Call for a Decade of Action for Road Safety 2010 – 2020: the first Global Ministerial Conference on road safety and beyond.

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The road injury epidemic

Road crashes kill 1.3 million people and seriously injure another 15 - 20 million every year¹, at an economic cost to the developing world alone – where 90% of casualties occur - of up to \$100 billion per year². Road crashes are already the leading global cause of death for young people aged 10-24³, and are forecast by 2015 to be the biggest single cause of healthy life years lost in the developing world for children over the age of five⁴. According to the *World Report on child injury prevention* (2008) published by WHO and Unicef, road crashes now kill 260,000 children every year and injure another 10 million⁵.

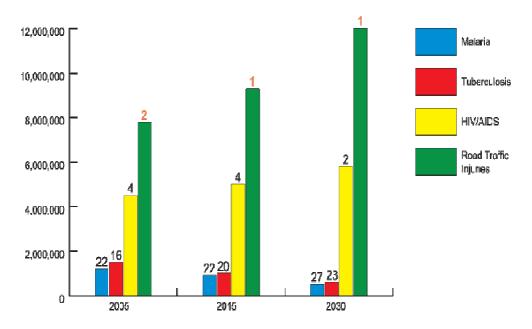


Figure 1: Projected DALYS in developing countries: (children aged 5 - 14)

Source: Mather C, Loncar D, Updated projections of global mortality and burden of disease, 2002-2030: data sources, methods and results, WHO, October 2005

The response by the international community to this epidemic has been woefully inadequate. The role of safe road networks both in delivering services essential to achievement of the Millennium Development Goals and in preventing unnecessary death and injury has largely been overlooked by development agencies, public health foundations and the major development NGOs.

However, as the result of a ten year effort to raise the profile of road safety, described below, the United Nations has now agreed to a first ever global ministerial-level meeting on road safety. The challenge now is to ensure that this meeting, in Moscow next November, marks the start of a more systematic and coordinated effort to tackle road deaths and injuries.

Mobilising for action on road safety: the ten year road to Moscow

One of the first to ring the alarm bell about the global road injury epidemic was the International Federation of Red Cross and Red Crescent Societies (IFRC), when it warned in its 1998 World Disasters Report that "... road crashes are a worsening global disaster destroying lives and livelihoods, hampering development and leaving millions in greater vulnerability." The following year, the World Bank initiated the Global Road Safety Partnership (GRSP) as part of its Business Partners for Development Programme. The GRSP, hosted by the IFRC, brings together business, civil society, and governments to promote sustainable reductions in road crashes in developing and transition countries⁶.

In 2001 the World Health Organisation, concerned by the lack of awareness of the contribution of road crashes to the burden of disease worldwide, adopted a five year strategy for road traffic injury prevention. WHO stated that "Road traffic injuries are a major public health problem" but the agency acknowledged that they "... have been neglected because injuries have been seen as accidents or random events. Now injuries are known to be preventable." The strategy objectives were to build capacity at national level, to monitor the magnitude of road traffic injuries, to incorporate injury prevention into public health agendas around the world, and to promote action to prevent and control the health consequences of motor vehicle crashes.

The WHO also decided that, in order to promote global awareness of the urgent need to tackle an avoidable public health issue, road safety would be the theme of the 2004 World Health Day. This decision was announced by the then WHO Director General, Gro Harlem Bruntland, at a high level conference in London in February 2003 on global road safety, organised by the FIA Foundation, which brought together experts from the UN, the World Bank, the OECD, research bodies, the private sector, and NGOs including the Bone and Joint Decade and the Taskforce for Child Survival & Development, two early instigators of action at the UN.

A few months later the growing political and diplomatic interest in road safety resulted in the adoption of the first ever UN General Assembly resolution on global road safety (A/RES/57/309 - 22/5/03), tabled by the Sultanate of Oman, which has become a world leader among nations in road safety advocacy. The resolution acknowledged the global scale of road traffic deaths and injuries, and requested a report by UN Secretary General, Kofi Annan. Published in August 2003, this report recognised that the road safety efforts of the UN and other stakeholders had "remained fragmented" and recommended that a coordinating body be created within the UN system and that road safety be integrated into other polices, "... such as those relating to sustainable development, the environment, gender, children or the elderly."

