



Photos by: LLia Goronov, Ell Cheyney y Clamur



## The Newsletter of the Road Traffic Injuries Research Network (RTIRN)

[www.rtirn.net](http://www.rtirn.net)

October-December 2010

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## Message from the RTIRN Board



Dear colleges and friends,

Riding a motorcycle is an exciting experience: one can feel the gentle touch of the air on our face, the sensation of freedom; probably is the closest thing to flying. But the experience could end up in tragedy. Motorcyclists have the highest fatality rate per 100 million passenger kilometer than any other way of commuting in public highways (2.2 times the risk experience by pedestrians, 2.6 of cyclists', 19.7 of car occupants, and 197.1 of public transport commuters). The proportion of Road Traffic Injury (RTI) deaths associated to motorcycles varies greatly between countries: 1% in Kenya, 6% in Mexico, 25% in France, 58% in Malaysia, 61% in Indonesia and 70% in Thailand. In Mexico some mothers ironically tell their children to buy their own coffin before a motorcycle since they will not be able to pay for their funeral expenses. For those who survive a motorcycle collision, the cost associated to RTI is higher than that observed in train, bus and car related injuries.

Those who travel by motorcycle should be clear that what they are wearing is their "bodywork". This highlights the importance of using the recommended personal protective equipment: a standard motorcycle helmet, with adequate face and eye protection as well as the proper clothing including a resistant jacket, long pants, boots and gloves. From this protective equipment we need to highlight that the use of a standard motorcycle helmet reduces the risk of dying in 40% and severe injuries in 70%.

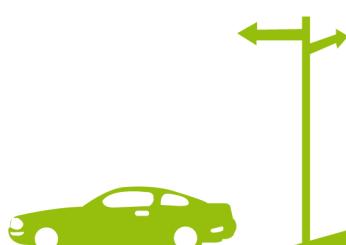
In spite of the risk that goes with this type of motor vehicle, the use of motorcycles is increasing all over the planet. The low cost of low cylinder models make them accessible for several low income populations that buy them to commute to their jobs, and end up using them as family vehicles (where we can find couples traveling with two, three or even more kids aboard). There is no doubt that this increase of use will translate in an increase of deaths and injuries associated to motorcycles, as it was the case in Vietnam where a 29% increase in the use of motorcycles brought a 37% increase in mortality due to RTI.

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Prevention of these injuries demand, and will continue to demand for many years to come, a great education, legislation and engineering effort. We invite you to join us in this effort so that every day we could see fewer injuries among people that make motorcycles a way of commuting and recreation.

**Alfredo Celis PhD**

RTIRN Board Member



## Message from the RTIRN Secretariat

Dear friends,

On recent days the RTIRN successfully organized its parallel session during the 10th World Conference on Injury Prevention & Safety Promotion in London, England. Over 120 people attended the session including all 22 researchers that received a scholarship from the RTIRN to attend the Conference. The session was a great opportunity to meet all the people that has been benefited by the Network's activities and projects and many other interested in the work we all are doing. For me, it was a great pleasure to meet you all there! We at the RTIRN would like to thank all the people that attended the parallel session and those who helped us in the organization of this event such as Andrew Bennet and Danielle Kelly and Becki Cross. Without them this wouldn't have been possible.

For the first time, the last issue of our Newsletter was translated to 6 different languages thanks to the invaluable help of some of our partners: Hamid Soori (Persian), James Yu (Chinese), Ha Nguyen (Vietnamese), Pascale Lanvers-Casasola (French), Secretariat staff (Spanish) and Eugene Rodrigues (Portuguese, in process). This was part of the effort that the Network is doing to break down the language barrier to increase access to its information for non-English speaking partners. We invite all of you to help us in disseminating this material.

In addition, we are proud to announce you that the online forum was just recently reopened. All partners have received the required information to be able to access the forum and are now able to participate on it. Please, feel free to use this tool to share your ideas, concerns and receive feedback on the work you are doing. We hope this would help us all to exchange experiences and information while facilitating networking activities. We invite all of those who attended the World Conference to participate in this initiative.

