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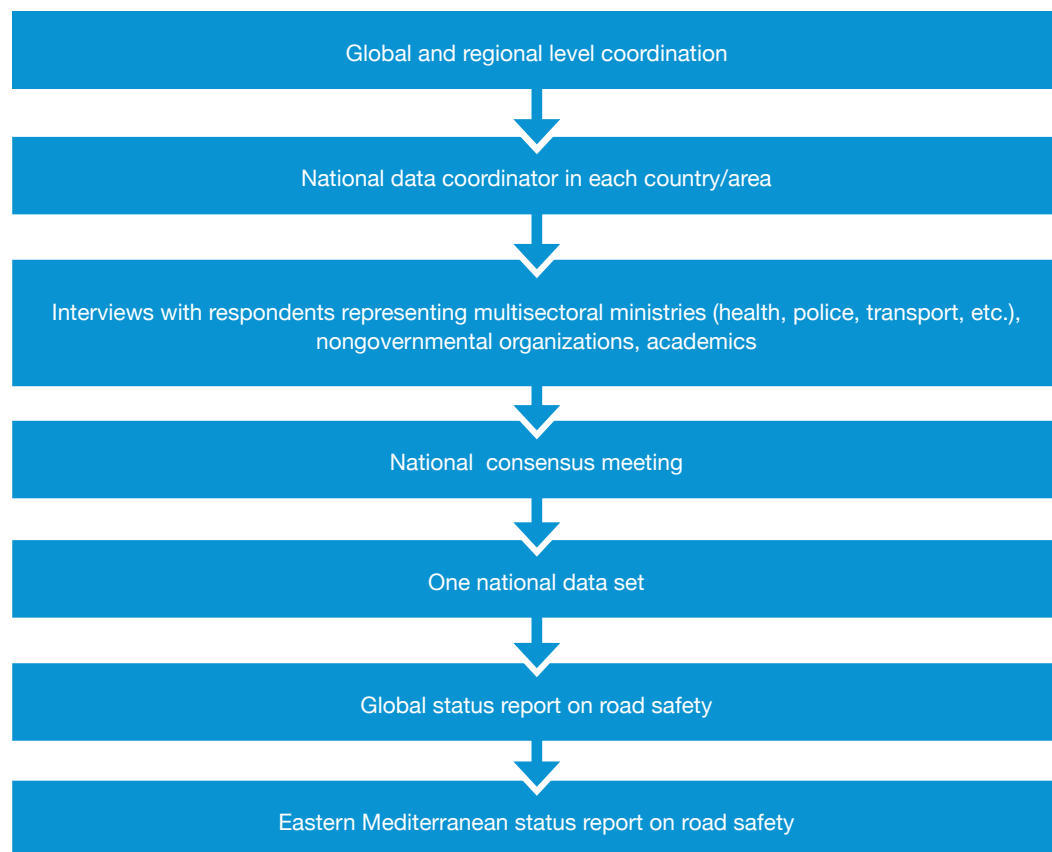
## Methods

### 2.1 Data collection strategy

In August 2007, WHO began to work on the *Global status report on road safety* (GSSRS). As a first step, a self-administered questionnaire was developed. A complete questionnaire, including Arabic translation, is available at: [www.who.int/violence\\_injury\\_prevention/road\\_safety\\_status/2009](http://www.who.int/violence_injury_prevention/road_safety_status/2009).

In each participating country, a national data coordinator was nominated and trained.

The coordinator facilitated a consensus meeting involving six to eight road safety experts from different backgrounds: health, transport, police (ministry of interior), nongovernmental organizations, academics and other road safety practitioners. In contrast to questionnaires in other regions, the questionnaires in the Eastern Mediterranean Region countries were completed by face-to-face interviews with the participants (Figure 5).



**Figure 5. Data collection strategy**

**Table 3. Sectors represented in the survey**

| Sector                               | Number of countries with participation of sector | %  |
|--------------------------------------|--|----|
| Lead agency                          | 11   | 58 |
| Transport                            | 5  | 26 |
| Health                               | 17   | 89 |
| Traffic police/interior              | 8  | 42 |
| Educational/research institution     | 6  | 32 |
| Other governmental                   | 12   | 63 |
| Others/nongovernmental organizations | 8  | 42 |

In the Eastern Mediterranean Region, 19 out of the 21 Member States and the occupied Palestinian territory participated in the survey. Djibouti and Somalia, representing 1.7% of the Region's population, were the only two countries which did not participate.

An attempt was made to include all the relevant stakeholders and sectors in the survey. Table 3 summarizes the sectors involved. Of the 19 countries reporting details of the survey respondents, 17 (89%) had a representative of the health sector while only 5 (26%) had a representative of the transport sector.

## 2.2 Data processing and analysis

Data were entered into an online database, and each response was examined for accuracy, consistency and validity.

Only three countries were found to have vital registration completeness greater than or equal to 85% and external causes of death coded to undetermined intent less than 30%. Estimates of road traffic deaths for other countries were made based on a negative binomial regression model. Details

of the methodology are available at [www.who.int/injury\\_violence\\_prevention/road\\_safety\\_status/2009](http://www.who.int/injury_violence_prevention/road_safety_status/2009).

Data were extracted from the tables presented in the global report. For data not presented in the global report, the questionnaires from all participating countries of the Region were obtained, and the data were reanalysed. Key informants and WHO country focal persons for injury were contacted to obtain further information. For questions regarding enforcement of laws, a score of 7 or more out of 10 was classified as effective enforcement. A data search was carried out for road traffic injury related publications from the Region and included as references where required. Other WHO reports were also searched and included in the discussion (more details on data available in the statistical annex).