

IN FOCUS

Global Plan for the Decade of Action for Road Safety: Expectations from Developing Nations

ABSTRACT

Globally, 1.24 million people die every year because of road traffic accidents (RTAs) and almost 20-50 million people sustain non-fatal injuries. Realizing the magnitude and the global distribution of the problem, the current decade 2011-2020 has been proclaimed as the Decade of Action for road safety, with a target of first stabilizing and then decreasing the estimated magnitude of morbidity and mortality by intensifying the global efforts on national and international platform. The primary step is to develop a surveillance network for data collection to identify the causative factors and estimate the accurate magnitude of RTA so that rational policy can be planned for achieving the best possible allocation of limited resources, especially in developing countries. Other measures such as creating public awareness; strict enforcement of road safety legislations; establishing prompt and good quality post-crash response; and establishing monitoring and evaluation system to assess the outcome of implemented measures can be strategically implemented to counter the burden of road traffic accidents.

Key words: Accidents, Global, post-crash response, road safety

Globally, 1.24 million people die every year because of road traffic accidents (RTAs) and almost 20-50 million people sustain non-fatal injuries.^[1] However, the most distressing fact is that young adults/economically productive age-group (15 to 44 years) accounts for the 59% of global road traffic associated fatality.^[1] In addition, these RTAs cast a significant negative impact on the people/their families/the health care delivery system such as short and long-term disabilities; quality of life; an additional burden on the health care delivery system for management and rehabilitation of the victims thereby increasing the direct and indirect medical costs involved; and magnifies the risk of post-traumatic stress disorder among the survivors.^[2,3]

Realizing the magnitude and the global distribution of the problem, the current decade 2011-2020 has been proclaimed as the Decade of Action for road safety, with a target of first stabilizing and then decreasing the estimated magnitude of RTA associated morbidity and mortality by intensifying the global efforts on national

and international platform.^[4] As a part of this global mission, measures are implemented to guide the low and middle-income countries for expediting the development of cost-effective road safety strategies while high-income countries can work toward remodeling their existing strategies along with assisting other countries in improving their road-safety programs.^[4]

A wide gamut of socioeconomic/personal/health care delivery system related factors such as male gender;^[5] young age;^[5] poor education;^[6] low income;^[6] risk taking behavior;^[7] alcohol consumption;^[1,8] psychoactive substances;^[8] non-use of personal protective equipments;^[1,7] non-compliance with the traffic safety rules and speed limits;^[1,9] riding motorcycles or heavy motor vehicles;^[5,6] duration between the accident and getting the driving license;^[9] passengers occupying the front seats;^[6] and delay in provision of prompt medical care to the victims of road traffic accidents;^[1,10] have been identified as the potential risk factors either in the causation or in the amplification of the aftermaths of the accidents.

Owing to the sustained political commitment, almost 88 countries have reduced the incidence of RTA associated fatality, thus providing a source of motivation to other countries to strengthen the existing measures.^[1] The vision is to develop a concrete national strategy by setting realistic targets for the benefit of vulnerable road users, vehicles and the road environment in a comprehensive

| Access this article online | |
|---|--|
| Quick Response Code: | Website: www.sjmms.net |
|  | DOI: 10.4103/1658-631X.128456 |

manner.^[4,11] The primary step is to develop a surveillance network for data collection to identify the causative factors and estimate the accurate magnitude of RTA so that rational policy can be planned for achieving the best possible allocation of limited resources, especially in developing countries.^[1,11,12] Next step is to ensure that funding is sufficient for ensuring that all desired activities are implemented in a time-bound manner.^[11] Other measures such as public awareness campaigns for educating the masses through the use of mass media about road safety rules and regulations/need of wearing personal protective equipments/penalties associated;^[2,6,7] enabling involvement of multiple sectors in National road safety efforts;^[4] strict enforcement of legislations advocating the use of seat-belts, helmets and child restraint;^[1,4] setting and enforcing blood alcohol concentration limits for drivers;^[8,11] designing safer roads;^[2,4] engineering measures to enhance the vehicle safety standards;^[4,5] advocating safer modes of public transport;^[11] promoting effective land-use, urban planning, no traffic zone;^[6,11] establishing prompt and good quality post-crash response;^[6,10] and establishing monitoring and evaluation system to assess the outcome of implemented measures;^[4,11] can be strategically implemented to counter the burden of RTA.