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We hope this issue that focuses on Motorcyclists would contribute in the road traffic injuries prevention agenda. Enjoy it!

**Ricardo Pérez-Núñez**  
RTIRN Secretary, 2010-2011



## Contributions

### ★ Motorcycle injury problem in the South East Asia (SEA) Region

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All 11 countries of the SEA Region have low or middle income and motorcycle is popular in most countries. They are not only used by men to commute to work or to transport goods, but also as



a family vehicle with father, mother and children riding altogether at one time. The drivers often have no license. In some countries, parents teach their children to drive motorcycle as early as 7 year old, so that they can buy stuffs from the market for them. Helmet wearing law is well enforced in Bhutan, Indonesia and Sri Lanka. Children are normally not enforced by the police even though the law does not exempt children. Maldives is the only country that has no motorcycle helmet law enforced.

In 2009, the cumulative registered number of motorcycle is 55.7 million. The highest number is in India (51.9 million), followed by Indonesia (18.8 million) and Thailand (17.8 million). The percentage of registered motorcycle among all types of registered vehicles is 55.7 % for the region. At the country level, Nepal ranked first (81.8%) then Maldives (79.9%) and Indonesia (75.2%). This high percentage of registered motorcycle has not been seen in any high-income countries, where registered motorcycle is only less than 4% of all.

Motorcycle related injury deaths in the SEA Region are roughly about 5 persons per hour. Recent data has shown that this silent epidemic has spread to children. WHO SEARO has shared the experience of motorcycle related injuries among children in Thailand and the achievement in setting national standard of child MC helmet, having them produced by manufacturers within the country and promoted wearing in children, to other countries. Within 2 years, Indonesia has achieved the same. The related information was included in several of our factsheet and publications which were disseminated to multisector. WHO SEARO is reviewing several issues related to children and motorcycles and also supporting the experts from multisector to meet and discuss prevention of motorcycle related injuries in children in the region. A fact sheet on "Motorcycle related injuries- the silent epidemic" is now under process. A WHO resolution on injury prevention and safety promotion containing the required actions regarding the problem has been passed recently in the 63rd session of the WHO Regional Committee for South-East Asia.



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### ★ Motorcyclist's deaths in the Americas



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There is an increase in the use of motorcycles in the region in the recent years and, as a consequence, an increase number of deaths among motorcyclists and passengers of



this vehicle, also there is some data from the victims run over by them. The causes of this augment are well studied in countries as Brazil and Colombia, for instance. The low cost for buying a motorcycle, the lack of affordable and safe transportation are some of these determinants.



Overall, deaths involving two-wheeled and three-wheeled vehicles accounted for 24% of all road traffic deaths in the Americas which represent 34.140 lives lost according to the Regional Status Report on Road Safety, 2009. Data about motorcyclist's deaths are available for 26 countries in the region. The analysis of this information showed that the percentage of motorcyclist's deaths varies among countries. Brazil, Colombia, Costa Rica, Paraguay and Suriname this percentage is higher than 20%. Bahamas, Cuba, Guatemala, Nicaragua, Puerto Rico and USA this percentage are from 11% to 19%. In Colombia the number of deaths in this group is higher than pedestrian deaths that used to be the main victim in Latin American countries.

This problem deserves a special attention of the policymakers to know better this situation in order to reverse the increase trend and prevent deaths and disabilities.

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### ★ Patterns of Injuries in Hospitalized Motorcyclists in Nakuru, Kenya.



