returning SRTS to its former, more vigorous status with its own dedicated source of funding and mobilize its 600 coalitions to encourage states to use their flexibility to devote more resources to continuing the SRTS momentum.

Safe Kids has been in contact with the Congressional leaders who supported the SRTS program as the MAP-21 bill progressed through Congress, and will work with them to continue the 20 years of progress made under SRTS. The community which has supported the program is active and engaged and is well positioned to achieve a positive result for SRTS.

Full Federal Funding

As stated above, SRTS was progressive in many road safety programs that impact pedestrian safety. It set "authorized" levels for funding. However, this is meaningless if the Congressional appropriations process does not provide funding at the authorized levels. This is a challenge at a time when there is intense pressure to spend less and reduce the federal deficit. When it comes to child safety, Safe Kids believes that it is important to provide maximum, authorized funding. Full funding should be provided in the following programs:

- Distracted driving research and mitigation.
- The new program which includes funding for Safe Routes to School.[45]
- Programs to reduce drunk driving, especially involving repeat offenders.

Safe Kids will monitor the appropriations process relating to these programs. It will weigh in with like-minded national organizations and the effective grassroots effort of its own 600 coalitions on suggested levels of funding.

Conclusion

Creating safe and walkable communities for our children must be a national priority. While we've seen significant progress, we are committed to continuing this momentum. Through this study, we identified the uptick in child pedestrian injuries—especially involving teenagers. This study is valuable as an early warning signal. As in medicine, prevention and early diagnosis can save lives in the safety world. We must closely watch the statistics as they unfold and look for other ways to seek out data—such as working with partners at hospitals around the nation who are on the front line when it comes to injuries and fatalities. It is evident that public policy has had a positive role in this risk area, and we must move forward. Continued evaluation of behavior change efforts, education, environmental improvements and advocacy successes will enable us to pass on to future generations a culture in which walking safely can endure.

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Suggested Citation

Mickalide AD, Rosenthal KM, Green A, Baker JM. Walking Safely: A Report to the Nation. Washington, DC: Safe Kids Worldwide, August 2012.

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