



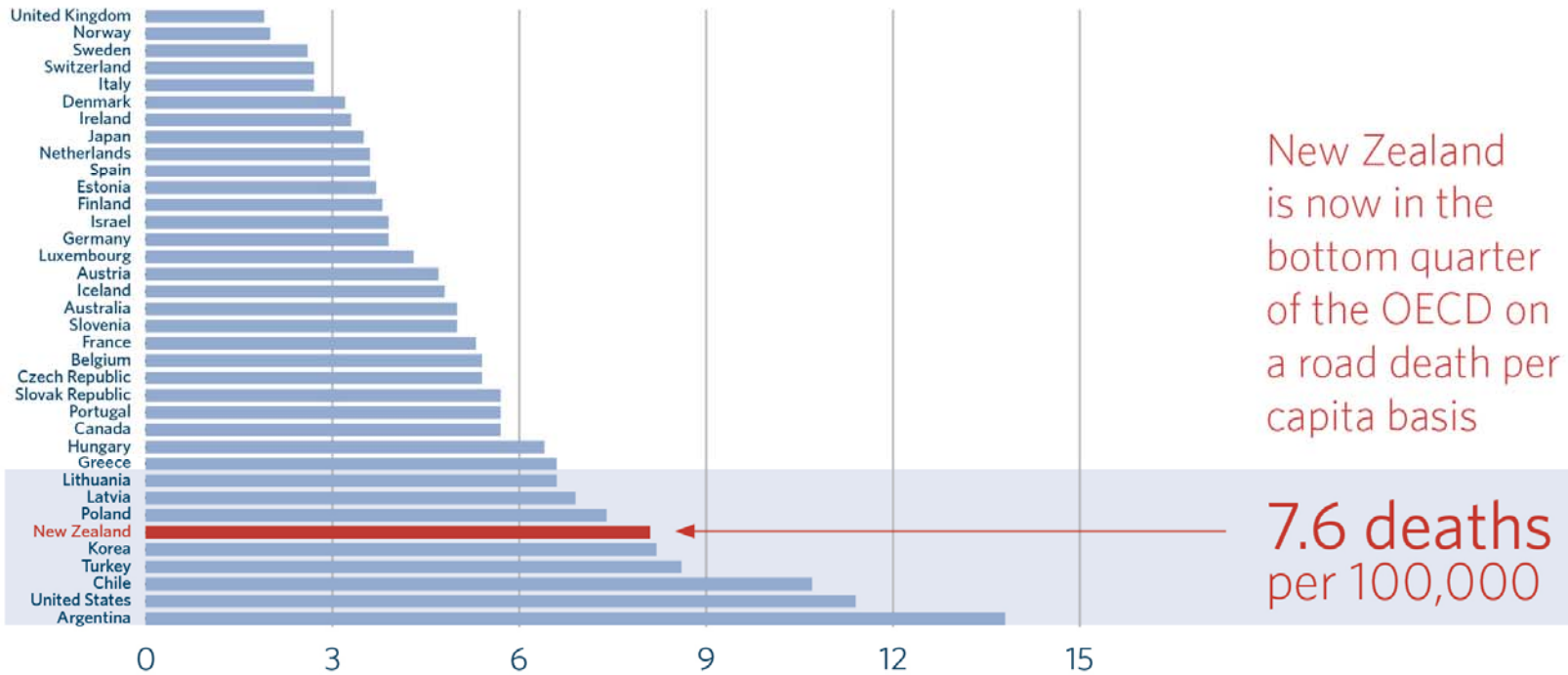
# Achieving ambitious road safety outcomes