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Motorcycles have become a common mean of transportation in Kenya. However, the burden of motorcycle crashes is a source of concern. This study aimed at determining the pattern of injuries sustained by motorcyclists hospitalized at the Rift Valley Provincial General Hospital, a major public hospital in Nakuru, Kenya. A cross-sectional study spanning from July 1st 2008 to 30<sup>th</sup> June 30<sup>th</sup> 2009 was conducted. A sample of 60 hospitalized motorcyclists was selected. Medical records of the patients were used to identify data on patient demographics, nature of injury (body region and severity) and outcomes. Motorcycle crash victims constitute 1.7 per 1000 admissions in the studied hospital. These patients had a mean age of 30.65 years (SD = 15.83) and 87 percent were males. Most of these patients (48 percent) sustained injuries of extremities and pelvic girdle, while 26.7 percent had external injuries and 23.3 percent had head and neck injuries. Fractures were the most commonly recorded discharge diagnosis. Sixty-two percent of the hospitalized motorcyclists had major trauma (AIS ≥ 3). This indicates that a majority of motorcycle crash victims suffer serious, severe and critical injuries. Only one death was recorded. Thirty percent of the surviving patients needed further medical attention upon discharge. Motorcycle crashes are therefore an emerging public health problem that warrants road safety campaigns.



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### ★ Motorcyclists Safety in Iran



**Hassan Abdoos (Iran)**

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According to death registry system near to 6000 motorcyclists die annually



due to traffic injuries which stand for one forth of traffic fatalities in Iran. The higher severity of injuries belongs to roads with 60% of deaths compared to 40 in urban areas. All the riders injured are men with 80% vs. 20 for billions of which only 5% are females. Risky riders aged 18-35 include 60% of deaths, most of them were not educated more than high-schools and about 9% are under the age to have driving license. Half of deaths reported before getting the injured to hospitals and about two third of cases were due to head injuries. Although the mandatory law for wearing helmet ratified in 1997, but the usage rate is rare (21% among riders & 3% for billions).



That's why the motorcyclists in Iran are indeed vulnerable in traffic. Since 2005 a variety of actions are implemented by several states that gathered in a manual for motorcyclists safety improvement by which each state could follow preparing its own action plan. The main focus is on the rider education, enhancing motorcycle visibility, providing suitable & low-cost helmets, supply of necessary infrastructures, enforcement motorcyclist's violations and evaluation of the results.

## ❖ Epidemiological Situation of Motorcyclist Injuries in Malaysia



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Motorcycle represents 47% of the total vehicle registered on the Malaysian road. In any crashes, often motorcyclist has to bear most with the injury consequences. This can be seen in the statistics where annually around 60% of both road traffic fatalities and injuries were motorcyclist. Motorcyclist injuries mainly occurred in the young adults, age

between 21 to 35 years old with 40% of overall injuries and followed by adolescents with age between 16 to 20 years old with 13%. Males were more commonly involved in motorcycle crashes (90%) as compared to females (10%). Most of the motorcycle crashes occurred before and after office hour; 7AM – 9AM and 5PM – 7PM respectively. Based on the locality, rural area has the highest crashes followed by built-up area, urban and city. A small scale study was conducted in the month of April 2010 to determine the injury region of motorcyclist using Injury Severity Score (ISS) in 6 hospitals around the capital city of Kuala Lumpur. It was found that extremities/pelvic girdle were the most body parts injured, 57.2% of the cases, followed by external (15.4%), head & neck (11.9%) and face (10.2%). Other regions include thorax (3.2%) and abdomen/pelvic content (2.2%).



## ❖ Motorcycle Safety Issues in Kenya



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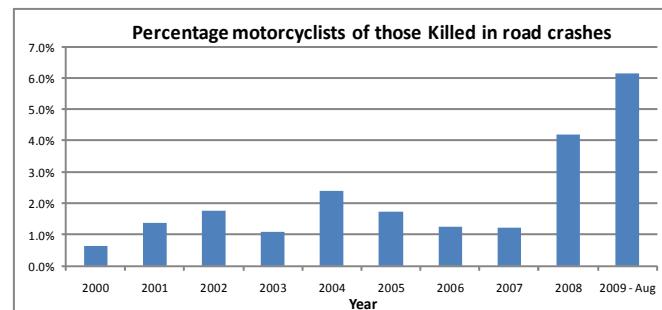


As a road safety problem, motorcycles have traditionally been associated with



Asia rather than Africa, but this is now changing. In Kenya the “boda-boda” bicycle taxis are being replaced by motorcycles. This is apparent from recent photographs of the street scene of Kisumu.

