

Myanmar experiences on Decade of Action for Road Safety



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Union of Myanmar

SOUTH-EAST ASIA

676,578 sq kms

**59 MILLIONS
PEOPLE**



MYANMAR

TOTAL POPULATION (2007) -- 57.3 Millions
(GROWTH RATE-2.02 Millions/yr)

POPULATION BY AGE

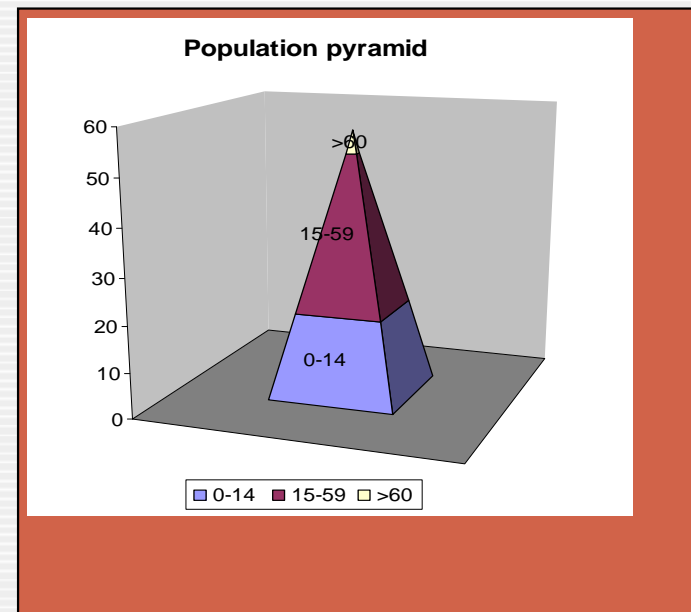
0-14 yrs	- 18.57 mil
15-59	- 33.87 mil
>60	- 5.06 mil

MALE / FEMALE

Male → 28.58 mil
Female → 28.9 mil

DISTRIBUTION

70 % In rural area
30% in urban area



DIFFERENT RACES

135 - DIFFERENT TRIBES



**KACHIN
CHIN**



KAYAH



KAYIN



BAMAR



MON



YAKHINE



SHAN

Thingyan Myanmar Water Festival

Myanmar New Year



YANGON

Places of interest

1. Shwe Dagon Pagoda
2. Kyaik-hmaw-wan Yele Pagoda
3. Hlawga Wildlife Park
4. National Museum
5. Bogyoke Aung San Market (Scott Market)



