

Road traffic accident: A major public health problem in Ethiopia.

Damen Haile Mariam¹

One of the articles in this issue demonstrates how road traffic accident is a serious, but neglected, health problem in Ethiopia using secondary data collected by the Amhara National Regional State Police Commission from 2007-2011 (1). Fatalities due to traffic accidents are reported to be among the highest in the world. According to the WHO's 2009 global status report on road safety, the road crash fatality rate in Ethiopia was at least 114 deaths per 10,000 vehicles per year, compared to only 10 in the UK and Ireland and 60 across 39 sub-Saharan African countries (2). In addition, the number of people injured or killed in one crash in Ethiopia is about 30 times higher than that in the US (3). Furthermore, it is sad to note that fatalities due to road traffic accidents are higher among pedestrians in countries like Ethiopia than in developed countries. For instance, 60% of the fatalities in the US account to the car drivers, while in Ethiopia only about 5% account to drivers (3). This is also supported by a recent study where the majority of fatalities were pedestrians (87%) followed by passengers (9%) and drivers (4%), among a total of 25,110 accidents and 3415 fatalities during the period 2000-2009 in Addis Ababa (4).

The economic implications of traffic accidents are highly devastating especially for developing countries, since deaths due to these causes are highest among the most economically active population (15-59 years) (5). A study has estimated the total health and life-related cost of motor vehicle injuries in Addis Ababa in 2010 to be about 31,692,892 Ethiopian Birr (6), showing the enormity of the problem.

In spite of the fact that road traffic accident is a huge public health development problem in Ethiopia with significant impact on morbidity, mortality as well as devastating economic effects; proportionate measures have not been taken to address the problem. According to the WHO's global status report mentioned above, even

though Ethiopia has put in place relevant laws on traffic speed limits, the effectiveness of their overall enforcement was only 2 (in a scale of 0-10) in 2009 (2). There are some laws on road safety management and on major risk factors in the country. However, they seem to be largely nominal, as the country neither strictly enforces speed limits on urban roads nor controls blood alcohol levels in drunk-driving (7).

Overall, the gravity of the problem is getting worse from time to time, approaching a crisis level and requiring urgent and multi-pronged actions. Multi-sectoral and combined enforcement strategies are the most efficient way to respond to the crisis. In addition, there is an urgent need for interventions that can address risk factors such as speeding, improper use of lanes, and drunk-driving, which have important public health implications as large proportion of traffic injuries are attributed to them (8).

References

1. Hailu F, Mekonnen, Teshager S. Road traffic accident: the neglected health problem in Amhara National Regional State, Ethiopia. *Ethiop J Health Dev* 2014; 28(1):3-10.
2. World Health Organization (WHO). Global status report on road safety: Time for action. Geneva; WHO, 2009.
3. Persson A. Road traffic accidents in Ethiopia: Magnitude, causes and possible interventions. *Advances in Transportation Studies* 2008; 15:5-16.
4. Tumato M, Bekele Y. Motor Vehicle Accident Surveillance, Addis Ababa, Ethiopia, 2000 – 2009. [MPH Theses]; Addis Ababa University, 2011.
5. African Development Bank (AfDB). Mortalities in Africa: The share of road traffic fatalities. AfDB Market Brief. Tunis; AfDB, 2013.
6. Gebre Michael M. Health and life-related burden of motor vehicle injuries in Addis

¹School of Public Health, Addis Ababa University.

- Ababa. [MPH Thesis]; Addis Ababa University, 2010.
7. Road safety in the WHO African Region: The facts 2013. Brazzaville; WHO/AFRO, 2014.
 8. Chisholm D, Naci H. Road traffic injury prevention: An assessment of risk exposure and intervention cost-effectiveness in different world regions. HSF Discussion Paper. Geneva; WHO, 2008.