Young people are becoming motorcycle taxi operators to decrease unemployment. Motorcycles may have a role to play in improving employment and accessibility, but this should not be at the cost of road safety. However recorded motorcycle fatalities have increased 10-fold over the last decade with particularly high growth in 2008/2009.



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009 - Aug
All Persons Killed	293	271	288	278	244	251	291	273	324	291
Motorcyclists Killed	18	38	49	33	54	44	34	35	152	164
% Motorcyclists Killed	0.6%	1.4%	1.8%	1.1%	2.4%	1.7%	1.3%	1.2%	4.2%	6.1%

The percentage of motorcyclists amongst those reported killed in road crashes in Kenya (Data from Kenya Traffic Police)

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TRL, with Howard Humphreys and iTech, identified a large number of actions after conducting a broad road safety review (as part of the World Bank NCTIP project), four of these being focused on improving motorcyclist safety:

- Training/testing of motorcycle riders needs improvement
- Riders need to be protectively/conspicuously dressed
- Motorcycles as taxis needs to be regulated
- Public awareness needs raising on the risks associated with motorcycles

TRL will work with stakeholders to action these issues over the next three years as part of our continuing road safety project in the country.

## ★ Helmet Promotion and Enforcement in Cambodia

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Road crashes are a major cause of deaths, injuries and disabilities, especially among young road users. Lack of helmet wearing among motorcyclists is a major contributing factor to head injuries. 80% of motorbike riders were not wearing helmets in 2007. Based on the observation, a helmet promotion campaigns were implemented by several main road safety actors in Cambodia (Handicap International Belgium, GRSP, WHO, NRSC, MoI, MoH, CRC, CRY,...) in combination with the enhanced law enforcement. Ranges of awareness tools were developed in addition to public awareness events and multi media campaigns. At the same time, professional



development courses were also organized with practical exercises to build capacity of traffic police on the traffic law enforcement. After the several years of the intervention, the project has significantly contributed to the increase of helmet wearing rate among motorbike drivers from 24% in 2008 to 85% in 2009. Additionally, the head injuries among motorbike fatalities also decreased from 86% in 2008 to 76% in 2009.

This project gave the government the motivation and confidence to ramp up enforcement of the helmet law in later years. An integrated-campaign of Helmet Wearing Promotion and Enforcement in Cambodia was a good example tackling the situation while the government still lacks resources for implementation. Challenges remain however. There is no helmet law for motorcycle passengers (including children) so the rate remains low. Helmet wearing rates in the rural areas are noticeably lower than in the urban areas and the wearing rate was much lower during the night-time, compared to the day time.

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### ★ **The impact of the education of motorcyclists on the road safety in Yaoundé-Cameroon**



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Several factors were identified within the framework of the research of the prospects for improvement of the road safety by the Ministry for transport in Cameroon. As regards the means of transport by Motorcycle, commonly called "mototaxi", a study entitled "the challenges of road safety in urban environment in Cameroon, case study of mototaxi in Yaoundé" was led to the University of Yaoundé II by a team that I'm a member. This identified the level of education of the mototaximen like factor of road insecurity

Thus, a survey carried out into the level of education of the mototaximen reveals that 70.4% of the latter have a low level of education; that the mototaximen in Yaoundé carry on the activity without driving licence because, 2.2% only had a driving licence category "A" as requires the law No 2008/3447/PM of December 31, 2008 which governed the activity of the mototaxi.