Karaweik hotel at Kantawgyi Lake



Night scene of Shwedagon from Kantawgyi Lake

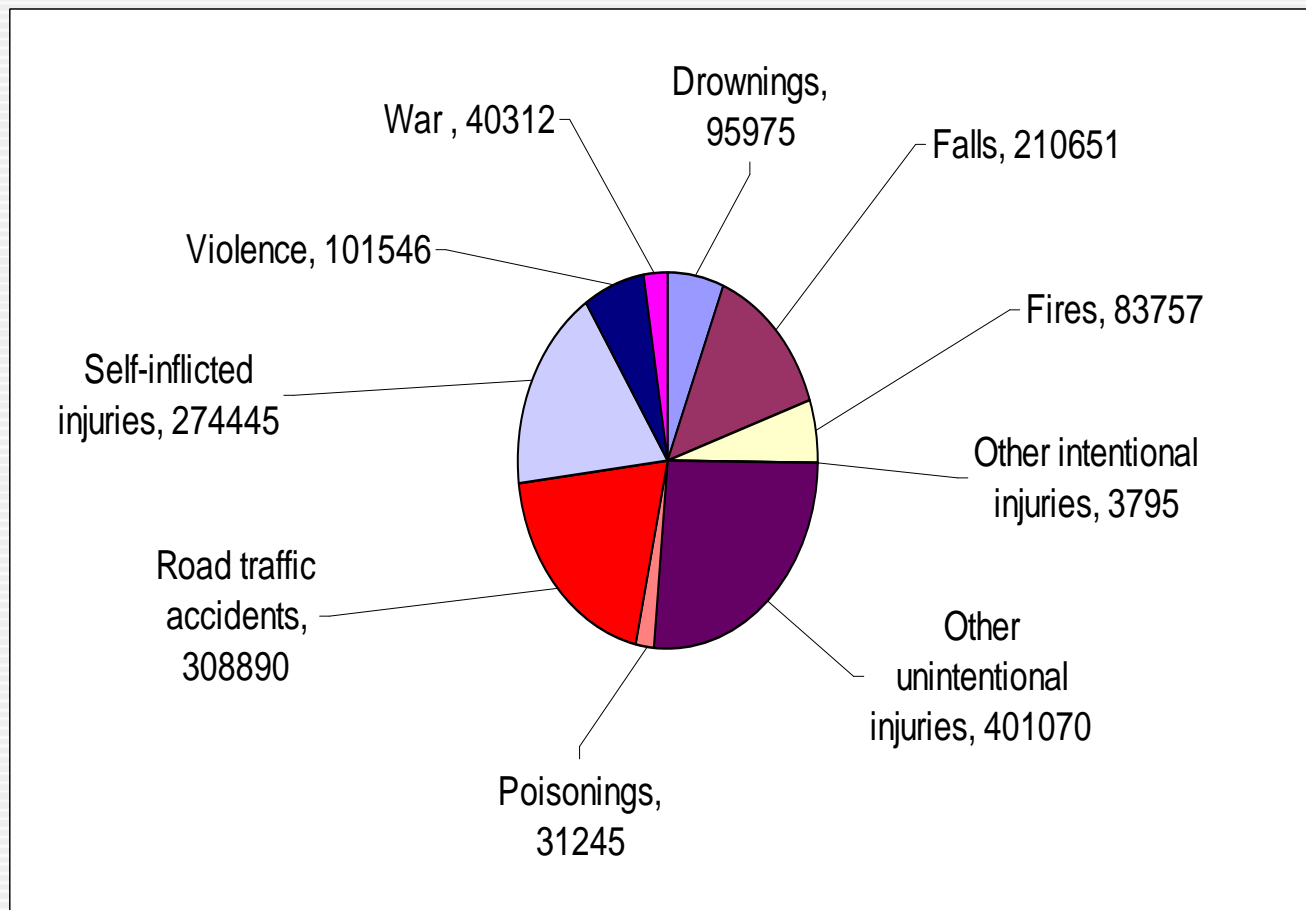
**YANGON GENERAL HOSPITAL
MYANMAR**

- 1500 BEDDED & LARGEST IN

Founded - 1899



Injury-related mortality in SEAR, 2008



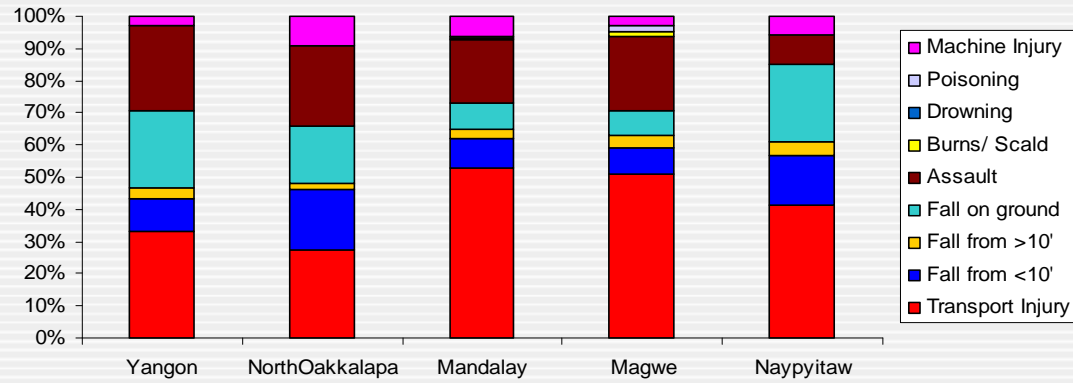




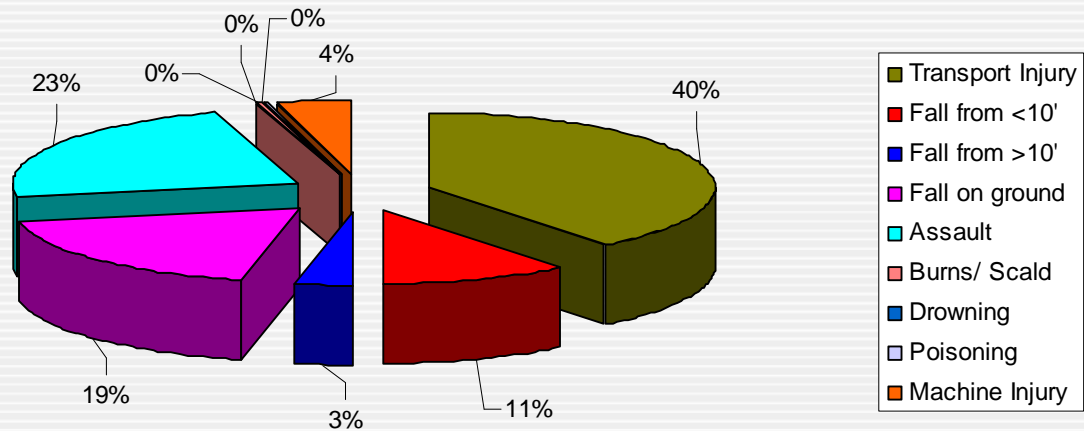
Age Groups

Rank	< 1	1 – 4	5 – 9	10 – 14	15 – 19	20 – 30	31 – 40	41 – 50	51 – 60	60 >
1	Fall from < 10	Fall on ground	Fall on ground	Fall on ground	Transport injury	Transport injury	Transport injury	Transport injury	Transport injury	Fall on ground
2	Fall on ground	Fall from < 10	Transport injury	Transport injury	Assault	Assault	Assault	Assault	Fall on ground	Transport injury
3	Transport injury	Transport injury	Fall from < 10	Fall from < 10	Fall on ground	Fall on ground	Fall on ground	Fall on ground	Assault	Fall from < 10
4	Assault	Falling on object	Assault	Assault	Fall from < 10	Fall from < 10	Fall from < 10	Fall from < 10	Fall from < 10	Assault
5	Fall From > 10	Fall From > 10	Fall From > 10	Machine injury	Machine injury	Machine injury	Machine injury	Fall From > 10	Fall From > 10	Fall From > 10
6	Falling on object	Assault	Machine injury	Fall From > 10	Falling on object	Falling on object	Falling on object	Machine injury	Falling on object	Machine injury
7	Burns/ Scald	Machine injury	Falling on object	Animal bite	Fall From > 10	Fall From > 10	Fall From > 10	Falling on object	Machine injury	Falling on object
8	Machine injury	Animal bite	Animal bite	Falling on object	Poisoning	Animal bite	Animal bite	Animal bite	Animal bite	Animal bite
9	Animal bite	Burns/ Scald	Burns/ Scald	Burns/ Scald	Animal bite	Poisoning	Burns/ Scald	Burns/ Scald	Burns/ Scald	Burns/ Scald
10	Drowning	Poisoning	Drowning	Poisoning	Burns/ Scald	Burns/ Scald	Poisoning	Poisoning	Drowning	Poisoning
11	Poisoning	Drowning	Poisoning	Drowning	Drowning	Drowning	Drowning	Drowning	Poisoning	Drowning