The role of system management

## Catalysts for large scale systematic change



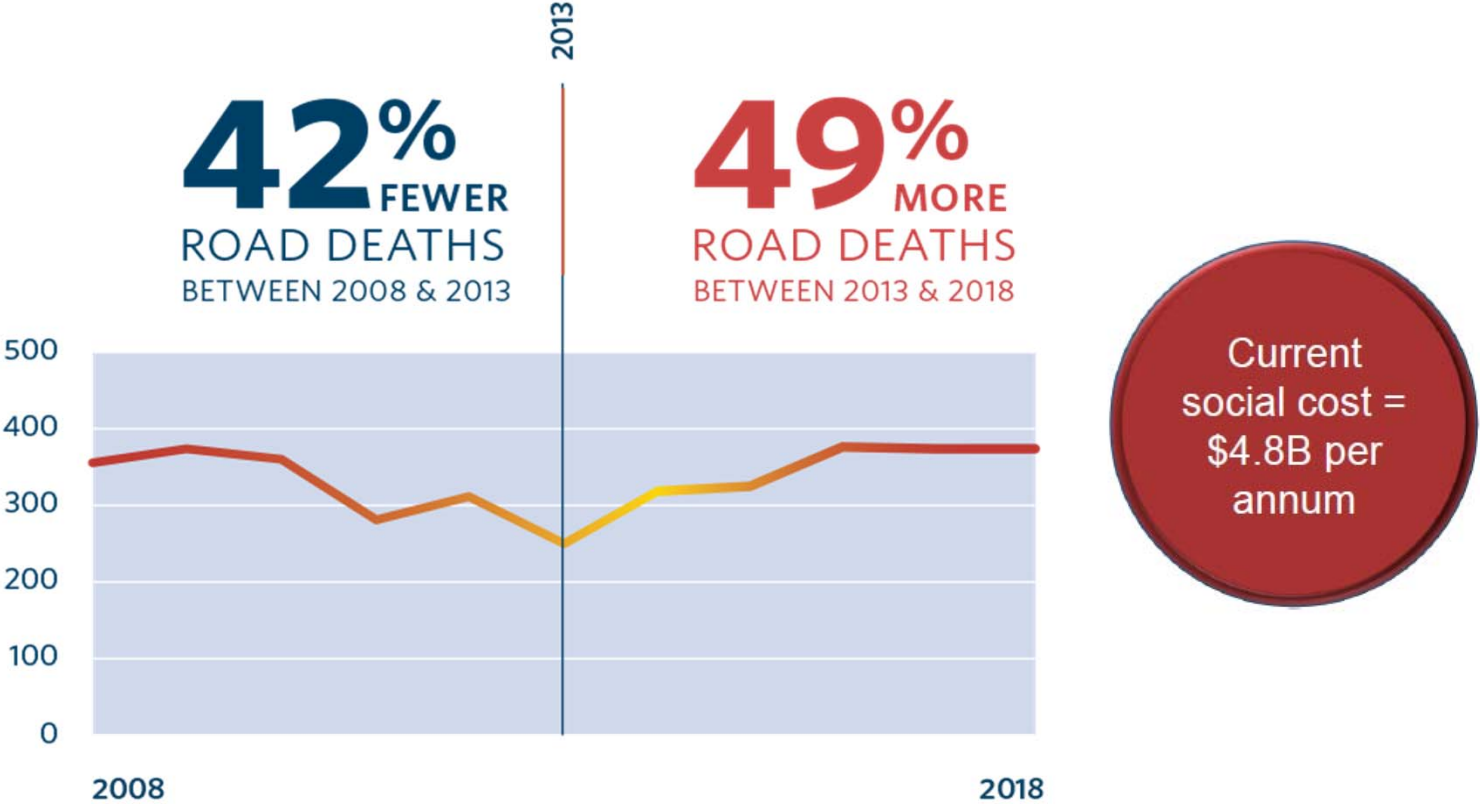
## International performance



New Zealand is now in the bottom quarter of the OECD on a road death per capita basis

7.6 deaths per 100,000

# NZ's road safety performance







The road network in New Zealand is largely designed to operate outside the bounds of a Safe System. This means that when a mistake inevitably happens, the impact of speed and resulting crash energy often results in death or serious injury.

## Road safety: a public health issue

“

*The carnage that occurs on the world's roads every single day is a public health crisis of gargantuan proportions.*

”