We have thus to observe that the low level of education is the cause of the road insecurity related to this activity; which represents according to the Ministry of transport 41% of the road accidents in Cameroon

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### ★ **Argentina helmet use**

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In Argentina, despite the lack of systematic and accurate data, some specialized entities such CESVI (Centro de Experimentación y Seguridad Vial) have reported an increase in crashes involving two-wheelers. Additionally, it is known that since 2007 the number of motorcycles has



significantly grown exceeding car sales. Also, like in others developing countries, the use of helmet is low in spite of having a mandatory helmet use law. Nonetheless and despite the scarce number of studies regarding helmet wearing, low rates have been identified in different geographic regions. In Santa Fe city studies show 12 % wearing prevalence, in Buenos Aires (CABA) such prevalence reached 53%, in Neuquén city 32 % and, in Mar del Plata city, data reported 40 % wearing prevalence in 2006. Studies carried out in this last city show a decrease in the wearing rate (36%) for the year 2008.

Several factors were identified in relation with the helmet wearing. Motorcycle passengers were helmeted less frequently than motorcycle drivers were (39.3% vs. only 23.7% passengers). Use among women was greater than in the men. Variations in use depending on weather conditions (drivers are more likely to wear helmets under rainy conditions than under good weather), type of vehicle ridden (for off-road type users, the rate wearing it is lower than other type of vehicle), time of day (helmet use is lower in the evenings and nights than during the day), part of the week (weekend show a 45% reduction in helmet use compared with weekdays), and presence of a license plate (a reduction in helmet use is observed in vehicles with no plate). Results contributed to a better understanding of the factors involved in helmet use and evidenced the need to make greater efforts to enforce helmet wearing regulations and to intensify motorcycle riders' education.

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## ★ Motorcycles impose risk on vulnerable road users in the capital of Iran

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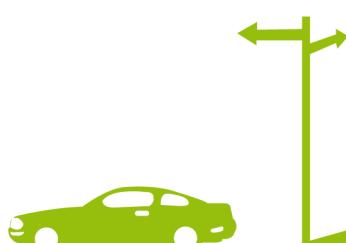


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Motorcycle is the vehicle of interest among young men of lower income class in Iran. It is used to transport some goods in crowded business areas of many cities in this country. High velocity, low price and freedom in traffic, make it the favorite vehicle for many low income people. However, it provides little physical protection to its occupants. In a population based study took place in the year 2009 in the capital of Iran, the collision traffic injury for motorcycles occupants was 10 folds more than car occupants and about 45% of all road traffic injuries had occurred among motorcycle riders. On the other hand, motorcycle riders are at risk for non-collision traffic injuries such as fall injury that is not the case with other motorized vehicles.

There are regulations for motorcycle riding and helmet use in Iran; however, the law is not enforced as strongly on motorcycle riders. It is not unusual for a motorcycle driver to ignore the red light, and the police officers usually appear tolerant to their behaviors. This results in risky driving behavior of motorcycle riders and increased risk of traffic injury.

Motorcycle can impose considerable risk to other road users as well. In the above mentioned study, motorcycles were involved in about 40% of the traffic injuries that occurred for pedestrians while about 20% of householders had a motorcycle. Due to the lack of law enforcement, motorcycle riders may enter into traffic areas that are designed to be used by pedestrians only whilst this is not possible for other vehicles. Combination of high velocity of motorcycles and lack of effective separation policies from pedestrians could lead to this pattern. It is necessary to enforce law for motorcycle riders to protect them and other road users from preventable traffic injuries.



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## ❖ Motorcyclist and related injuries , Pakistan perspective



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Motorcycles are a common means of transportation in low-income and middle-income countries. Motorcycles comprise nearly half (48%) of Pakistan's registered transport vehicles and have had the highest growth, increasing from 120,000 to 750,000 units/year (Increase by 525%). During a 40-year period between 1956 and 1996, there was a 16-fold increase in the number of fatal motor vehicle accidents and a 14-fold increase in the total number of motor vehicle crashes among which mostly young men, 16-40 years of age are involved.



