



Tackling Root causes Upstream of  
Unhealthy Urban Development

# Demystifying Low Traffic Neighbourhoods (LTNs): lessons on community engagement in the UK

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## University Consortium



## Local Authority Partners



## Research Funders



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# 1. What are Low Traffic Neighbourhoods (LTNs)?



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[Sustrans](#), 2024

[Jack Fifiield](#), 2024





There is a range of evidence on the impacts of Low Traffic Neighbourhoods (LTNs) in London. This evidence can be divided into studies that focus on the majority of new LTNs installed in London since 2020, and those that take an in-depth look at the impacts of LTNs in a single borough, often over a longer period of time. The main findings of these studies are summarised below.

## London-wide studies

### 1. Their roads are safer

**50%**

reduction in road casualties within LTNs, with no increase on boundary roads



### 2. They enable more active travel

**34 minutes**  
more cycling per week by people living in or near an LTN than areas with no LTN

### 3. Their streets are less dominated by traffic

Compared to before implementation:

**74%**

of streets within London LTNs have reduced traffic



**650**

median motor vehicles per day in LTNs, down from 1,200 per day

**No change**

in median motor vehicles on LTN boundary roads



### 4. They have lower crime levels



Reduction in street crime in outer London LTNs introduced in 2020 compared to control areas, with crime in inner London areas remaining the same or reducing slightly

### 5. They benefit deprived areas and under-represented groups

**2.5x**

more likely for people in deprived areas to live in an LTN implemented during March to September 2020 than people in less deprived areas



### 6. They have no adverse impact on emergency service response times



**No change**

to response times inside LTNs implemented since 2020

### 7. They are supported by the public

**58%**

of respondents in a representative poll of Londoners supported LTNs



## In-depth London borough studies

### 1. Their roads are safer

**3-4x**

safer to walk or cycle in Waltham Forest LTNs, without negative impacts on safety at their boundaries



### 2. They enable more active travel

After five years, outer London LTNs have seen:

**62**

minutes more walking and 43 minutes more cycling per week by people living within LTNs



### 3. They lead to reduced car use

**6%**

reduction in car or van ownership from 2015 to 2019 among residents of Waltham Forest LTNs



**6%**

reduction in miles driven by residents of Lambeth LTNs

### 4. They have lower crime levels

**10%**

reduction in street crime in Waltham Forest LTNs from 2012 to 2019



### 5. They enable young people to be active

**20%**

of people cycling at peak times in parts of the Dulwich Village LTN are children, significantly above the London average