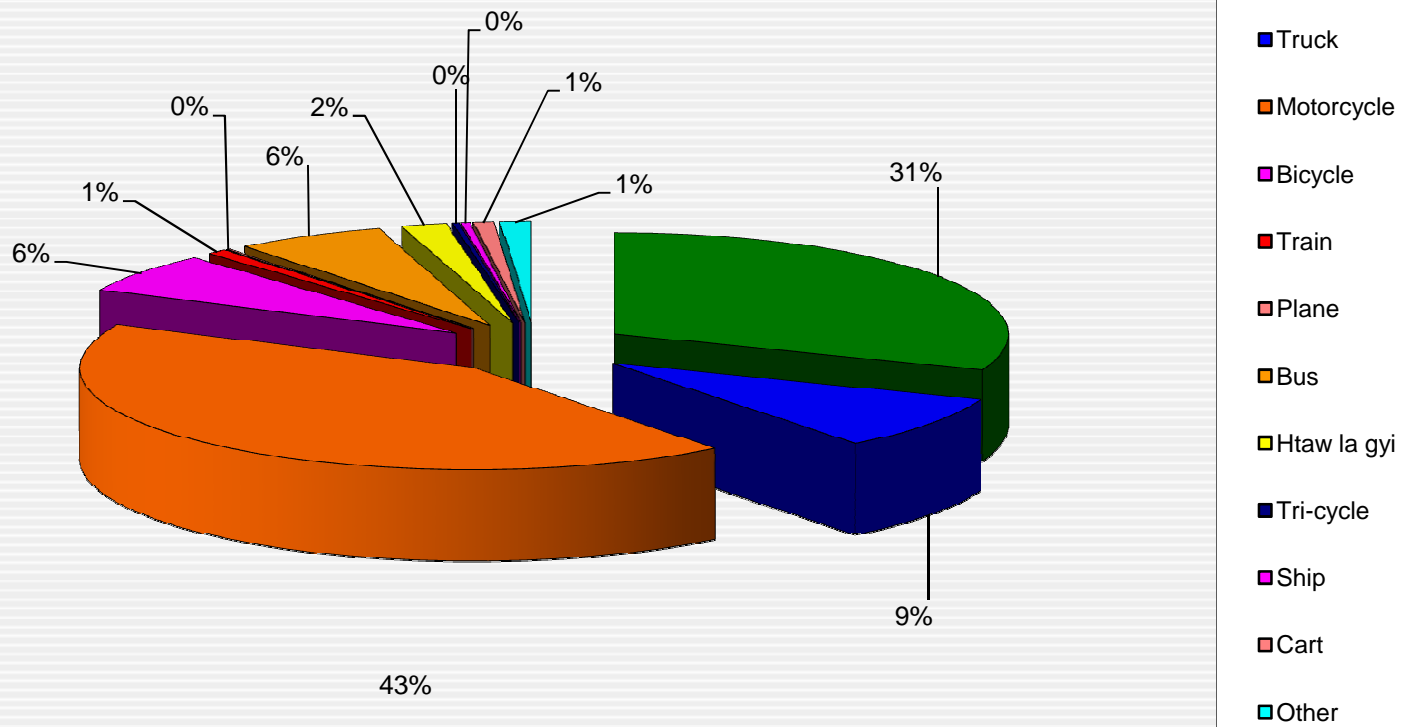
Mechanism of Injury



Five town groups/ Mechanism of Injury



Five sentinel sites/ Types of Vehicle



No.	Year	Registered vehicles	No. of motorcycles	Percentage of motorcycles
1.	1954	24457	1396	5.7%
2.	1962	50808	6168	12.13%
3.	1975	86400	9561	11.07%
4.	1978	92228	10034	10.08%
5.	1988	146549	30085	20.53%
6.	1998	397603	144153	36.26%
7.	1999	423958	169425	39.96%
8.	2000	438834	174553	39.77%
9.	2003	476350	171931	36.09%
10.	2004	960341	638386	66.47%
11.	2008	1994358	1608772	80.67%
12.	2009	2067839	1674246	80.96%

Country	Population number ^a	Reported number of deaths ^b	Modelled number of deaths ^c		Estimated road traffic death rate per 100 000 population ^c
			Point estimate	90% Confidence Interval	
Bangladesh*	158 664 959	4 108	20 038	14 882–29 155	12.6
Bhutan**	658 479	111	95	72–115	14.4
India*	1 169 015 509	105 725	196 445	155 727–266 999	16.8
Indonesia**	231 626 978	16 548	37 438	29 785–65 158	16.2
Maldives**	305 556	10	56	37–105	18.3
Myanmar**	48 798 212	1 638	11 422	6 905–16 883	23.4
Nepal**	28 195 994	962	4 245	3 453–5 288	15.1
Sri Lanka**	19 299 190	2 334	2 603	2 185–3 097	13.5
Thailand**	63 883 662	12 492	12 492	-	19.6
Timor-Leste**	1 154 775	49	186	143–255	16.1

Economic lost



- 2003 94 billion kyats = 3% of GDP
2008 157.4 billion kyats = 1% of GDP
- It is estimated that every year, road traffic crashes cost: — US\$518 billion globally;
- — US\$65 billion in low-income and middle-income countries, exceeding the total amount received in development assistance;

HMIS REPORTS FOR 2006 & 2007

Year	2006	2007
Reporting Status	96 %	96 %
Cases/Deaths of Transport Injury	30708 / 959	37644 / 1085
Cases/Deaths of Occupational Injury	36149 / 269	39845 / 302
Cases/Deaths of Poisoning	4630 / 265	2435 / 196
Cases/Deaths of Fall from Height	9587 / 338	10617 / 394
Cases/Deaths of Burns / scalds	14931 / 124	14571 / 148
Cases/Deaths of Drowning	2867 / 1511	2599 / 1484
Cases/Deaths of Suicide	1200 / 537	1275 / 557
Cases/Deaths of Assaults	22762 / 421	24826 / 405

