

Toronto police data underreports cyclist and pedestrian injuries, study finds

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Cycling and pedestrian injuries are severely underrepresented by police data, particularly those not involving a motor vehicle, according to [new research](#) believed to be the first of its kind in Canada.

The study, led by York University and ICES in collaboration with a researcher from Toronto Metropolitan University, analyzed Toronto Police Service (TPS) data and health administrative data from ICES.

The article, "A comparison of the number of pedestrian and cyclist injuries captured in police data compared to health service utilization data in Toronto, Canada 2016–2021" was published in *Injury Prevention*.

The researchers found more than 30,000 emergency department (ED) visits for all cyclist injuries between 2016 and 2021 from health services data, which includes both injuries sustained from [motor vehicle collisions](#) (MVC) and non-MVC. In contrast, TPS data captured 2,362 minor, major and fatal cyclist injuries for all cyclist collisions, representing only 8% of ED visits.

Police generally only attend injuries sustained when there is a motor vehicle involved; however, the study found a large proportion of cyclist injuries that don't involve a [motor vehicle](#), especially since the pandemic. Of the total hospital admissions for cycling injuries, more than 80% were from non-MVC.

Police data estimates improved when the data was limited to cyclist-MVC and pedestrian injuries. For pedestrians, the police data represented 54% of ED visits and 48% of hospitalizations, and injuries decreased across all [data sets](#) since 2020.

"This suggests that using police data alone won't provide [city planners](#) with an accurate number of cyclists and pedestrians injured on city streets," says lead author Alison Macpherson, professor in the School of Kinesiology and Health Science at York University and senior adjunct scientist at ICES. "This emphasizes the need for linked health services data and police data to inform planning for [road safety](#)."

The study authors note that since the police data and health services data were not linked, a detailed analysis and comparison between the data sets was not possible. Future work to link these data would allow for a better understanding of which injuries are being missed by police data, demographics of the individuals, and locations where collisions are occurring.

"The high rates of serious cycling injuries that don't involve [motor vehicles](#) may point to changes that are needed in the built environment," says senior author Linda Rothman, assistant professor for the School of Occupational and Public Health at Toronto Metropolitan University. "This could include roadway and cycle track maintenance or necessary upgrades to off-road trails and pathways."

This study was an Applied Health Research Question (AHRQ) requested by the City of Toronto, and they are using the results to plan road safety changes, including to cycling infrastructure that is not on the roadway. Two other regions in Ontario have recently requested the same data to inform their planning.

More information: Alison K Macpherson et al, Comparison of the number of pedestrian and cyclist injuries captured in police data compared with health service utilisation data in Toronto, Canada 2016–2021, *Injury Prevention* (2024). [DOI: 10.1136/ip-2023-044974](https://doi.org/10.1136/ip-2023-044974)

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