Dr Bernhard Schwartländer, WHO

# THE HUMAN IMPACT EVERY DAY

| NEW VICTIMS EVERY DAY | HUMAN IMPACT                         | NEW COSTS EVERY DAY (USD) |
|-----------------------|--------------------------------------|---------------------------|
| 3,626                 | Lives Lost                           | \$ 1,731,400,000          |
| 932                   | Severe Acquired Brain Injury         | \$ 1,271,400,000          |
| 20,865                | Fractures - Limb                     | \$ 788,500,000            |
| 9,090                 | Internal Injuries                    | \$ 575,400,000            |
| 6,672                 | Brain Injury (Mild) / Head Injury    | \$ 465,000,000            |
| 17,327                | Soft Tissue (Neck / Back) / Whiplash | \$ 262,900,000            |
| 56                    | Quadriplegia                         | \$ 199,600,000            |
| 5,800                 | Fractures - Other                    | \$ 185,700,000            |
| 18,270                | Contusion / Abrasion Laceration      | \$ 109,800,000            |
| 2,865                 | Dislocations                         | \$ 103,200,000            |
| 920                   | Other Spinal                         | \$ 91,600,000             |
| 75                    | Paraplegia                           | \$ 76,400,000             |
| 914                   | Degloving                            | \$ 59,100,000             |
| 8,486                 | Other Injuries                       | \$ 55,400,000             |
| 4,266                 | Sprains / Strains                    | \$ 38,200,000             |
| 2,293                 | Concussion                           | \$ 23,900,000             |
| 161                   | Amputations                          | \$ 15,000,000             |
| 176                   | Burns (Severe / Moderate)            | \$ 5,800,000              |
| 33                    | Nerve Damage                         | \$ 1,500,000              |
| 9                     | Loss Of Sight / Eyes                 | \$ 300,000                |
| <b>102,835</b>        | <b>TOTAL</b>                         | <b>\$ 6+ BILLION</b>      |

Source: iRAP

# Conventional medicine approach

## Targeting high risk individuals

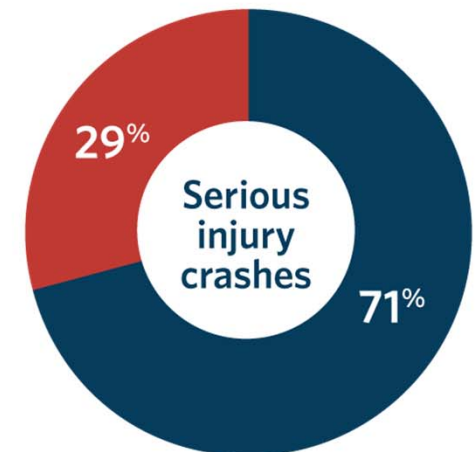
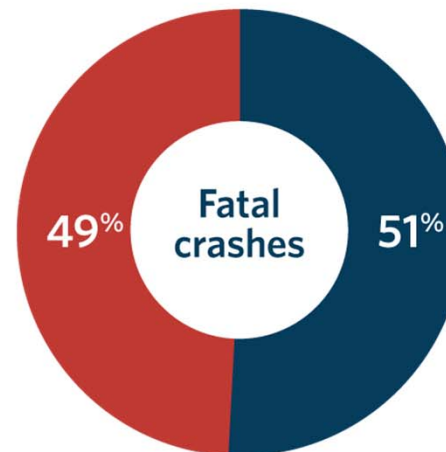
- Identify people with a condition and prescribe medication to prevent it
- (e.g. high blood pressure)





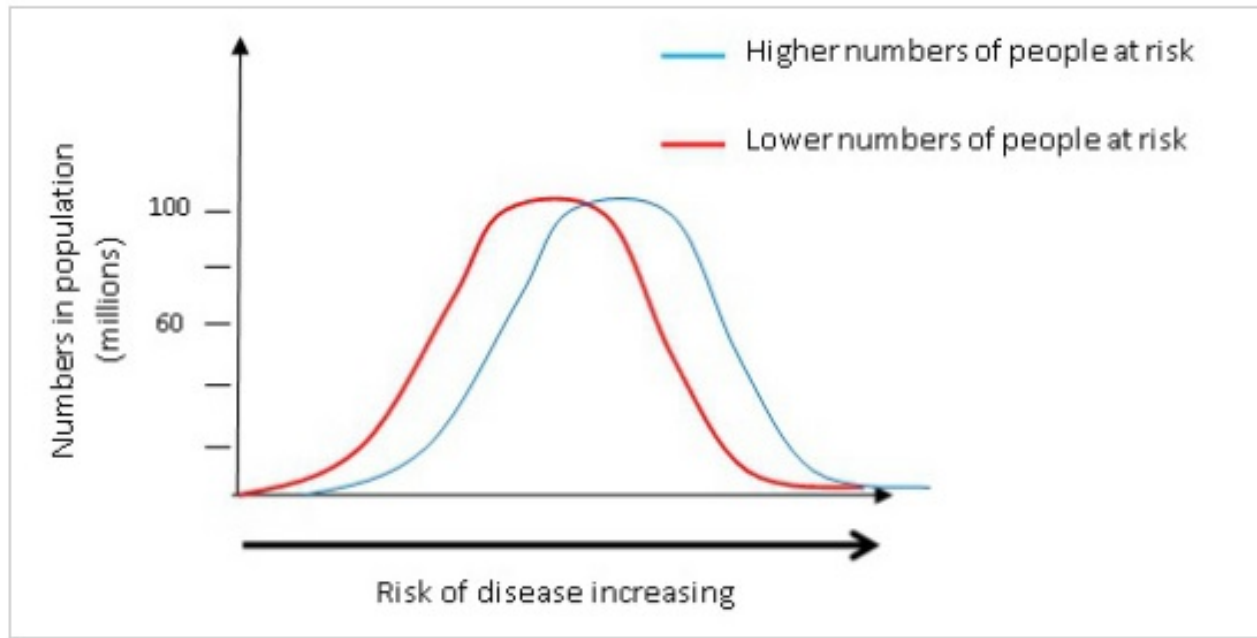
# We must change the conversation away from driver blame