In April 2004 the World Bank and the WHO published *the World Report on road traffic injury prevention*. This groundbreaking report highlighted that more than 85% of the 1.2 million people then killed and 50 million injured around the world in road traffic crashes are in low and middle income countries. Launched by then French President Jacques Chirac on World Health Day in Paris, the report warned that road deaths are forecast to double by 2020 and made recommendations on how countries can begin to reverse the largely avoidable rising tide of traffic injuries⁷.

One week after World Health Day, the UN General Assembly held its first ever plenary debate on the issue of road safety. Addressed by 20 countries and leaders of the WHO, UNICEF, and the World Bank, the General Assembly adopted a resolution on 'Improving Global Road Safety' (A/58/289 11 May 2004). The resolution invited the WHO to serve as coordinator within the UN system on road safety issues. In response to its new role the WHO established the UN Road Safety Collaboration, which brings together UN agencies and regional commissions, governments, NGOs, and the private sector, providing a platform for dialogue and coordination. The UN Road Safety Collaboration is coordinating the production of a series of good practice guides on the main risk factors of non use of seat belts and helmets, excessive alcohol and speed, on low cost infrastructure measures, and on data collection. This series is co-published by the WHO, the World Bank, the GRSP, and the FIA Foundation⁸.

The important leadership role being played by the WHO in global road safety was also formally endorsed by Health Ministers at the 2004 World Health Assembly. The resolution urged governments to integrate traffic injury prevention into public health programmes, to facilitate multisectoral collaboration, and proposed the creation of a fund to increases resources for global road safety (Source: WHA resolution 57.10 22/5/04).

In October 2005, the UN General Assembly adopted a further resolution on global road safety. The General Assembly accepted a proposal submitted by the UNECE to hold the first UN Global Road Safety Week in April 2007. The UN Resolution also agreed to recognize the third Sunday in November every year as a World Day of Remembrance for Road Traffic Victims.

Mobilising resources to implement the recommendations of the World Report is clearly an enormous challenge. The resolutions of both the UN General Assembly and the World Health Assembly recognised the need for new financial resources for global road safety. Unfortunately, no funding mechanism existed to serve this purpose. This obstacle was overcome in November 2005, when the World Bank announced the creation of a Global Road Safety Facility⁹ with the goals of strengthening global, regional, and country capacity to support sustainable reductions in road deaths and injuries in low and middle-income countries; increasing road safety investment in low and middle-income countries; and accelerating safety knowledge transfer to low and middle-income countries. To date, the Facility has received funding totaling US\$16 million from the Governments of Australia, Netherlands and Sweden, the FIA Foundation and the World Bank itself. Other significant funding for global road safety has come from the Global Road Safety Initiative (GRSI), a consortium of seven leading car and oil companies, which together committed US\$ 10 million to a five year road safety programme, and the Bloomberg Foundation, which in 2007 granted US\$ 9 million to the WHO to conduct a global status report and targeted country programmes.

The Make Roads Safe campaign

Following these positive developments the FIA Foundation took the initiative to establish the Commission for Global Road Safety, under the Chairmanship of Lord Robertson of Port Ellen, the former secretary general of Nato, with the main objective of sustaining political momentum in favour of action to tackle road traffic injuries and the implementation of the World Report.

The Commission's report, *Make Roads Safe: a new priority for sustainable development* was published in June 2006. The report fully endorsed the conclusions of the 2004 World Report, highlighted that road safety had been overlooked as an issue relevant to the achievement of the Millennium Development Goals (MDGs) and made three principle recommendations:

- That a \$300 million, 10 year Action Plan to improve road safety in developing countries be supported by major official and private donors;
- That road projects in developing countries funded with overseas development aid must include a minimum 10% for road safety improvements including engineering measures, safety rating and assessment, and wider community based road safety initiatives;
- That a first ever United Nations Road Ministerial Road Safety Conference should be convened to coordinate an international approach to road traffic injury prevention.

The Commission for Global Road Safety also launched the Make Roads Safe campaign¹⁰, the first international campaign for global road safety, to advocate for the report's recommendations. The Make Roads Safe campaign, working in partnership with the WHO and many road safety organizations, worked to raise the profile of road safety, securing support from leading public figures and a million name petition calling for a UN Ministerial. In March 2008, in response to this campaign, the UN General Assembly unanimously adopted draft resolution A/62/L.43 (resolution 62/244), sponsored initially

by the Sultanate of Oman and the Russian Federation, which approved the proposal to hold a Ministerial meeting in Moscow in 2009.