In 2008 in Karachi, a survey showed that Rider/Pillion Rider had a fatality rate of 37% and only 8% of the drivers wore helmets. Another study done in Karachi showed that motorcycles implicated 3% of road injuries of which the majority of drivers (90%) did not wear helmets, leading to head injuries and death. The government has tried to reinforce the helmet law by instructing the police to fine anyone riding without wearing a helmet, using the media as an awareness tool to highlight the

life saving potential of helmets and restricting the number of pillion riders as it is a common practice to have multiple pillion riders on a bike.

More resources are now being channeled towards research and implementation of appropriate interventions to decrease road traffic accidents involving two wheelers in Pakistan.



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## ❖ Motorcyclist: Intervention in Nigeria



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Motorcycle is a two wheel carriage and is used as a means of transportation. It accounts for a large proportion of all motor vehicles in most Low and Middle Income Countries (LMIC) including Nigeria. Due to their comparatively low cost, motorcycles tends to be the first affordable motor vehicles which can easily be purchased and used by young drivers for both private and commercial purpose. Motorcyclists have high-risk threshold due to limited training, driving in mixed traffic and general lack of immediate medical response.



The head and the spinal cord injuries are some of the epidemiological situation which motorcyclists encounter. These injuries most often result to death claiming life's of bread winners and leaving the attendant social problems. High speed drive has influenced motorcycle crashes and severity. Safety performance indicators have shown that most riders exceed speed limit of 50km/h and excessive



speed is assumed to contribute over 60% of crashes.

The new initiative policy interventions in Nigeria includes compulsory use of helmet, aggressive public enlightenment campaign, availability and affordability of standard helmet through government subsidy and future consideration of bike lanes. The free medical intervention strategy is one of the health system responses being explored by some States in the country.

## We welcome our new partners to the RTIRN

<b>Argentina:</b>	Virginia Valle, María Isabel Nucciarone
<b>Australia:</b>	Angela Watson, Chris Jurewicz
<b>Cameroon</b>	Joelle Tambekou
<b>India:</b>	Ashis Das
<b>Iran:</b>	Sima Masudi, Soheil Saadat
<b>Kenya:</b>	Geoffrey Mukiri Wagema
<b>Malaysia:</b>	Kavitha Manikam, Mohamed Norlen
<b>México:</b>	Erika Hernández Deheza
<b>Nigeria:</b>	Fidelis Chukwuka Nnadi
<b>Oman:</b>	Salim Said Alawahaibi, Kanwal Anila, Teik Hua Law
<b>Pakistan:</b>	Sana Ahmed Shahbaz
<b>Philippines:</b>	May G. Altarejos-Cueva
<b>Romania:</b>	Diana Rus
<b>Sri Lanka:</b>	Sampath Heenatymullage
<b>Sudan:</b>	Dyaeldin M. Elsayed
<b>Thailand:</b>	Penprapa Siviroj
<b>Togo:</b>	Sesso Gbéléou
<b>UK:</b>	Paul Andrew Pilkington
<b>USA:</b>	Daniel Khodabakhsh, Mike Wilson, Joyce C. Presley, Anuj Pradhan.
<b>Vietnam:</b>	Ha Trong Nguyen

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## Reports and Publications

**Azétsop, J.** Social justice approach to road traffic safety: addressing the uneven distribution of road traffic Injuries in Kenya. *Public Health Ethics* 3/2(2010): 115-127.

[phe.oxfordjournals.org/content/3/2/115.abstract](http://phe.oxfordjournals.org/content/3/2/115.abstract)

**Khorasani-Zavareh, D.**, Mohammadi, R., Laflamme, L., Naghavi, M., Zarei, A., and Haglund, B.J. Estimating road traffic mortality more accurately: Use of the capture-recapture method in the West Azarbaijan Province of Iran. *Int J Inj Contr Saf Promot*, 2008. **15**(1): 9-17.