- A recent study found around  $\frac{3}{4}$  of crashes where vehicle occupants were seriously injured, drivers had generally followed the road rules
- They had simply made a poor decision or something unexpected happened, and the road system was unforgiving



● Reckless behaviour ● Lapse or error

Source: 2018 study from the AA Research Foundation



The largest number of cases of ill health happen not in those at high risk, but in those who have just some risk, *simply because there are more of them*

Prevention Theory, Geoffrey Rose

# Preventative medicine approach

## Population based strategy

- Reducing average population blood pressure by 5% is predicted to reduce the number of strokes by 30%; compared to a 15% reduction if all individual hypertension cases were identified and treated

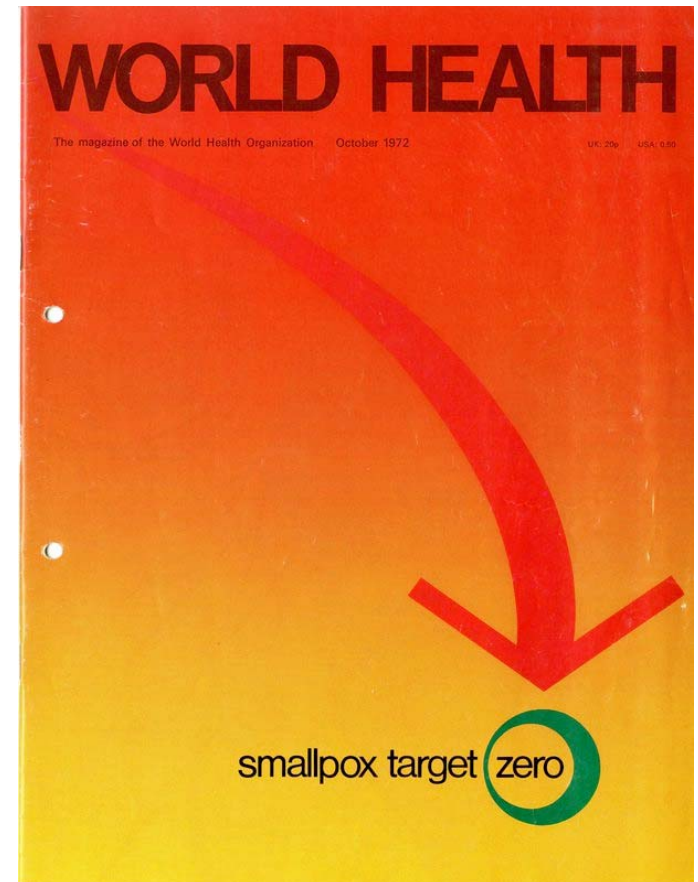
Rose (1981)



# Global public health crisis

## What can we learn from smallpox eradication?

- 50 million cases per year in early 1950s worldwide
- In 1966, 1.5 to 2 million people died from the disease each year
- WHO launches Smallpox Eradication Programme in 1967
- Last case of smallpox reported in Somalia in 1977
- On 8 May 1980, WHO declares global eradication of smallpox

