
Report by the Secretariat

1. More than 1.2 million people are killed every year in road traffic crashes and up to 50 million are injured. Road traffic crashes are the leading cause of death among those aged 15 to 29 years and rank as the ninth cause of death globally. If appropriate steps are not taken, road traffic crashes are predicted to become the seventh leading cause of death by 2030.1

2. Low- and middle-income countries bear a particularly high burden of the fatalities: although these countries account for only half of all vehicles registered globally they record about 90% of the overall number of road traffic deaths. The magnitude of these deaths varies by WHO region, with the lowest fatality rates in the European Region (9.3 deaths per 100 000 people) and the highest in the African Region (26.6 deaths per 100 000 people).

3. About half the people killed on the roads are vulnerable road users (for example pedestrians, cyclists and motorcyclists). The risk of crash injury also depends on age (it is higher among children and young and elderly people), gender (about three quarters of all road traffic deaths occur among males) and disability.

4. Road traffic injuries have significant consequences on public health and development. Millions of people who are injured in road traffic crashes end up in hospital, incurring significant medical costs to both their families and governments. In addition, some families are pushed into poverty through the loss of income due to death or injury of a breadwinner. Low- and middle-income countries are estimated to lose up to 5% of their gross domestic product as a result of road traffic crashes.2

5. Countries should adopt a “safe system approach” in order to decrease road traffic fatalities and injuries. This approach recognizes that the human body is vulnerable and that human beings make mistakes; it compensates for these fallibilities by facilitating interventions targeted at not only road

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users but also vehicles and the road infrastructure. Application of such an approach requires multisectoral engagement and cooperation between health, transport, education, interior (police) and finance sectors.

6. The combination of the implementation of good practices (such as the adoption of good laws and their enforcement), awareness raising through social marketing, improvements in roads and vehicles, and better post-crash responses has led to significant reductions in deaths and injuries in many countries. The promotion of equitable access to sustainable mobility, including safe public transport and safe walking and cycling, is a key element for reducing deaths and injuries, and brings other benefits, such as reduced emissions and better health resulting from increased physical activity.

7. The collection and analysis of data are crucial to understanding and improving road safety. Some Member States have put in place scientific and consistent systems to collect and analyse data, but many others still need to implement robust systems that follow international standards regarding data collection.

8. The United Nations General Assembly, in several resolutions since 2003, has called attention to the global road safety crisis and the need to implement good practices. In resolution 58/289 on improving global road safety (2004) it invited WHO, working in close cooperation with the United Nations regional commissions, to act as a coordinator on road safety issues within the United Nations system. The World Health Assembly accepted this invitation in resolution WHA57.10 in 2004, and WHO subsequently facilitated the creation of the United Nations Road Safety Collaboration.

9. The Collaboration is an informal consultative mechanism whose goal is to facilitate international cooperation and to strengthen global and regional coordination, for instance through joint action on United Nations global road safety weeks and supporting the implementation of good practices in countries. Twice a year it gathers more than 80 partner organizations (including Member States, bodies in the United Nations system, multilateral organizations, academic institutions, foundations, civil society and private-sector entities) to coordinate road safety activities, such as the road safety weeks. Some of its members have also collaborated to developing normative guidance (published as a series of manuals for decision-makers and practitioners).1

10. In 2009 the Government of the Russian Federation hosted the first Global Ministerial Conference on Road Safety (Moscow, 19–20 November 2009), at which delegates adopted the Moscow Declaration.2 In that text, they invited the United Nations General Assembly to declare 2011–2020 as the Decade of Action for Road Safety.

11. In 2010 the General Assembly, in resolution 64/255 on improving global road safety, duly proclaimed the period 2011–2020 as the Decade of Action for Road Safety, with a goal to stabilize and then reduce the level of road traffic fatalities. It also called for action to increase the proportion of countries with comprehensive legislation on key risk factors from 15% to 50%.3 The Decade of Action, launched in more than 100 countries, has generated considerable results internationally, including the creation of the Global Alliance of Nongovernmental Organizations for Road Safety, the

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series of WHO’s global status reports on road safety, additional philanthropic donations for implementing good practices at country level, and national and local improvements of laws, enforcement and awareness.

12. The Secretariat has contributed to the Decade of Action inter alia by:

- providing leadership through coordination of the United Nations Road Safety Collaboration and providing secretariat support to the Decade of Action
- facilitating the work of the Friends of the Decade of Action for Road Safety 2011–2020, an informal group of Member States and international agencies that promotes the implementation of the Global Plan for the Decade of Action for Road Safety 2011–2020
- monitoring and implementing good practices through the periodic publication of global status reports on road safety
- providing technical support to countries to improve their road safety legislations and to implement hard-hitting social marketing campaigns; these efforts have resulted in increased rates of wearing seat-belts and motorcycle helmets and use of child restraints and reduced rates of speeding and drinking and driving in several countries
- providing capacity-building, guidance and technical support to Member States to improve emergency medical services for people injured and disabled in road traffic crashes, for instance through promotion of a single emergency national access number and improved emergencies training programmes for health sector professionals.

13. In September 2015, road safety was targeted in the 2030 Agenda for Sustainable Development adopted by the United Nations General Assembly. Target 3.6 calls for reducing by 50% road traffic deaths and injuries by 2020 and Target 11.2 calls for providing by 2030 access to safe, affordable, accessible and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, women, children, persons with disabilities, and older persons.

14. Participants at the 2nd Global High-level Conference on Road Safety: time for results (Brasilia, 18–19 November 2015), including more than 2000 delegates and 52 ministers and deputy ministers from 122 countries, adopted the Brasilia Declaration which inter alia encouraged WHO to facilitate a process that will lead to the definition and use of national, regional and global targets and indicators to reduce road traffic deaths and injuries, and to engage in the process that will lead to the definition and use of indicators for the road safety-related targets in the 2030 Agenda for Sustainable Development.

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15. The Global status report on road safety 2015\(^1\) described some of the improvements in road safety in the first three years of the Decade of Action, including a stabilization of the number of road traffic deaths in the world at 1.25 million despite a 16% increase in the number of vehicles globally. It reported that 17 countries had improved their legislation on at least one key risk factor. However, it also showed that considerable action is still needed: although more than half WHO’s Member States have good laws on seat-belts, only about a quarter have good laws on use of child restraints, speeding in urban areas and wearing of standard motorcycle helmets; only one-fifth of countries have good laws on drinking and driving. Furthermore, policies promoting walking and cycling are being implemented in only 92 countries.

**ACTION BY THE EXECUTIVE BOARD**

16. The Board is invited to note the report.