**Khorasani-Zavareh D**, Khankeh HR, Mohammadi R, Laflamme L, Bikmoraki A, Haglund BJ.A. Post-crash management of road traffic injury victims in Iran. Stakeholders' views on current barriers and potential facilitators. *BMC Emergency Medicine*, 2009, **9**:8. Doi: 10.1186/1471-227X-9-8.

**Khorasani-Zavareh, D.**, Haglund, B.J.A., Mohammadi, R., Naghavi, M., and Laflamme, L. Traffic injury deaths in West Azarbaijan province of Iran. A cross-sectional interview -based study on victims' characteristics and pre-hospital care *Int J Inj Contr Saf Promot*. 2009 Sep; **16**(3):119-26.

**Khorasani-Zavareh, D.**, Mohammadi, R., Khankeh H.R., Bikmoradi, A., and Haglund, B.J.A. The requirements and challenges in prevention of road traffic injury in Iran. A qualitative study. *BMC Public Health* 2009, **9**:486. doi:10.1186/1471-2458-9-486.



Bigdeli, M., **Khorasani-Zavareh, D.**, Mohammadi, R. Pre hospital care time intervals of road traffic injury in Iran. A cross sectional study. *BMC Public Health* 2010, **7**:486. doi:10.1186/1471-2458-9-486 (corresponding author).

**Khorasani-Zavareh, D.** Toward safety promotion among road users. Epidemiology and prevention of road traffic injury in Iran. *Department of Public Health Sciences. 2009, Karolinska Institutet: Stockholm.* ISBN: 978-91-7409-506-7 (PhD thesis)

## News and events

### 10th World Conference on Injury Prevention & Safety Promotion

On Wednesday, September 22nd of 2010; the RTIRN parallel session took place at the 10th World Conference in London, England. The session was a total success; over 120 people attended the session including all 22 researchers that received a scholarship from the RTIRN to attend the World's Conference.

During the event, Fernando Poo, beneficiary of the Grants for Junior Researchers project, and Rafael Consunji, beneficiary of the Grants for Senior Researchers project, shared with us how these projects influenced them personally and professionally and provided some of the results obtained from their research.

Results from the Multi Center Study on Non-standard helmet use were also presented by Dr. Adnan Hyder in representation of Dr. Robyn Norton (RTIRN Chair Emeritus). In addition, Dr. Junaid Razzak talked about capacity development and how the RTIRN has created opportunities for researchers from low and middle income countries. He then talked about his experience during the time he spent as Secretariat of the RTIRN and how this benefited his personal and academic development.

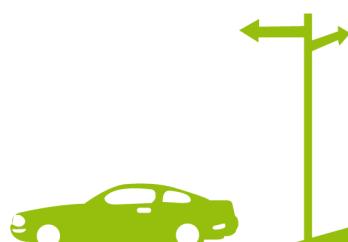
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8 out of the 9 Junior Researchers, picture taken by Elisa Hidalgo



RTIRN Senior Researchers at the RTIRN parallel session, picture taken by Nguyen Minh Tam



**Some reactions to the 10th World Conference in London, England. We have chosen only 5 of all testimonies received from the RTRIN beneficiaries:**



**Jorge Martin (Mexico)**

*"There were several topics that I found interesting among the Injury prevention and safety promotion topics, only point a couple would be disrespectful to all speakers" "Injury prevention at a level of external causes, specially traffic, requires a multidisciplinary and intersectional work, for this reason one of the challenges is to continue working on the team formation that can allow boarding the problem". "I would like to thank the RTIRN for the opportunity to interact with colleagues, teachers and researchers interested on injury prevention and safety promotion".*

**Rafael Consuji (Philippines)**

*"I went primarily to be impressed by the work of others, inspired by their excellence, infected with their enthusiasm, to imbibe their expertise, be envious of what they have done and to return home reinvigorated, refreshed and more ready to continue the marathon we have chosen to run. I will gladly say that I ticked off all of those boxes plus I got chance to meet other like-minded people who are potential collaborators for injury prevention activities/research." "My best session was sitting down with Junaid Ruzzak and Hesham El-Sayed over breakfast on the day after the conference, I learned a lot from their experiences and gained ideas for subsequent work."*



