1 Active Travel and Social Justice Inquiry: 2 Evidence from Wheels for Wellbeing

21 Introduction

Wheels for Wellbeing are a Disabled people's organization (DPO) who campaign for equitable access to cycling, active travel and multi-modal journeys for Disabled people. We also provide access to cycling for Disabled people via specialist cycle sessions, led rides and (with partners) loan schemes of non-standard cycles.

Data from our own and others' research suggests that the main barriers to active travel for Disabled people include: infrastructure, parking and storage, the cost of non-standard cycles, lack of opportunities for share and hire, attitudes (institutional and social), and wider transport and mobility barriers.

22 Barriers to Active Travel

11.1 Data

It is essential to note that whilst we cite research in this submission, there is no nationally representative baseline data regarding Disabled people and active travel. Key nationwide sources such at the National Travel Survey and the Census do not adequately capture Disabled people's mobility and transport-use, and smaller scale studies have only indicative samples and findings which use inconsistent identifying criteria. As a result, it is impossible to produce robust evidence as to whether new active travel schemes are addressing inequalities and meeting their obligations under the Equality Act (EA), including the Public Sector Equality Duty (PSED), or whether any increased use is merely additional journeys by those who are already well served/over-represented in active travel.

WfW recommend: A national strategy to improve data collection in all evidence gathering regarding Disabled people's mobility and active travel. To achieve this, engagement and research needs to be undertaken with DPOs and Disabled people about the best criteria to capture disability/impairment and mobility and transport experiences.

11.2 Infrastructure

Active travel begins with pavements. However, nationwide, pavements lack cut kerbs and correctly installed tactiles, and pavements are often narrow, with poor or dangerous surface quality and covered in street furniture/clutter. Pavements are also increasingly obstructed by parked (and sometimes moving) cars. All of which makes them impassible for many Disabled people.

Off-road cycle routes often have access barriers (such as A-frames and chicanes) which prevent access by Disabled cyclists and others using non-standard cycles – such as child trailers or cargo cycles. Many of these barriers are also impassible for those using wheelchairs, mobility scooters or pushing a child's pram/buggy. These barriers appear to contravene the Equality Act and yet continue to be installed and/or Local Authorities resist removing them. On-road cycle infrastructure can also be inaccessible for Disabled cyclists and others using non-standard cycles – widths, turning circles, stepped access, the

requirement to dismount at certain points, junction design and kerbed routes with no escape points all present barriers. All of the above force Disabled cyclists back into the road to contend with traffic danger and hostility or, more likely, not to cycle at all.

WfW recommend: Enforced national standards (rather than guidance) on pavement accessibility (with Inclusive Mobility recommendations as an absolute minimum). A nationwide, enforced, pavement parking ban. A nationwide mandate to remove access barriers from public cycle ways, parks and amenities. Higher scrutiny of active travel infrastructure by Active Travel England, with best practice as the expectation and significant penalties for non-compliance. More co-produced research and development around features such as tactiles, bus stop bypasses, junctions, which is led by expert DPOs/Disabled consultants. The default 20mph speed limits in Wales have been effective in reducing casualties and we would like to see this policy four-nationwide as this will make road cycling a safer and more viable option where there is no cycle infrastructure.

11.3 Parking and storage

Cycle parking and storage that is only designed to accommodate bicycles ridden by people who can dismount, upend and/or lift their cycle is not accessible for Disabled cyclists – nor, indeed, many others with protected characteristics, such as women and older people, yet it is increasingly being installed (e.g. Manchester). Since Disabled people's cycles cost more, the lack of storage, both at home and at destinations, is a significant barrier.

Social safety factors are also important in the design of cycle parking, for example, Disabled people, women and those from minoritized ethnic groups are unlikely to feel/be safe using cycle parking that is in an unlit, underground location. The location of cycle parking also often fails accommodate cycles being essential mobility aids for Disabled people who cannot walk from the cycle parking to the destination.

WfW recommend:

Accessible cycle parking should be installed at any location where there is provision for standard bicycle parking with additional provision for Disabled people to park cycles where they need via a scheme similar to the Netherlands. A national standard for accessible cycle parking to be developed with DPOs and Disabled people using our 14 Features of Accessible Cycle Parking as a starting point.

11.4 Cost

Non-standard cycles (e.g. trikes (upright, recumbent and semi-recumbent), tandems, handcycles and others), especially with e-assist, cost many thousands of pounds, we estimate on average circa £8,000. This is prohibitive for Disabled people who face significant pay and employment gaps as well as additional costs of being disabled – currently calculated by Scope to be more than £1,000 per month. This means that those with the lowest incomes face the highest cost to cycling. There are currently no national scheme to redress this – the price of non-standard cycles, and the disability pay and employment gaps mean the cycle to work scheme is rarely a viable option for Disabled people. Costs of servicing, repair and recovery of broken-down non-standard cycles can also be prohibitive for Disabled people, as can finding a local cycle mechanic who can repair non-standard and e-cycles.