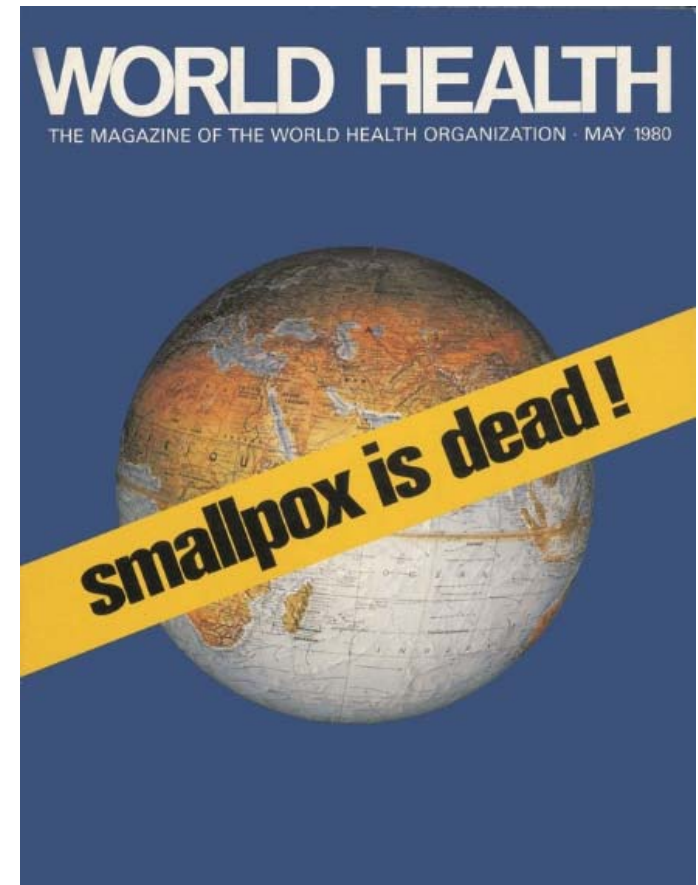




## Global public health crisis

What can we learn from smallpox eradication?

- Mass produced high-quality vaccine
- Efficient delivery (bifurcated needle)
- Mass vaccination and surveillance containment
- Political commitment and coordination
- Dedicated programme with clear objectives and goals
- Quality control, training, programme management, research and certification



“

*... a triumph of management, not of medicine.*

”

Dr H Mahler, WHO Director General

# Adopting a public health approach

Road deaths and injuries are preventable and there are solutions to the problem

- Preventative rather than conventional approach (tools)
- Setting an ambitious vision and targets (scale)
- Leadership and system management (leadership)

# Vaccines for Roads

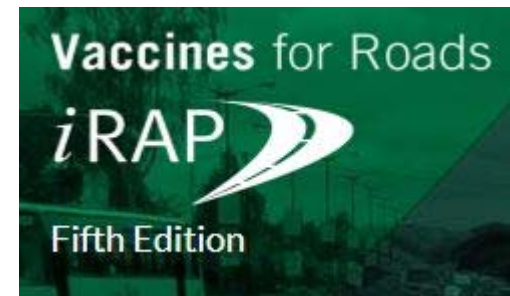
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Preventative rather than conventional approach



What if we had vaccines to prevent the 1.35 million deaths and 20-50 million injuries that occur on global roads each year?

**We do ...**



[vaccinesforroads.org](http://vaccinesforroads.org)

## The road features that matter based on a 358,000km sample of roads across 54 countries:

### Pedestrian

#### Road features elevating this risk

**85%**  
of roads where pedestrians are present and traffic flows at 40km/hr or more have **no formal footpaths or sidewalks**



**92%**  
of roads where pedestrians cross and traffic flows at 40km/hr or more have **no pedestrian crossing facilities**



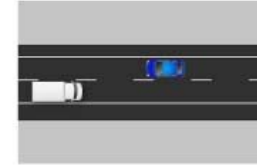
**22%**  
of pedestrian crossings are **poorly signed or maintained**



### Vehicles

#### Road features elevating this risk

**81%**  
of roads where traffic flows at 80km/h or more are **undivided**



**79%**  
of roads where traffic flows at 80km/h or more have **dangerous roadsides**



**73%**  
of intersections where traffic flows at 60km/h or more have **no safe turning provision**



*... fatalities can be reduced by 85–90% by applying mid- and side barriers.*

Johansson (2008)