**Elisa Hidalgo (Mexico)**

*"More than a learning experience, the talks that I assist to allowed me to make a reflection about the urgent and permanently necessity to create working teams that involved besides the health areas perspective, the perspectives of areas such as urban planning, engineering, education, communication and non-profit organizations. If we don't get these areas involved, the progress made in injury prevention and safety promotion in our country (Mexico) will not have the impact to prevent injuries" "I consider that involved students and people interested on studies in injury prevention is a task we need to developed, because it is necessary to make bigger and diverse working teams and the disciplines we could approach the injury issue"*

**Ruben Ledesma (Argentina)**

*"I really enjoyed the conference. I think it was very well organized and it gave us the opportunity to see interesting projects from very different parts of the world. We also had the opportunity to personally meet other Road Safety researchers as well as world-renowned scientists in the field of Traffic Injury Prevention" "This conference has inspired me. I am now more motivated to continue working on the issue of road safety and human factors. I believe that, in addition to scientific research, we need to commit ourselves to action in order to make the roads safer"*



**Williams Ackaaah (Ghana)**

*"The Safety 2010 conference gave me the opportunity to learn from other researchers what they are doing in their respective countries. It also gave me the chance to network with other professionals. I am very grateful to the RTIRN for providing me with funding to attend the conference."*



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## **Workshop on alcohol, drugs and traffic safety in developing countries**

**Hallvard Gjerde (Norway)**

*Norwegian Institute of Public Health, Oslo, Norway*

The 19th International Conference on Alcohol, Drugs and Traffic Safety was held in Norway in August 2010 (see <http://www.t2010.org>). A workshop on alcohol, drugs and traffic safety in low and middle income (LMI) countries was organized as a part of this conference. This was the first time a special focus was placed on LMI countries in this tri-annual ICADTS conference series.

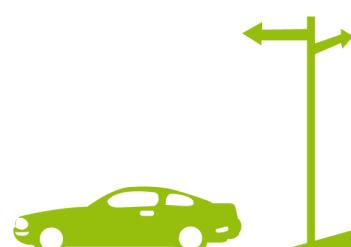
Six scientists gave presentations on the situation regarding alcohol and other psychoactive substances in relation to traffic safety: Dr. Martha Hijar (Mexico), Dr. Flavio Pechansky (Brazil), Dr. Francis K. Afukaar (Ghana), Dr. Edeaghe Ehikhamenor (Nigeria), Dr. Ashis Das (India) and Dr. Jonathon Passmore (Vietnam).

The proportions of fatally injured drivers who had been driving under the influence of alcohol were 30-50% in Mexico, 32-43% in Brazil, and 34% in Vietnam. Alcohol was found in blood samples from 11-40% of drivers injured in India. These results are similar to those found in highly motorised countries.

Dr. Afukaar reported that 7.3% of random drivers in Ghana have blood alcohol concentrations (BAC) above the legal limit of 0.8 g/l, which is significantly higher than in Europe, North America and Australasia. Dr. Pechansky told that 4.8% of random drivers in Brazilian state capitals were found to have positive BAC, while at night in Sao Paolo, 23% had positive BAC. Studies on drug use among random drivers have been performed in Brazil and Nigeria, showing that cannabis is the most significant non-alcohol drug used by drivers.

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Common problems in many LMI countries are a lack of knowledge among drivers about the risk for involvement in RTA after using alcohol or drugs, combined with lack of enforcement of driving under influence laws.



## Save the dates!

If you know about any future event and would like to share it with all RTIRN partners, please send an email to: [administrator@rtirn.net](mailto:administrator@rtirn.net)

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- Intervention projects?
- Upcoming events or new publications?

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