Exploring Disabilities and Implications for the UN Decade of Action for Road Safety, a Case Study of Cambodia

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Abstract

The Global Plan for the UN Decade of Action for Road Safety (GPDoA) has five pillars to reduce the road crash burden, especially in low and middle income (LMI) countries (WHO, 2011). Previously we have reported on crashes in Cambodia resulting in disability and have conducted further research on crash characteristics and their impact. This paper is a case study of the degree to which GPDoA addresses crashes that result in disability. The findings highlight gaps under all pillars of GPDoA and a need for greater consideration of the impacts of road crashes during the remainder of the Decade of Action and beyond.

Background

Road crashes and injuries have become a growing issue worldwide, and the GPDoA is the first comprehensive global plan of action to address it, particularly in low and middle income countries. However, the long term disability resulting from some road crashes contributes a disproportionate burden that is not fully addressed in the five pillars of the GPDoA. The first author, with her supervisory team, has conducted qualitative and quantitative research in Cambodia, on both primary and secondary data, that explores the extent and nature of this burden. The data collected in the research provides an opportunity to assess the degree to which the GPDoA addresses crashes resulting in long term disability.

Method

The Cambodian research consisted of qualitative interviews with policy makers, persons with disabilities due to road crashes and their family members. The main findings were objectively reviewed alongside the actions identified under the five pillars of the GPDoA, and included consideration of the Cambodian plan developed to address the GPDoA.

Results

The GPDoA highlights the need to establish feasible national targets and indicators for each pillar, without specifying what the national targets should be. Although this gives flexibility for countries based on their local context, it could lead to the absence of necessary targets, especially for long term impairments, intermediate outcomes and indicators. This can be seen in each pillar of the Cambodian plan (National Road Safety Committee, 2014). At the same time, the long lists of actions in the GPDoA make it hard for countries like Cambodia to follow due their limited resources.

As an implication for Pillar 1: Road Safety Management, the research highlighted the need for better data collection systems, not only for fatalities but to measure serious road injuries which might lead to persistent disabilities. Another gap in the GPDoA is the absence of measures of human resource capacity in road safety institutions.

Pillar 2: Safer Roads and Mobility does not include any infrastructure and transportation system interventions for persons with disabilities, pointing to a lack of integration of persons with disabilities into the transport and road networks.
Moreover, Pillar 3: Safer Vehicles tends to concentrate on safety standards for cars, while most of the crashes leading to long term impairment involved motorcycles and local transport modes, which are not included in the GPDoA. There is also no mention of vehicle modification for persons with disabilities.

In addition, both Pillars 3 and 4 (Safer Road User Behaviors) do not pay sufficient attention to disability inclusion in term of safer vehicles and promotion of public transport accessibility for persons with disabilities. The indicators for Pillar 4 tend to focus more on setting regulations, not on the quality and effectiveness of traffic law enforcement, particularly crash investigation systems and ways of reducing “hit and run” cases.

An obvious gap was evident in relation to maintaining an adequate emergency system and delivering post-crash care to prevent long term impairments. This reflected the limitation in Pillars 1 and 5 (Post-Crash Reponses) that focus on only the lead agency (National Road Safety Committee) without full participation of the Ministry of Health and its national health strategy.

**Conclusion**

The Cambodian research demonstrates that there are gaps under all five pillars of the GPDoA where crashes resulting in long term disability are concerned. The findings illustrate and highlight the need for greater consideration of the long term impacts of road crashes during the remainder of the Decade of Action and beyond. A further consideration is the potential for building disability inclusiveness into the processes of problem identification and intervention implementation for road safety in low and middle income countries.

**References**