### 6. They have no adverse impact on emergency service response times



**No change**

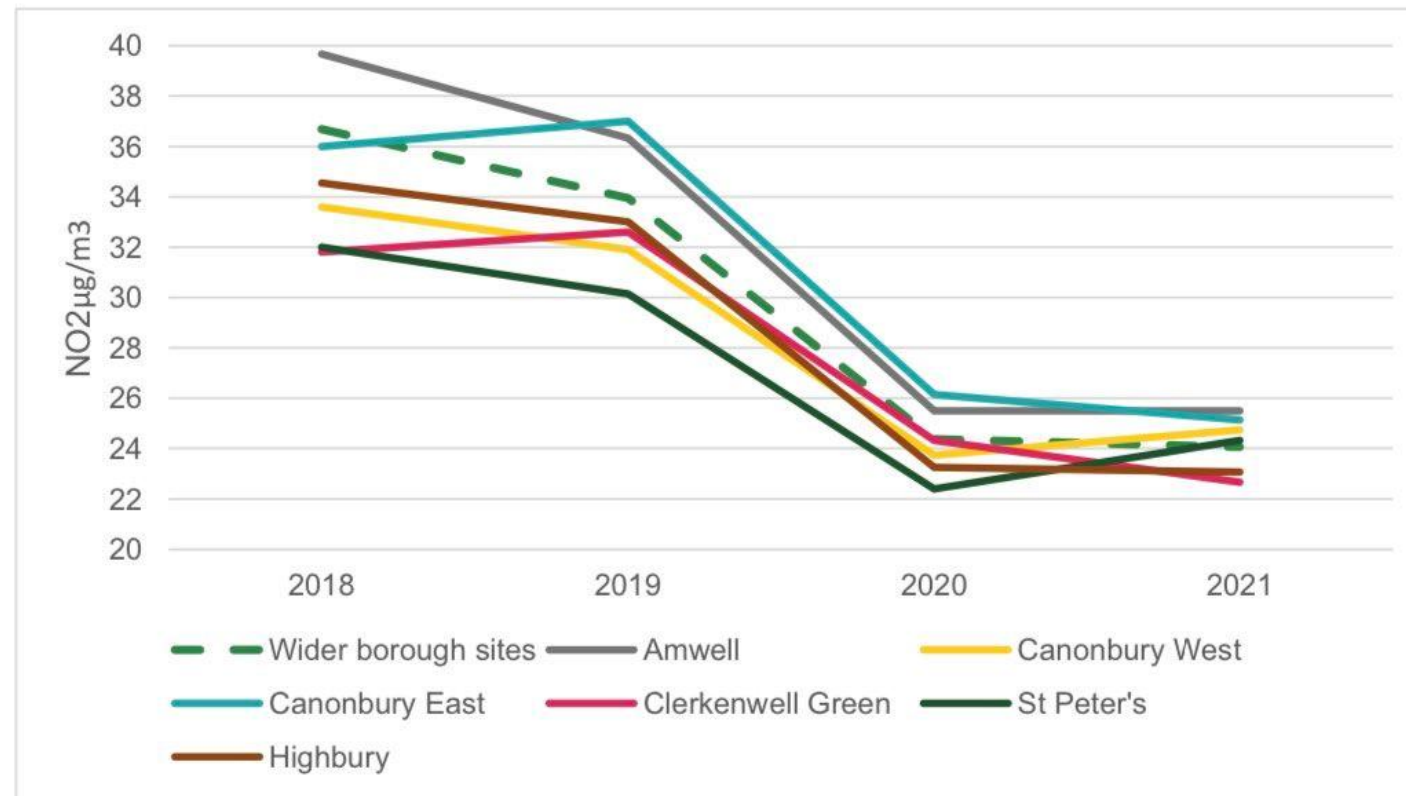
to response times inside Waltham Forest LTNs, and some evidence that they improved slightly on boundary roads

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**Figure 3. Annual average mean NO<sub>2</sub> ratified and bias-adjusted monitoring results 2018-2021 for Low Traffic Neighbourhoods (boundary, internal and non-road sites) compared to wider borough sites**



[London Borough of Islington, 2021](#)

## 2. What is the problem with LTNs?



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[BBC](#), 2022

[ITV](#), 2022



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[BBC](#), 2024

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[DfT](#), 2024

# Low Traffic Neighbourhoods

## Research report

### March 2024





### 3. How do we engage meaningfully with the public?

### 3. Meaningful Engagement



## 4. Working with the local community



## 4. Working with the local community

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## 5. Improving our understanding of how to work with communities.

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[The Green Party](#), 2024

## 5. Building our understanding of engagement.



# 5. Building our understanding of engagement

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INTERVENTION BRIEFING  
DECEMBER 2023

## Valuing the 'external' social costs of unhealthy urban development



### The issue

The use of economic valuation approaches in measuring, and accounting for, non-market environmental and social "goods and services," including human health outcomes, has a substantial history. However, its integration into mainstream decision-making has been slow for a number of reasons, not least the considerable challenge of quantifying intangible aspects of health in welfare terms. This lack of uptake does not appear to imply a lack of appetite; indeed, there may be multiple areas of potential application.

A range of qualitative appraisal tools and methods for policy makers already exist, but the few quantitative tools that allow policy makers to estimate changes to health focus on a limited number of environmental characteristics or subject areas, such as active travel. Some valuation methods used in policy appraisal don't always enable understanding of place-based analysis, in terms of understanding where in society the burden of illness may fall.

### Our response: the HAUS model

We have created an economic valuation model – **Health Appraisal of Urban Systems**, or HAUS for short – that allows developers or planners to consider and adjust a range of health factors. HAUS provides unit costs for more than 70 health outcomes, disaggregated so that they can be attributed across multiple agencies from a societal perspective.

