

# 6.5 Addressing the challenges of the UN Decade of Action for Road Safety (2011–2020): outcome of the Second Global High-level Conference on Road Safety – Time for Results

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## In focus

Prepared at the request of a Member State, the Secretariat report ([EB138/12](#)) provides information on the progress made in attaining the objectives of the [Decade of Action for Road Safety 2011–2020](#) and on the [outcomes](#) of the Second Global High Level Conference on Road Safety: Time for Results, held in Brasília on 18 and 19 November 2015.

There may be some focus on [SDG Goal 3, Target 6](#): “By 2020, halve the number of global deaths and injuries from road traffic accidents”.

## Background

[World report on road traffic injury prevention](#), produced in 2004 and co-sponsored by WHO and WB.

More reports [here](#).

## PHM comment

The title of this agenda item refers to road safety, not road trauma, and certainly not the burden of disease attributable to personal motorised transportation. The body of the report speaks about road trauma but makes no reference to physical inactivity or air pollution.

A discursive shift has taken place in WHO's language practices since the 2004 [World report on road traffic injury prevention](#). Since then road safety appears to have moved to centre stage. This shift from *road trauma* to *road safety* has the effect of excluding transport planning and land use planning from consideration and diverting attention from the wider links between motorisation and the burden of disease, including that associated with physical inactivity and air pollution.

The 2004 [World report on road traffic injury prevention](#) focused on a range of factors which contribute to death and injury on the roads. In a section headed 'factors influencing exposure to risk' it discusses 'motorisation', transport, land use and road planning (p74). Clearly the number of people exposed is a major determinant of the number of people killed or injured.

The discourse shifted significantly after WHO was appointed as coordinator for the [UN Road Safety Collaboration](#) in 2004; the [Decade of Action for Road Safety](#) 2011-2020 was launched; two global ministerial conferences on *road safety* were held: [2009 in Moscow](#), and [2015 in Brasilia](#); and a series of global status reports on *road safety* were produced by WHO in [2009](#) and [2013](#) and [2015](#).

WHO's [Global Status Report on Road Safety 2015](#) is almost entirely about driver and rider behaviour, with short sections on safe vehicles and safe roads but nothing about public transport, urban planning or pollution control.

In many countries the political power of the automobile industry and urban developers has shaped urban planning around roads with the neglect of public and active transport infrastructure.

It appears that the UN and WHO are exposed to similar pressures.

In April 2015 the UN announced that Jean Todt, the president of the Fédération Internationale de L'Automobile (FIA), had been appointed as the [UN Secretary General's Special Envoy on Road Safety](#) ([bio here](#)).

The FIA is the governing body for world motor sport and the federation of the world's motoring organisations, both of which are heavily supported by the automobile industry.

WHO partners with the FIA Foundation in managing the [Road Safety Fund](#) and partners with FIA and the FIA Foundation (and the WB and a group of countries) in the '[Friends of the Decade of Action on Road Safety](#)'.

The UN Road Safety Collaboration, which WHO coordinates, is a typical [global public private partnership](#) with intergovernmental bodies, governments, NGOs and private sector entities. Among the latter are a tyre manufacturer, a steel manufacturer and the international Motorcycle Manufacturers Association, as well as the FIA.

PHM notes (para 9) that United Nations Road Safety Collaboration only attracts around 80 partner organisations to its twice yearly gatherings. In fact there are only 14 Member States participating in the Collaboration and several of these are sub-national.

From a public health point of view there is considerable scope for linking the objectives of cutting greenhouse gas emissions, controlling NCDs and reducing road trauma. However, there are no references to NCDs, greenhouse gas emissions, air pollution or physical exercise in EB138/12 (and only one mention of NCDs in the Brasilia Declaration). Greenhouse gas emissions, air pollution and physical exercise are all mentioned but only once each in the 2015 global status report.

There are frequent references in both the policy declarations and various reports to the need for an intersectoral approach to road safety. However in this context intersectoral appears to mean the engagement of health with police, auto design standards and road planning. If the slogan of 'One WHO' was being taken more seriously there might be some exploration of the scope for synergies with respect to the advocacy and mobilisation around road trauma, NCDs prevention, air pollution control, greenhouse gas reduction and urban / transport planning.

WHO and the UN are working closely in the field of road trauma / road safety with private sector entities with secondary interests in the policy outcomes. The WHO is producing documents which take a very narrow approach to road trauma policy, neglecting both the urban planning side and the synergies with air pollution and physical activity. The conjunction of these relationships and policy positions raise questions about conflict of interest and improper influence over WHO's activities.

Government investment in urban development and public transport has been under increasing pressure through decades of 'structural adjustment' and 'austerity' (and neoliberalism more generally) which have weakened governments' capacity and willingness to undertake the necessary urban planning and infrastructure development. According to the neoliberal doctrine money transferred from households to auto manufacturers is good but money transferred through taxation to building decent transport and decent cities is somehow wasted.