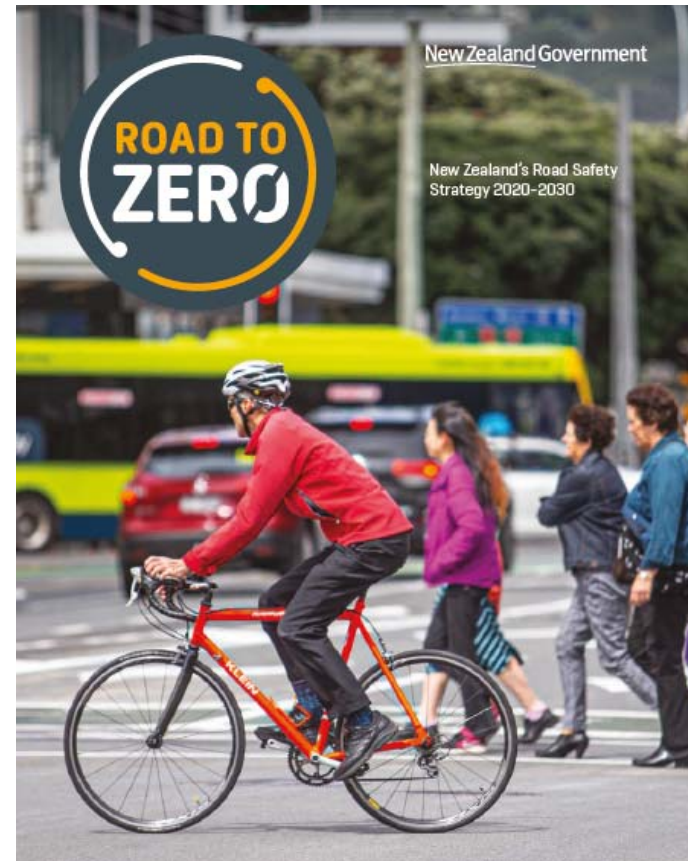
# Vision Zero

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Setting an ambitious vision and targets



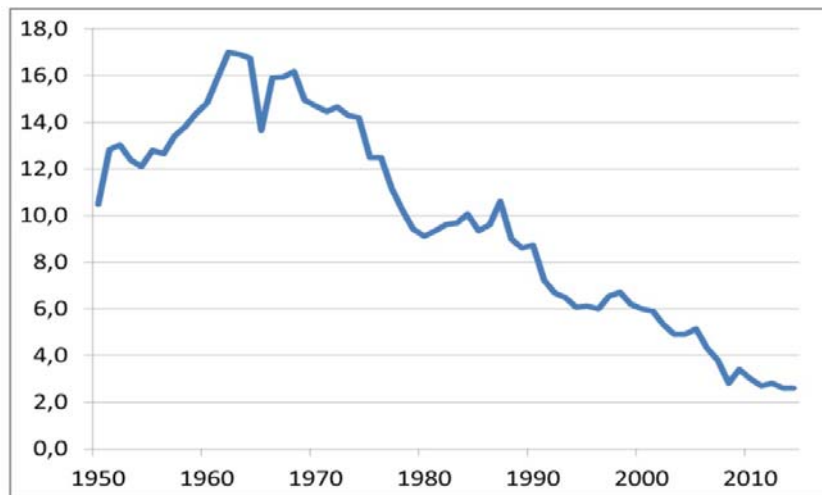
**A vision for a  
New Zealand  
where no one is  
killed or seriously  
injured in any  
road crash**