For example, in a recent application we were able to show that increased green space for one urban area could lead to improvements in activity and mental health, reductions in diabetes, cancer and childhood obesity, and could even reduce premature mortality. Over 25 years these benefits could save the community between £20-35 million through averted health costs.

HAUS has been developed using new, large-scale mixed-use development proposals as a starting point, but with modification could be applied more widely. Prior projects, for example, have used a similar approach to estimate risk from flooding and overheating to social housing and healthcare providers.



INTERVENTION BRIEFING  
JANUARY 2024

## Using lay knowledge to transform understanding of links between the built environment and health

### The issue

'Lay knowledge' – that is knowledge and understanding held by lay public/s based on their subjective experience – has attained new prominence as a form of evidence for public health in the UK during recent decades. Collecting and sharing lay knowledge can illuminate the social determinants – that is the conditions in which people are born, grow, live, work, play and age – as well as structural processes which impact on health and lead to health inequalities. While it has traditionally been overlooked, lay knowledge can be claimed as an important source of empirical evidence, which enables more holistic understanding. Lay knowledge can be collected in the form of qualitative research interviews and focus group discussions or through visual data such as photography or video, or participatory mapping. It can also be mobilised within research co-production as part of a wider imperative to work closely with people experiencing inequality in order to develop informed solutions.

We want to find ways to apply lay knowledge in the urban development system in order to achieve some of TRUUD's key aims:

- Increasing understanding amongst decision-makers about the links between the built environment and health, and the real-life challenges posed by health inequalities and;
- Working with the public to bring their lived experience closer to decision-makers.

### Our response



Our exploration of different ways in which lay knowledge about the links between the built environment and health can be applied in urban development has taken us down several pathways. Our [review of how digital tools](#) are used for public engagement in urban development identified how lived experience might be incorporated more meaningfully within current approaches. We have also investigated how lived experience can be combined with other forms of evidence (such as statistics about health outcomes and associated costs), to transform understanding and influence a shift towards healthier decision-making.



University consortium

Local authority partners

GMCA

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INTERVENTION BRIEFING  
MARCH 2024

## Using health evidence to influence urban regeneration in Bristol

### The issue

Built and natural environments affect our physical and mental health. However, urban development can result in towns and cities that do not support good health and wellbeing: homes may be of poor quality; greenspaces may be insufficient; cars may dominate with limited infrastructure to support walking and cycling; and social infrastructure, such as community centres or health centres, may not meet the needs of the local community.

Our research identified key challenges for influencing healthier urban development. This includes different stakeholders having multiple priorities (many of which relate to the wider determinants of health, such as housing, transport or greenspaces), which results in trade-offs that may not maximise health outcomes. A further challenge is [ambiguity and perceived subjectivity about what constitutes 'healthy' development](#).

### Our response

We wanted to find ways to support healthier urban development decision-making and partnered with Bristol City Council (BCC) to develop and share health evidence about urban environments.

We placed one of our own researchers to work directly as part of a regeneration team at BCC for three and half years to fully collaborate on a large-scale spatial development project from the outset.

### Frome Gateway regeneration

We became part of the delivery team for the [Frome Gateway](#).

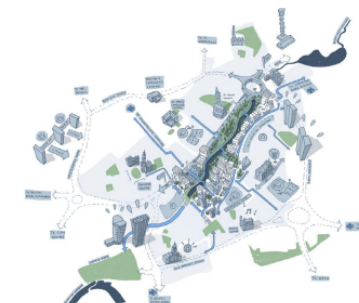


Figure 1: Frome Gateway regeneration area  
Credit: Aliford Hall Monaghan Morris

the principles for development in a predominantly industrial area of central Bristol, which also includes community uses and greenspaces along the River Frome. The surrounding area is in the 10 per cent most deprived in the country and is ethnically and linguistically diverse. More than 1000 new homes, accommodation for 500 students and employment spaces are planned across 15 ha, largely by the private sector. The framework is crucial for guiding all of this development as it becomes a material consideration for any changes that require planning permission.

## 5. Building our understanding of engagement

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[BBC](#), 2024

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