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To cite this article: Adnan A. Hyder & David Bishai (2012) Road Safety in 10 Countries: A Global Opportunity, Traffic Injury Prevention, 13:sup1, 1-2, DOI: [10.1080/15389588.2011.650023](https://doi.org/10.1080/15389588.2011.650023)

To link to this article: <https://doi.org/10.1080/15389588.2011.650023>



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Published online: 13 Mar 2012.



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Editorial

Road Safety in 10 Countries: A Global Opportunity

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More than 1.2 million people die every year in road traffic crashes around the world and an additional 20 to 50 million are injured or disabled (Peden and the World Health Organization [WHO] 2004). This global burden of road traffic injuries (RTIs) is only expected to rise; RTIs are predicted to steadily climb from the ninth leading cause of death in 2004 to the fifth leading cause in 2030 (Mathers et al. 2008). Projections also show that RTIs will be one of the 3 leading contributors to the global burden of disease as measured by disability-adjusted life years (DALYs) lost over the next 2 decades (Mathers et al. 2008). Moreover, this burden falls mostly on low- and middle-income countries (LMICs), where the rates of road traffic deaths are twice as high as those in developed countries (WHO 2009). It is estimated that 90 percent of road traffic deaths occur in LMICs even though they account for less than 50 percent of the world's registered automobiles (WHO 2009). Between 2004 and 2020, these rates are predicted to rise by 27 percent in LMICs, while decreasing in high-income countries by 83 percent, which will further augment the global gap (WHO 2009). The economic losses associated with this burden are significant; RTIs have been estimated to cost LMICs an estimated US\$100 billion every year (World Bank 2010).

The Road Safety in 10 Countries Project (RS-10) is a newer multi-country program aimed at reducing the global burden of RTIs and is funded by the Bloomberg Philanthropies with US\$125 million over a 5-year timeline (2010–2014). The RS-10 project brings together 6 partners in a consortium: the WHO, Johns Hopkins International Injury Research Unit, the World Bank Global Road Safety Facility, the Global Road Safety Partnership, the Association for Safe International Road Travel, and EMBARQ—the World Resources Institute Center for Sustainable Transport. The project focuses on 10 countries that account for almost half (48%) of all traffic deaths globally:

Brazil, Cambodia, China, Egypt, India, Kenya, Mexico, Russia, Turkey, and Vietnam (WHO 2009). RS-10's primary goal is to reduce deaths and serious injuries in these LMICs by focusing on proven preventive and care interventions; identifying high-performing, experienced partners for implementation; and rigorously evaluating outcomes.

A relatively standardized approach is being proposed for all RS-10 countries. At the national level, a high-level working group of stakeholders has been created, a joint national work plan has been developed, and 2 or more focused intervention sites (i.e., cities, districts, or regions) have been identified in each country. Each site has been encouraged to focus on at least 2 of 4 potential risk factors (i.e., drunk driving, excessive speed, lack of seat belt and child restraint use, and lack of helmet use), and an evidence-based and nationally relevant set of interventions that address the chosen risk factors will be implemented in each site. Interventions range from infrastructure improvement to enforcement. All relevant sectors—health, transport, police, and law—are being involved as needed and encouraged to participate at the country and site levels. Importantly, an evaluation of the intervention approach has been planned at each site from the outset, and integrates regular monitoring of outputs and a final outcome assessment at the end of the 5 years.

This special issue is devoted to showcasing work from each of the 10 participating countries and highlights selected findings from the first 2 years of the project's progress.

In “Road Traffic Injury in China: a Review of National Data Sources,” the authors offer a roadmap of the strengths and drawbacks of the principal data sets describing injuries in China. The paper sheds light on why variant estimates of Chinese injuries have been difficult to align. “Projecting the Health and Economic Impact of Road Safety Initiatives: A Case Study of a Multi-country Project” also grapples with disparate epidemiological estimates and shows how RS-10 might have a wide range of impacts on health. Despite this range, the dollar value of RS-10 is likely to exceed by tenfold the planned investment of US\$125 million.

“Burden of Road Traffic Injuries in Turkey” shows the power of a diligent search to uncover overlooked research on road

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safety. The authors discovered a trove of 70 studies on road safety in Turkey that could support the estimate that 2 percent of all deaths in Turkey were due to RTIs. A similar study searching for literature on Egypt found 20 papers and also found that RTIs were responsible for close to 2 percent of deaths in Egypt.

“Drinking and Driving in Vietnam: Public Knowledge, Attitudes, and Practices” collected primary data from a sample of 633 respondents at gas stations to measure a 45 percent self-reported rate of drunk driving. Another primary data-based study, “Helmet Use Among Motorcyclists in Cambodia: A Survey of Use, Knowledge, Attitudes, and Perceptions,” found a helmet wearing rate of 25 percent at night and 43 percent during the day. Drivers were 10 times more likely to wear helmets than passengers. “Seat Belt and Child Seat Use in Lipetskaya Oblast, Russia: Frequencies, Attitudes, and Perceptions” also collected primary observational data to determine seat belt use rates of 55 percent of drivers of 25,795 vehicles in Lipetskaya Oblast, Russia.

In “Road Traffic Injuries in Kenya: The Health Burden and Risk Factors in Two Districts,” one sees what can emerge when secondary data from countries were extensively analyzed. Analysis of police data from Kenya was able to generate some of the first ever estimates of the RTI rate for Kenya at 59.6 per 100,000 in 2009. Secondary data analysis was also used to measure the injury burden in India. “Evidence-Based Road Safety Practice in India: Assessment of the Adequacy of Publicly Available Data in Meeting Requirements for Comprehensive Road Safety Data Systems” assessed the adequacy of publicly accessible

data sources and found that state-level data on injury in India has important gaps. “Quantifying the Underestimated Burden of Road Traffic Mortality in Mexico: A Comparison of Three Approaches” and “Road Traffic Deaths in Brazil: Rising Trends in Pedestrian and Motorcycle Occupant Deaths” illustrate the potential strengths of data analysis when vital registration data are used. In the case of Mexico, investigators found that 19 to 28 percent of the deaths’ external causes were missing.

This special issue of *Traffic Injury Prevention* offers a great step forward in benchmarking what is known and what is possible to know based on existing injury data and surveillance systems. These results offer guidance for research expectations and opportunities in the current (2011–2020) decade of action for road safety.

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