WfW recommend: a national scheme that addresses the cost gap so that everyone pays the same amount for a suitable cycle whether they are Disabled or not (e.g. circa £700). Funding for this could potentially be delivered without additional budget by increasing the proportion of roads budget currently spent on cycling (currently 3%) and also reallocating some of the active travel budget dedicated to behavior change. We would also like to see high quality, nationally accredited, training for maintenance and repair of non-standard and e-cycles and a level of renumeration and facilities for trainees/apprentices to make them viable for Disabled participants.

11.5 Lack of share and hire

The lack of accessible share/hire cycle and micromobility schemes for Disabled people adds to the cost barrier by preventing access to low cost/shared active travel which circumvents parking/storage challenges. Disabled people who require a non-standard cycle, or a seated, 3-wheel or piloted e-scooter, or who cannot reach the location where these are provided are excluded from these schemes. WfW (and others) are currently running pilot schemes of non-standard cycle loans to explore what features, in addition to non-standard cycles, are required to make loan/share schemes viable for Disabled people. So far this highlights the essential role of inclusive cycling centers in providing the opportunity for Disabled people to encounter and try out a wide range of cycle-types in a safe and accessible environment before embarking on utility cycling/active travel.

WfW are also campaigning for legislative changes to end the restriction of Disabled people's mobility to "invalid carriages", to widen the definition of e-scooters and LZEVs to incorporate accessible devices (e.g. seated and three-wheeled e-scooters and e-scooters which can be ridden by two people to ensure access for blind/visually impaired, neurodivergent and learning Disabled people who may not be able to ride alone), and to recognise LZEVs and cycles as mobility aids when used by Disabled people to replace walking.

WfW recommend: more investment in accessible share and loan schemes, ensuring nationwide provision, and mandating that local authorities (and other providers) make their offer accessible once the practicalities of doing so have been resolved. There should also be increased resourcing and partnership for regional inclusive cycling centres who provide the opportunity for Disabled people to learn to cycle. Legislative changes are required regarding invalid carriages, micromobilities and mobility aids for Disabled people.

11.6 Attitudes: Social and institutional

Disabled people experience high levels of harassment, hostility and hate crime in the public realm, which often deter them from making active travel journeys, particularly when the type of cycle or mobility aid they use makes them hyper-visible. Harassment, hostility and hyper-visibility are also experienced by others with protected characteristics particularly women and those from minortised ethnic backgrounds.

Many Disabled people who are in receipt of benefits fear that the DWP will stop their benefits if they are known to be active. Yet at the same time, Disabled people have some of the worst physical and mental health outcomes of any population group and much of this is due to the secondary impacts of exclusion from physical activity. Government departments need to have aligned policies (see also NHS, below) so that Disabled people have the

same opportunities to be active and reap the health benefits as non-disabled people without benefit penalties.

WfW recommend: There needs to be a nationwide campaign against street/public harassment of Disabled people, women and others with protected characteristics. This should be tackled akin to a public health issue. There also needs to be stronger mechanisms for reporting, challenging and addressing harassment and hate crime.

DWP (and NHS) must realign with wider government goals of promoting active travel for Disabled people.

11.7 Wider Mobility and Transport Barriers

In order to make active travel journeys Disabled people need access to good quality mobility aids and to be able to make multi-modal journeys. Currently 90% of mobility impaired Disabled people don't have access to a good enough quality mobility aid to make a 1km journey. Moreover, the NHS do not provide "active" wheelchairs and they explicitly prohibit wheelchair users from attaching a clip-on handcycle to an NHS wheelchair. These policies have significant health impacts for Disabled people and negative cost impacts for the NHS.

Public transport vehicles have limited and inadequate space to accommodate people using even basic mobility aids, permitting only small wheelchairs and mobility scooters and only allowing one user to travel at a time (even when there is physically room for more). This particularly impacts Disabled women who are often carers for other Disabled people and/or children and who prevented from traveling with them. In the Netherlands, Disabled people can bring their cycle (and other mobility aids) on board trains without prior booking, some buses also allow Disabled people to bring cycles on board, and most trains have level boarding.

WfW recommends: Mandating increased mobility aid space on public transport and permitting a wider range of mobility aids (including cycles) on board. Ensuring that there is space for more than one Disabled person to be able to travel at a time – this will particularly benefit Disabled parents/carers, couples or groups of Disabled people who need to travel together.

23 Conclusion

Barriers to active travel for Disabled people (data, infrastructure, parking and storage, cost, lack of share/hire schemes, attitudes, coupled with wider transport and mobility barriers) have significant health, social, economic and mobility impacts for Disabled people. However, there are straightforward ways in which these can be addressed and often with little or no additional cost (e.g. reallocation of some of road budget, changes in mobility aid and e-scooter/LZEV legislation, or removing seats on existing bus, train, tram and light rail vehicles to allow more mobility aid spaces). There needs to be much greater enforcement of the EA and PSED from central government, rather than relying on individual Disabled people to challenge unlawful practices. All policies, guidance and standards regarding Disabled people must be developed with consultation and co-production of expert DPOs and Disabled people.