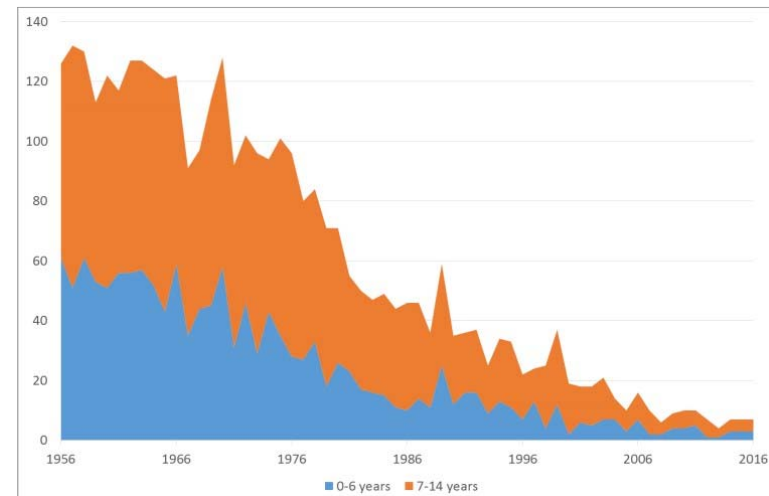
# Vision Zero

## Fatalities in Sweden over time

Fatalities per 100,000 population



Children killed in traffic 1956-2016



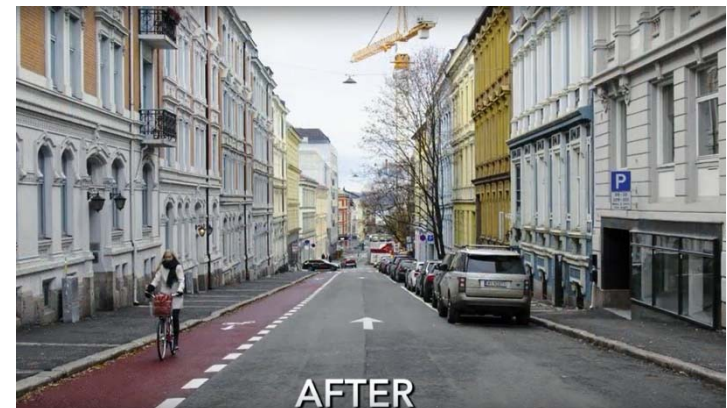
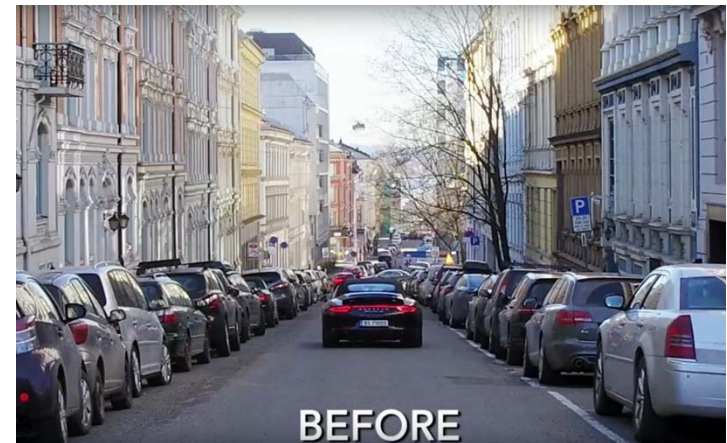
In 1960s & 70s, between 100 and 200 children died in traffic in Sweden every year. Now this figure is 2 to 3.

Source: Swedish Transport Administration

# Oslo

Zero pedestrian and cyclist deaths last year

- reduced car traffic
- lower speed limits
- improved infrastructure
- heart zones (*hjertesoner*) around schools
- public transport, bicycle lanes and facilities for pedestrians

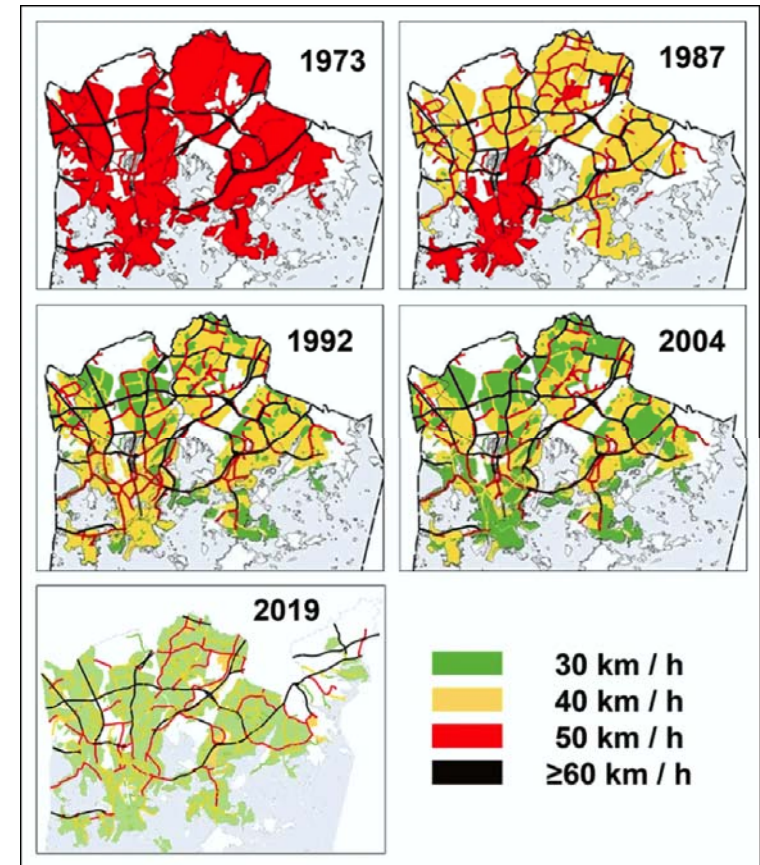


Source Oslo: [The Journey to Car-free](#)