To conclude, political commitment supported with implementation of evidence-based preventive and control measures supported by political commitment can save countless number of lives and concurrently reduce the burden on the health care system in the developing countries.

**Saurabh R. Shrivastava,
Prateek S. Shrivastava,
Jegadeesh Ramasamy**

Department of Community Medicine,
Shri Sathya Sai Medical College and Research Institute,
Kancheepuram, Tamil Nadu, India

Correspondence: Dr. Saurabh RamBihariLal Shrivastava,
3rd floor, Department of Community Medicine, Shri Sathya Sai
Medical College and Research Institute, Ammapettai village,
Thiruporur - Guduvancherry Main Road, Sembakkam Post,
Kancheepuram – 603 108, Tamil Nadu, India.
E-mail: drshrishri2008@gmail.com

REFERENCES

1. World Health Organization. 10 facts on global road safety. [Internet]. 2013 Available from: <http://www.who.int/features/factfiles/roadsafety/en/index.html#> [Last cited on 2013 May 22].
2. Dhondt S, Macharis C, Terryn N, Van Malderen F, Putman K. Health burden of road traffic accidents, an analysis of clinical data on disability and mortality exposure rates in Flanders and Brussels. *Accid Anal Prev* 2013;50:659-66.
3. Iteke O, Bakare MO, Agomoh AO, Uwakwe R, Onwukwe JU. Road traffic accidents and posttraumatic stress disorder in an orthopedic setting in South-Eastern Nigeria: A controlled study. *Scand J Trauma Resusc Emerg Med* 2011;19:39.
4. World Health Organization. Global Plan for the Decade of Action for Road Safety 2011-2020. [Internet]. 2010. Available from: http://www.who.int/roadsafety/decade_of_action/plan/en/ [Last cited on 2013 Jun 05].
5. Kanchan T, Kulkarni V, Bakkannavar SM, Kumar N, Unnikrishnan B. Analysis of fatal road traffic accidents in a coastal township of South India. *J Forensic Leg Med* 2012;19:448-51.
6. Yongchaitrakul T, Juntakarn C, Prasarthitha T. Socioeconomic inequality and road traffic accidents in Thailand: comparing cases treated in government hospitals inside and outside of Bangkok. *Southeast Asian J Trop Med Public Health* 2012;43:785-94.
7. Shaikh MA, Shaikh IA, Siddiqui Z. Road rage and road traffic accidents among commercial vehicle drivers in Lahore, Pakistan. *East Mediterr Health J* 2012;18:402-5.
8. Bogstrand ST, Gjerde H, Normann PT, Rossow I, Ekeberg O. Alcohol, psychoactive substances and non-fatal road traffic accidents--a case-control study. *BMC Public Health* 2012;12:734.
9. Moafian G, Aghabeigi MR, Heydari ST, Hoseinzadeh A, Lankarani KB, Sarikhani Y. An epidemiologic survey of road traffic accidents in Iran: Analysis of driver-related factors. *Chin J Traumatol* 2013;16:140-4.
10. Sanchez-Mangas R, García-Ferrrer A, de Juan A, Arroyo AM. The probability of death in road traffic accidents. How important is a quick medical response? *Accid Anal Prev* 2010;42:1048-56.
11. World Health Organization. Global status report on road safety - Supporting a decade of action, 2013. Geneva: WHO Press; 2013.
12. Jannot AS, Fauconnier J. Hospital information system performance for road traffic accidents analysis in a hospital recruitment based area. *Rev Epidemiol Sante Publique* 2013;61:213-20.

How to cite this article: Shrivastava SR, Shrivastava PS, Ramasamy J. Global plan for the decade of action for road safety: Expectations from developing nations. *Saudi J Med Med Sci* 2014;2:57-8.

Source of Support: Nil, **Conflict of Interest:** None declared.