

DETERMINANTS OF HEALTH (AIHW) FOR ROAD SAFETY – PEDESTRIAN EXAMPLE

Broad Features of Society

- **Culture** = Ear phones, mobile phones (SITUATION AWARENESS) + roads designed for vehicles in Australia not vulnerable groups, Behaviour - crossing at pedestrian crossings and lights. Value of safety when near a road.
- **Social cohesion** = Sharing of roads with motorist, cyclists and pedestrians
- **Social inclusion** = Vulnerable groups. Are pedestrians valued – by which group (Bronfenbrenner model)? School zones?
- **Political structures** = government funding? State/federal impacts? Liaising with key stakeholders - councils/governments/business/locals/schools?
- **Media** = Focus on fatalities

Environmental Factor

Natural – can impact where pedestrians cross, visibility (theirs and others of them)

Built – Road infrastructure, design, surfaces, congestion, speed zones, signage

Geographical location – *Specific to local/state context eg. Retirement villages, schools contexts – “amount of pedestrian crossings/traffic lights”

Remoteness – Urban specific

Social Economic Factors

Education = RYDA – is there a pedestrian session (it’s more about situation awareness as a driver, primary school “safety” driven, secondary – “assumed” less adult supervision, *audit of schools curriculum, pastoral care programs

Family = Parental influence, values, role modelling

Neighbourhood = *Hot spots

Knowledge, attitudes and beliefs

Knowledge/health literacy = attitudes to safety, Do pedestrians have right of way? – just step out onto crossing (verse situation awareness) – WE WANT THEM ALIVE!

Health behaviours

*What are some health behaviours? – Distractions, disregard for signage and laws.

*Visibility (high vis vests)

Safety Factors

Risk taking – pedestrians, skateboarding – distracted, eye-contact???, smile (acknowledgement)? waving?