Planning to study on drowning and occupational injury

Road Traffic Accidents -



Vehicle safety -



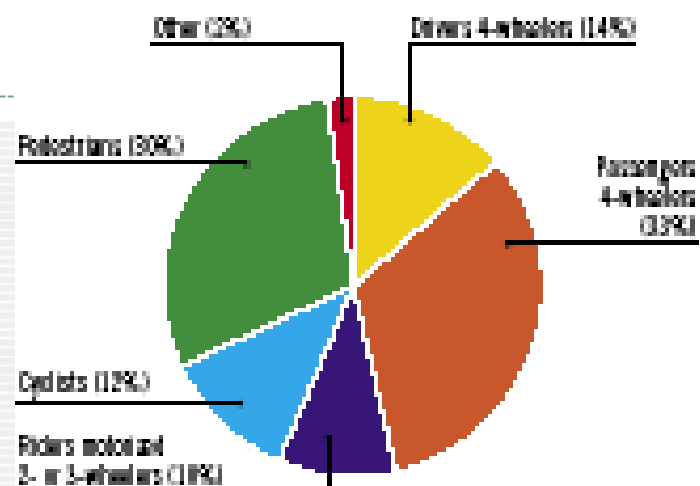
Public Transportation



RTA – Motorcycle accidents



DEATHS BY ROAD USER CATEGORY



Source: 2017, Road Traffic: Ministry of Transport



NATIONAL LEGISLATION	
Speed limits set nationally	Yes
Local authorities can set lower limits	Yes
Maximum limit urban roads	40 km/h
Enforcement*	0 1 2 3 4 5 6 7 8 9
Drink-driving law	Yes
BAC limit – general population	0.07 g/dl
BAC limit – young or novice drivers	0.07 g/dl
Random breath testing and/or police checkpoints	Yes
Road traffic deaths involving alcohol	—
Enforcement*	0 1 2 3 4 5 6 7 8 9
Motorcycle helmet law	Yes
Applies to all riders	Yes ^b
Helmet standards mandated	Yes
Helmet wearing rate	60%+
Enforcement*	0 1 2 3 4 5 6 7 8 9
Seat-belt law	—
Applies to all occupants	—
Seat-belt wearing rate	—
Enforcement*	—
Child restraints law	—
Enforcement*	—

* Enforcement score represents a composite based on professional opinion of road police etc, on a scale of 0 to 9 where 0 is not effective and 9 is highly effective.

^b Some exceptions.

^c 2017, Road Traffic: Ministry of Transport.



POLICY ISSUE, TECHNICAL &
CAPACITY STRENGTHENING

1.POLICY



- Trauma
Leading cause of death working age group in SEARO
- Socioeconomic, GDP, psychological disability negative impact on these developing country
- Hence, aim to offer priority in the national issue
- Providing data regarding the yearly morbidity & mortality related to trauma from every discipline such as police, medical & engineering standpoints

1.POLICY



- Thus convincing authority,policy makers,politician to be aware of the importance
- Resulting in establishment of bureau for EMS
- Well established EMS can reduce 30 % of mortality from RTA
- Need collaboration from government ,NGO ,WHO , JICA and UN

Decade of Action for Road Safety 11th May 2011 – Nay Pyi Taw



2. TECHNICAL & CAPACITY STRENGTHENING

- There is a need to develop technical expertise in health and related sector for safety promotion and injury under five (E),
 1. engineering –dealing with road safety house construction, motor vehicle inspection
 2. enforcement
 3. education regarding the safety and injury prevention using public media such as radio TV and sign board
 4. emergency medical service system
 5. evaluation



3. CAPACITY STRENGTHENING



- Training on injury epidemiology
- Create critical human resources for pre – hospital care
- Training health care providers for pre – hospital care
- Training on injury surveillance

TOT – Injury Epidemiology, Prevention & Care



TEACH - VIP



3. CAPACITY STRENGTHENING



- Human resources mobilization , incorporating injury prevention and control in medical school curriculum and for non medical curriculum such as college institutes university
- To develop minimal first aid courses for health functionaries and people from police , transport , teachers and college student
- Strengthening country capacity to handle and organize emergency care in disaster situation

Planning for establishing the pre - hospital care

Ambulance System



Organization



- We tried to set up government organization to implement pre – hospital care collaboration with UN,WHO,JICA Etc

Legislation



- Legislation regarding EMS act must be established under ministry of health

Finance



- Mainly government subsidized, also need contribution from NGO UN WHO and public charity organization

Personnel



1. First responder choose from community
 - Enough intelligent and academic qualification to read and write
 - Willingness and motivation
2. EMT
 - Personnel preferably nurses, nurse aid who have knowledge to be trained for
 - BLS
 - ALS