A proposed outcome of the Global Ministerial Conference: A Decade of Action

It is very important that the momentum described above is maintained at the forthcoming UN-approved First Global Ministerial Meeting on Road Safety, which will be hosted by the Russian Federation at the Kremlin Palace in Moscow on 19/20 November 2009. This meeting can and must mark a step-change in the seriousness with which the international community responds to road traffic injuries.

In advance of the Moscow Conference the Commission for Global Road Safety and the Make Roads Safe campaign are advocating that a 'Decade of Action' should be adopted with the aim of reducing the projected increase in road traffic fatalities by 50% from its anticipated 2020 level. This would set a performance target for the international community and build on the existing casualty reduction targets already adopted in various world regions. The European Conference of Ministers of Transport adopted in 2002 the target to achieve a 50% reduction in the 2000 fatality level by 2012 and the European Union has adopted a similar goal to be achieved by 2010. Ministers of Transport from the Asia Pacific Region meeting in Busan, South Korea, in November 2006 set a target of cutting deaths by 600,000 by 2015.¹¹ African Ministers of Transport and Health have adopted a target to reduce by half road traffic deaths by 2015. The Commission's proposal, which would follow the trend to these existing targets, will therefore encourage a decade of sustained action to improve road safety from 2010 to 2020.

Why a Decade of Action? The campaign believes it is a useful way to focus attention and introduce some structured accountability for the international community's response to road injury. It is instructive to compare the current level of this response to road traffic injuries with Malaria, which kills on a similar scale (see Figure 2). During the 1990s the need for action on Malaria was increasingly recognised as important element in health and poverty strategies, and high level ministerial conferences in 2000 and the G8 summit in 2001 paved the way for the UN Decade to Roll Back Malaria 2001-2010. The Malaria Decade, and indeed the overall effectiveness of the fight against Malaria, has its critics, yet it is undeniable that the international profile of, and action on, Malaria have been transformed over the last ten or fifteen years. Combating Malaria has also been seen as integral to MDG delivery. The Global Fund for HIV/AIDS Malaria and TB has approved funding of more than US\$ 300 million for Malaria prevention in Asia alone.

The Make Roads Safe campaign believes that the response of the international community to Malaria sets a precedent for action to tackle global killers of this scale. Yet by comparison road safety receives little international policy profile and therefore there is a marked lack of urgency in responding to road traffic injuries. With no international support or pressure for action on road safety, road injury prevention remains a low priority for all but the most enlightened governments in the developing world. It is

perhaps understandable that governments grappling with many pressing social priorities, and with limited resources to tackle them, should marginalize road safety. Yet most of these governments have existing resources available for road construction and policing that could be much more effectively deployed in a way that improves road safety. The political awareness and human capacity and knowledge to introduce these changes are lacking. Even international institutions that might be expected to advise on these road safety measures lack capacity. The World Bank and regional development banks (like the Asian Development Bank) lend billions of dollars for road construction and upgrading projects, yet of these institutions only the World Bank has a dedicated road safety expert on its staff. Sadly this lack of capacity can result in road upgrades that actually exacerbate the road injury problem.

	DISEASE OR INJURY	DEATHS (MILLIONS)	PER CENT OF TOTAL DEATHS
1	Ischaemic heart disease	7.2	12.2
2	Cerebrovascular disease	5.7	9.7
3	Lower respiratory infections	4.2	7.1
4	Chronic obstructive pulmonary disease	3.0	.5.1
5	Diarrhoeal diseases	2.2	3.7
6	HIV/AIDS	2.0	3.5
7	Tuberculosis	1.5	2.5
8	Trachea, bronchus, lung cancers	1.3	2.3
9	Road traffic accidents	13	2.2
10	Prematurity and low birth weight	1.2	2.0
11	Neonatal infections	.1.1	1,9
12	Diabetes Mellitus	1.1	1.9
13	Hypertensive heart disease	1.0	1.7
14	Malaria	0.9	1.5
15	Birth asphyxia and birth trauma	0.9	1.5

Figure 2: A Hidden Epidemic: leading causes of mortality, 2004

Source: Mathers et al. Updated projections of global mortality and burden on disease, 2002-2030: WHO, 2008

There are many examples from both industrialised and developing countries of how determined political leadership can rapidly result in significantly improved road safety. France cut its road fatalities by almost half between 2002 - 06 as a result of high profile political prioritisation and a tough regime of police enforcement of driving offences.¹² According to the Vietnamese government, more than 1,200 deaths and 2,200 serious injuries were prevented in the ten months after the government introduced a new mandatory motorcycle helmet law in December 2007^{13} . In Costa Rica, the introduction of a compulsory seat belt law in 2004 saw significant reductions in road deaths and a climate that has enabled more far reaching road safety legislation to be enacted¹⁴.