# Helsinki

Zero pedestrian and cyclist deaths last year

- city centre: 30km/h zone
- new residential areas: designed to encourage lower speeds
- other areas: speed bumps, elevated pedestrian crossings and roundabouts to reduce speeds
- human-centered street design
- public transport and cycling



Source [City of Helsinki](#)



“

***Europe’s metropolitan areas now have a template to follow if they want a pathway to ending road deaths ... Through constant effort, political leadership, target setting and clear responsibilities, they have shown it is possible to achieve what, only fifty years ago, seemed impossible..***

”

Antonio Avenoso, European Transport Safety Council (ETSC) Executive Director

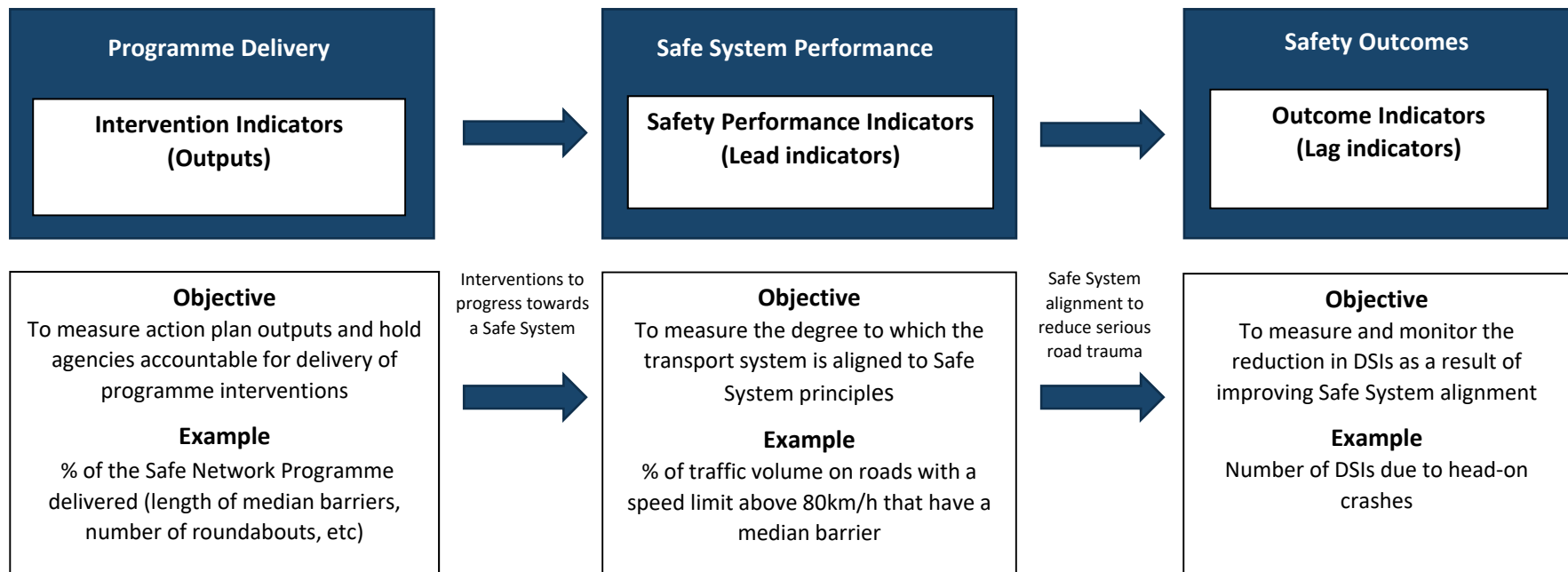
# Leadership at all levels

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Leadership and system management

# System Management - Outcomes framework

What gets measured gets managed



# Vision Zero for Tāmaki Makaurau

A TRANSPORT SAFETY STRATEGY  
AND ACTION PLAN TO 2030



# Public Feedback Report

SPEED LIMITS BYLAW  
2019







# Key messages

Achieving a step change in road safety performance

- We have the tools
- We need to implement at scale
- This will require leadership at all levels





# We also need to build capability and capacity at all levels



To register interest for our pilot Vision Zero course, email [maria.drinkwater@nzta.govt.nz](mailto:maria.drinkwater@nzta.govt.nz)

**This includes supporting those at the  
start of their road safety career**



**SAFE SYSTEM FOR UNIVERSITIES**  
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State Government

[www.roadsafetyeducation.vic.gov.au/teaching-resources/tertiary-education](http://www.roadsafetyeducation.vic.gov.au/teaching-resources/tertiary-education)