Trauma Care Training



Public information & education



- Through media TV, newspaper, bill boards
- Refresher courses and educational talks
- Traffic safety weeks
- Traffic , housing and industrial regulation committee

World day of Remembrance for Road Traffic Victims - 2010



Activities and Exhibitions - 2012



Exhibitions, Campaigns



IEC Materials

ရန်ကုန်တိုင်း ယာဉ်စည်းကမ်းဆန်းသိမ်းရေးကြီးကြပ်မှုဌာန

CROSSING THE ROAD IS NOT CHILD'S PLAY

ယာဉ်လမ်းအန္တရာယ်ကင်းရှင်းရေးသရုပ်ပြ

မိမိအိမ်မှ လမ်းပေါ်သို့ ထွက်တိုင်း လူတိုင်းယာဉ်အန္တရာယ်နှင့် မကင်းနိုင်ပါ။ ယာဉ်မျိုးစုံတို့မှာ အန္တရာယ်ရှိပြီး မောင်းနှင်သူကလေးကြီး သင့်ကိုမမြင်ကြပေ။ ဒါကြောင့် ယာဉ်အန္တရာယ်ကင်းရေးစေရအတွက် ရောင်းရန်၊ ဆောင်ရွက်မှုများကို ဖော်ပြလိုက်ရပါသည်။

ရန်ကုန်တိုင်း ယာဉ်စည်းကမ်းဆန်းသိမ်းရေး ကြီးကြပ်မှုဌာန

With the technical support of the **World Health Organization**

အမှတ်အသားများ

သင့်ပတ်ဝန်းကျင် သင့်မိဘကိုးမေးကြည့်ပါ

ဝိဆိုင်းဘုတ်က ယာဉ်မောင်းတွေကို ရှေ့မှာ လမ်းဘယ်တွေဖို့ သတိပေးတာ ဖြစ်တယ်။

ယာဉ်မောင်းတွေ ရပ်ဖို့ ညွှန်ပြတဲ့ဆိုင်းဘုတ် ဖြစ်တယ်။

ရှေ့တွင် နှစ်ထပ်တွေလမ်းရှိတာကို သတိပေးတဲ့ ဆိုင်းဘုတ်ဖြစ်တယ်။

ယာဉ်ကို တစ်နာရီ ၃၀မိုင် ထက် ပိုမမောင်းဖို့ ညွှန်ပြတဲ့ ဆိုင်းဘုတ် ဖြစ်တယ်။

ရှေ့မှာရှိတဲ့မြို့ကိုညွှန်ပြတဲ့ ဆိုင်းဘုတ် ဖြစ်တယ်။

မည်သည့်ယာဉ်မျှ မဝင်ရ တားမြစ်ခြင်း ဆိုင်းဘုတ်ဖြစ်တယ်။

ရေမှာ ဆေးရုံ ရှိတယ် ဆိုတာ သတိပေးဖော်ပြ တာတဲ့ဆိုင်းဘုတ် ဖြစ်တယ်။

တို့တတွေကတော့ ဂရုစိုက်ပါတယ်။ ဖေဖေနဲ့ ဖေဖေတို့ ကတော့ . . .

အခုအမှတ်အသားတွေကို သူတို့ဖတ်ပြီးပြီတဲ့ လမ်းကို စည်းကမ်းတကျ အသုံးပြု ရဲ့လား မေးကြည့်ရအောင်

ဒါဟာ ကောင်းမွန်တဲ့ အစီအစဉ်ပဲပေါ့

Record keeping



- In emergency department
- Ambulance
- Traffic police department
- Feedback from community

SENTINEL INJURY SURVEY



- Reports were presented/disseminated to

Orthopedics and Trauma Conference

National Road Safety Committee Meeting

**Traffic Rules Enforcement Supervisory
Committee Meeting**

Occupational Health Department

Department of Health Planning

Developments after surveys



- **National Injury Surveillance**
- **Primary Trauma Care Program**
- **Ambulance System**
- **Expansion and Upgrading of Trauma Care Centers**
- **NRSC (National Road Safety Committee)**
- **Training of Police Force on primary trauma care**

Obstacles



- Finance-Government may not be able to subsidize all the expense on EMS set up
- Attitude- Modification of behavior and attitude of the community towards trauma may take time
- Training systems- need proper institute of paramedics and EMT
- Equipment - require for BLS, ALS
- Communication- sophisticated telecommunication and information system

Mandalay Palace, Myanmar

Thank you