Interventions such as road design improvements, helmet laws, seat belt, drink driving and speed enforcement have the potential to significantly reduce road fatalities over a ten year period. Furthermore, a recent OECD report, *Towards Zero*¹⁵ argues that adopting a 'safe systems' approach to road safety, a holistic policy focus that works towards the objective of a road network design in which infrastructure, vehicles and road users operate together within safety parameters that mitigate against fatal crashes, can pay dividends whatever the stage of economic development within a country. Road infrastructure design improvements perhaps hold the greatest potential for a mass action programme of cost effective fatality reduction. A pilot project by the International Road Assessment Programme (iRAP), which rates roads according to criteria for safety design, maps fatalities and serious injuries across the road network, and makes cost/benefit calculations for fatality reductions based on implementation of proposed countermeasures, has estimated that in Malaysia an investment of US \$180 million in road design improvements could deliver US \$3bn in benefits and prevent over 30,000 deaths and serious injuries over 20 years (*Vaccines for Roads, iRAP, 2008*).¹⁶

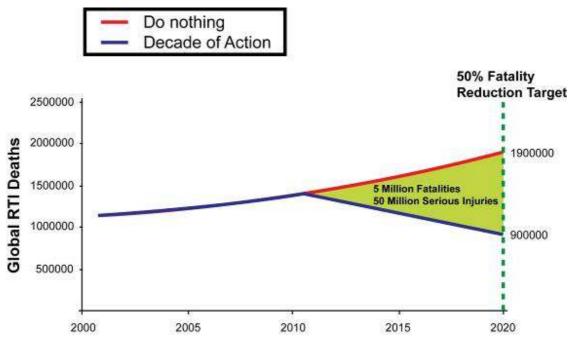


Figure 3: Changing Direction: Potential of a Decade of Action for Road Safety

Source: Guria, J. (2009)

A Decade of Action for Road Safety that strongly supports capacity building in road injury prevention, knowledge transfer, and exchange of good practice could significantly reduce the projected increases in road deaths between now and 2020. The Make Roads Safe campaign is arguing that with political will and sustained action the *predicted growth* in road deaths could be reduced by 50% by 2020, potentially preventing 5 million deaths and 50 million serious injuries¹⁷ (see figure 3) setting in place a sustainable path to

further reductions at very positive cost/benefit ratios. This is the opportunity which the Moscow Ministerial Conference can, and must, seize.

http://www.who.int/violence_injury_prevention/publications/road_traffic/world_report/en/index.html ⁸ UN Road Safety Collaboration manuals are available at http://www.who.int/roadsafety/en/index.html

⁸ UN Road Safety Collaboration manuals are available at http://www.who.int/roadsatety/en/index.htmi
⁹ See www.worldbank.org/grsf
¹⁰ See www.makeroadssafe.org and www.commissionforglobalroadsafety.org
¹¹ http://www.unescap.org/unis/press/2006/nov/g_57_mct_27_06.pdf
¹² See http://www.fiafoundation.org/publications/Documents/road_safety_in_france.pdf
¹³ See http://english.vietnamnet.vn/social/2008/12/818446/ See www.asiainjury.org for more information.
¹⁴ See http://www.fiafoundation.org/publications/Documents/por_amor.pdf
¹⁵ Towards Zero: Ambitious Road Safety Targets and the Safe Systems Approach, Howard E (ed), 2008

http://www.internationaltransportforum.org/jtrc/safety/targets/targets.html

¹⁶ See <u>www.irap.net</u>

¹ World Health Organization

² World Bank

³ World Health Organization, Toroyan T, Peden M (eds), Youth and Road Safety, 2007

⁴ Mather, Loncar: Global Burden of Disease, 2005

⁵ World Report on child injury prevention, Peden M, 2008

http://www.who.int/violence_injury_prevention/child/injury/world_report/en/index.html

 ⁶ See <u>www.grsproadsafety.org</u>
 ⁷ World Report on road injury prevention, Peden M (ed), 2004

¹⁷ Make Roads Safe: A Decade of Action for Road Safety, Commission for Global Road Safety, 2009