In this context PHM notes the interest of FIA, and Jean Todt personally, in promoting road investment through their involvement in national 'road assessment programs' and iRAP (the International Road Assessment Program). At the heart of 'road assessment' is a standardised five star rating system, protocols for risk mapping and guidelines for lobbying for public investment in roads. Jean Todt speaking as the Secretary General's Special Envoy celebrated the star rating system as a guest speaker at [EuroRAP meeting in Sept 2015](#) in London ([speech here](#))

The iRAP is also in a partnership with the UN under the [2030 Agenda for Sustainable Development](#). Under the [Agenda](#) there are two SDGs dealing with road trauma and road safety:

- 3.6: By 2020, halve the number of global deaths and injuries from road traffic accidents;
- 11.2: By 2030, provide 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.

The iRAP / SDG partnership appears to have '[generous support](#)' from the World Bank, the FIA Foundation and the Road Safety Fund (jointly managed by WHO and FIA Foundation). It also has funding agreements in place with other development banks. It boasts total funding of USD50m. Safer roads clearly has a place in achieving SDG3.6 although containing motorisation could well be more effective in reducing road trauma as well as addressing global warming. The contribution of iRAP to SDG11.2 would have to be marginal.

PHM is, in principle, in favour of safer roads but there are opportunity costs of investing disproportionately in lobbying for safe roads (and in the road construction which follows from such lobbying). The efficiency question is whether investing comparable resources in lobbying for better urban planning and public transport could deliver a greater yield in terms of burden of disease (including road trauma, physical activity and air pollution) as well as reducing greenhouse gases.

It appears that this is not a question that WHO has asked. Is this because of its close relations with organisations which have secondary interests in the policy outcomes?

This item should provide a useful case study for exploring the application of the emerging FENSA principles, the rules governing WHO partnerships, and risk management in the face of conflict of interest.

## Notes of discussion at EB138

### Item commenced Thirteenth Meeting (am of Day 6)

Docs:

- [EB138/12](#)
- [EB138/CONF.4](#) Draft resolution, *Addressing the challenges of the United Nations Decade of Action for Road Safety (2011–2020): outcome of the Second Global High-level Conference on Road Safety – Time for Results*, proposed by Brazil and the Dominican Republic
- [EB138CONF.4 Add. 1](#) Implications

**CHAIR:** under this item, there is a draft resolution, which has been proposed by Brazil and the dominican republic.

**BRAZIL:** welcomes the report. several points in this report echoes the outcome of the conference in Brasilia. underlining that there was a mutlistakeholder approach. Reduction of traffic death: big issue. The Declaration of Brasilia addresses prevention, protection of users, etc. The idea is to endorse the Brasilia declaration by a draft resolution.

Three para remains in brackets: urging EB to continue discussion on this draft in an intersession in order to present the resolution to WHA.

**JORDAN:** welcoming the report on the decade of road safety. Injuries and road traffic accident is an international problem especially in EMRO; SDGs: there are two goals related to road safety. All the efforts will be useful if we don't implement measures. There are many challenges remaining: emergency services, improvement in legislation, etc. They support the adoption of a strong draft resolution. Road traffic is a heavy burden. Urging WHO to provide support in the field of multistakeholder framework.

**CONGO:** on behalf of African group. Region happy to see progress made. 1.3 million people die in traffic accident, increased NCDs, road accident one of top three causes in young people. Not only urban, extending to rural areas issue too. Given financial crisis and lowering of raw materials prices, problem of income to region. So ask for increased financial assistance for technical interventions, on range of issues. PHC and supporting regional offices is important. Notes report and call for adoption of resolution.

**DOMINICAN REPUBLIC:** welcoming the report and the submission of the resolution. The fatality and road accident have reached epidemic levels in certain countries. Underlining that young people's are probably the most affected. DR has a high rate of mortality due to traffic accident, which has also an enormous impact on the resources. Underlining the need to improve facilities, like pedestrians, seat belt, etc. They are trying to raise awareness to improve the checks of vehicles, etc.

**UK:** recognise leadership of Brazil and hosting meeting last year. UK happy recognises the paper. But much more can be done around the world. Proud of themselves and will share their achievements. Road safety campaign has been

**RUSSIAN FEDERATION:** appreciate the conference held in Brasilia on road safety (2015). We have seen some good results. Russia has paid great attention on this issue. Highlighting the importance to have a good approach in order to solve the problems of road safety. The measures are taken in partnerships with other stakeholders. Over the last few years, they have reduced road fatality by a quarter: they also tried to improve protection of vulnerable users of road (children, etc.)

**SAUDI ARABIA:** endorse the statement by Jordan. Road safety is major challenge in case of public health in Saudi Arabia. Saudi Arabia has implemented new strategies to save life that WHO can learn from. Importance of providing first aid, call for scientific studies and research to understand the equipment that can help (GPS) as well as

**THAILAND:** injuries due to traffic accident are avoidable. We need to avoid the deaths related to traffic accident. WHO should help states to implement strategies and capacities in order to improve this situation (under the framework of the UHC); we need to penalize some dangerous behaviour. Urging to help MS to strengthen the multisectoral approach, to take good measures.

**USA:** second high level conference in Brazil opportunity to take stock on progress and accelerate progress that is already behind." key public health role" in reaching related SDG. Don't want to use term traffic or road 'accidents' as many are preventable. Looking forward to discuss it in WHA.

**ARGENTINA:** thanks secretariat for the report. welcoming progress made. urging WHO to play a greater role in this field. We need to include road safety in the health care strategies, we need a methodology to address this issue, we need guidelines to treat traffic accidents. We need to involve all the relevant sectors.

**CANADA:** thanks Brazil for initiative. welcome results. important public health issue, but as vehicles, infrastructure, trauma response and campaigns, getting better. still leading cause. now, leverage technology to improve congestion and other issues. supports the resolution.

**KAZAKHSTAN:** thanks the secretariat for the report, which contributes to better awareness of the issue of road safety. Underlining that they are depending on infrastructures in order to ensure road safety. Young people are too often victims. Underlining the social aspect of road traffic. underlining importance to raise awareness on the use of alcohol and driving.

**NAMIBIA:** aligns with CONGO for AFRO. Moscow declaration of 2009 mentions leadership of government in designating authorities to coordinate road safety at all level. note that road safety is in SDG. more focus should be given on road users. enforcement of road safety, restriction of blood alcohol levels, safe walk-ways and public transports, vehicles standards are important elements. welcomes WHO leadership for developing specific indicators to monitor this framework.

**SURINAME:** welcoming the report. They don't want to be overburdened by traffic accidents. They wish to formulate national regulations. They support the draft declaration.

**CHAIR:** that was sweet! xoxoxo

**Philippines:** road traffic injuries have far reaching implications for health systems, and families in general. link with NCDs and multi sectoral approach is key. who to gather actors for vigorous response. sharing modalities would be useful;. supports resolution.

**CHINA:** improvement of road safety is important. LMICS are particularly affected. the implemented some measures. the criminalized some behaviour in the road. they enhance their expenditures in order to improve road safety. They support the decade of action. they worked in partnership with many IO. urging MS to take some measures in order to improve road safety. Supporting the draft resolution. OP2: we should add a phrase after function of public services: multisectorial partnerships...

**JAPAN:** leading cause of death and disability that requires more attention. preventable and actions for prevention, such as belts are very effective compared to other preventive measure.

**SOUTH AFRICA:** AFRO. Thank secretariat for the report. road safety is an important area of work. supporting the draft resolution and they want to cosponsor.

**FRANCE:** promote road safety is a public health challenge, response has to be multisectoral. we have done it and got great results. participated in conference and aware of initiative taken by Brazil, supported the resolution of Brasilia and trust the process to remove the last square brackets in the resolution under discussion.

**MOROCCO:** we need to take suitable measures in order to reduce the injuries and deaths. They achieved to reduce the number of death and injuries. A new strategy is going to be implemented. The new strategy has defined targets in order to reduce injuries and deaths. The strategy is in line with the WHO's recommendations.

**LUXEMBOURG:** leadership of brazil. cosponsoring country, needs to be mentioned.

**KENYA:** commend the secretariat for the preparation of the agenda item. Data on road crashes show that there is huge burden related to traffic accidents. Those injuries and deaths are avoidable. Significant progress has been made in order to reduce the burden. Requesting WHO to continue support MS in development and capacities. Supporting the draft resolution, and recommend the adoption to next WHA.

**GUATEMALA:** Thanks Brazil for leadership and would like to be cosponsor

## **NGO**

MMI: <https://apps.who.int/ngostatements/meetingoutline/7>

*Chair, WHO's relationship with the Federation Internationale de l'Automobile (FIA) raises concerns about conflict of interest. The FIA is the peak body globally for motor sport and the international federation of automobile clubs (both of which are supported by the automobile industry). The FIA is clearly conflicted in relation to road injury prevention as it goes against the promotion of motorized transport.*

*WHO partners with the FIA in the Road Safety Fund and in the 'Friends of the Decade of Action on Road Safety'. In April 2015, the President of the FIA was made UN Secretary General's Special Envoy on Road Safety.*

*WHO's 2004 report on road injury prevention highlighted 'motorisation' as increasing exposure to road risk. Clearly the number of people exposed is a major determinant of the number of people killed or injured.*

*In contrast, the report presently before the Board is largely about drivers, vehicles and roads but very little on public transport, urban planning or demotorisation. In fact the report cites iRAP, the International Road Assessment Program, which is a program sponsored by the FIA and directed in part to promoting further investment in road building.*

*Chair, better roads are urgently needed in many cities, towns and villages in the global South. However, a balanced approach, including attention to urban planning, public transport and active transport would yield important benefits in terms of physical activity, clean air and reduced greenhouse gas pollution as well as reduced road traffic injury.*

*The Board needs to satisfy itself that WHO's work in this important area is not being compromised by its close relationship with the FIA.*

**ADG/NMH:** he will attend the meeting in New York related to the use of drug.

**Brasil:** thanks DG for coming to Brasilia. Thanks EB to move forward on resolution and towards adopting it at the WHA. thanks new co sponsors. thanks to Russia for taking the lead in 2009. thanks to colleagues in brazil to make the conference possible.

**Chair:** If the EB agrees, they will continue the discussions on the draft resolution. Report is noted,

Item is closed.