

Protecting Young Lives

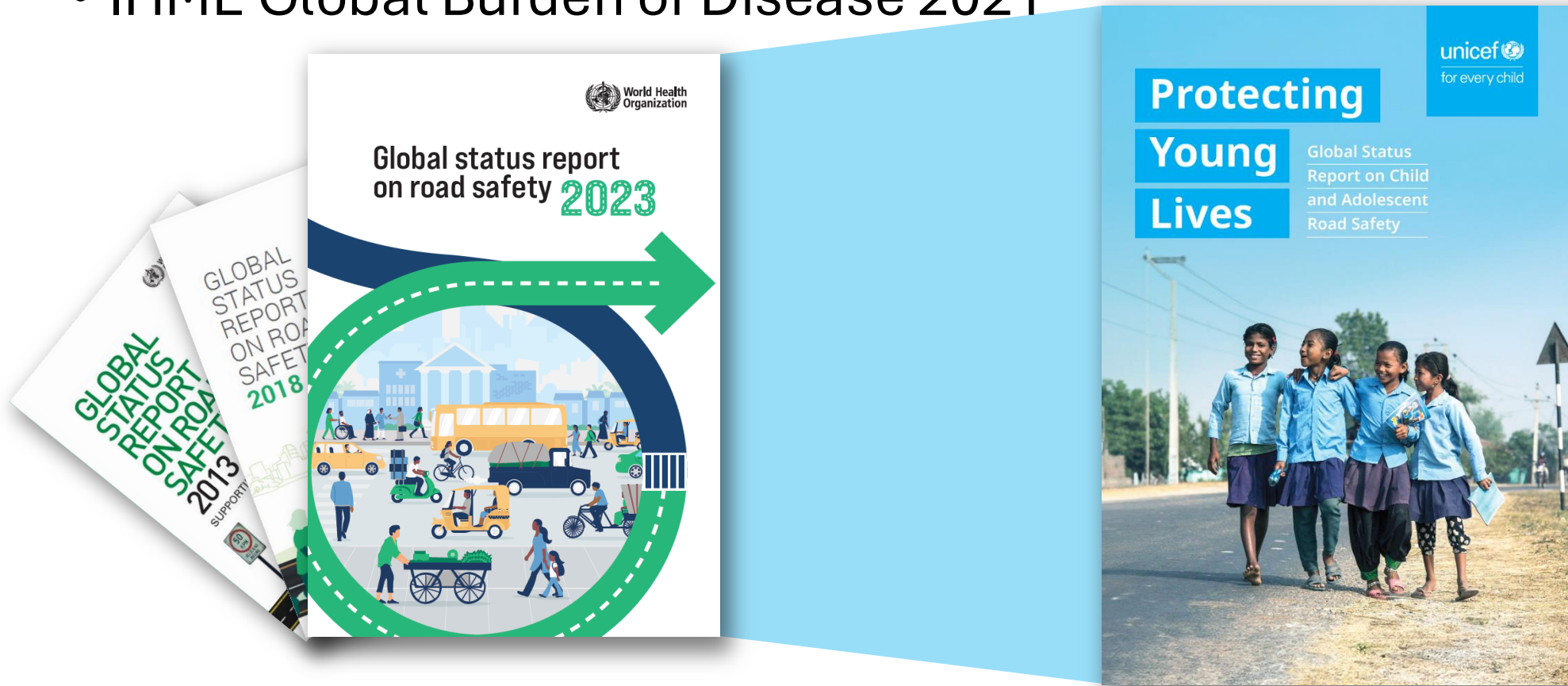
Global Status
Report on Child
and Adolescent
Road Safety

unicef 
for every child



Introducing the Global Status Report on Child & Adolescent Road Safety

- WHO data from Global Health Estimates 2021
- IHME Global Burden of Disease 2021



Key findings and data insights

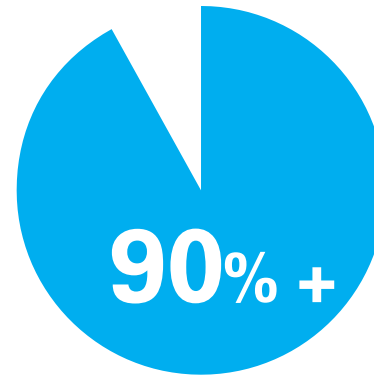
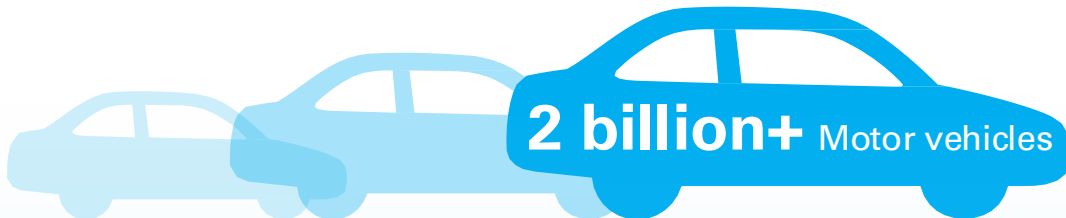


An estimated
500 children and adolescents
0-19 years die in road traffic crashes
every day. **One death every 3 minutes.**



By 2030

the number of cars is expected to double worldwide



of road traffic fatalities
in children 19 and
under come from

**Low- and middle-
income countries**



Ranking of causes of death by age group

RANK	AGES 0-1 year	AGES 1-4 years	AGES 5-9 years	AGES 10-14 years	AGES 15-19 years
1	Preterm birth complications	Lower respiratory infections	Lower respiratory infections	Road injury	Road injury
2	Birth asphyxia and birth trauma	Malaria	Road injury	Drowning	Interpersonal violence
3	Respiratory infections	Diarrhoeal diseases	Diarrhoeal diseases	Lower respiratory infections	Collective violence and legal intervention
4	Congenital anomalies	Drowning	Drowning	Other unintentional injuries	Self-harm
5	Diarrhoeal diseases	Measles	Congenital anomalies	Congenital anomalies	Maternal conditions
6	Malaria	Congenital anomalies	Malaria	Diarrhoeal diseases	Cardiovascular diseases
7	Neonatal sepsis and infections	Tuberculosis	Meningitis	COVID-19	COVID-19
8	Tuberculosis	Protein-energy malnutrition	Other unintentional injuries	Meningitis	Tuberculosis
9	Syphilis	HIV/AIDS	Tuberculosis	HIV/AIDS	Other unintentional injuries
10	Meningitis	Meningitis	HIV/AIDS	Tuberculosis	Congenital heart anomalies

Age surfaces Risk categories



Infants

0 to 12 months

- Highly dependent on adult mobility and supervision.
- Low overall risk.



Children

1 to 4 years

- Highly dependent on adult mobility and supervision.
- Passenger vulnerability when without age-appropriate child restraints.



Older children and adolescents

5 to 9 years

- Independent mobility established
- Coincides with the age of walking and running – pedestrian vulnerability
- Passenger vulnerability – require protection from car restraints
- Developmental factors
- Becoming independent riders – helmet usage



Adolescents

10 to 19 years

- Consists of novice drivers
- Users of powered 2/3 wheelers
- Risk-taking behaviour and outdoor play
- Influence of alcohol
- Influence of peers
- Behavioural factors
- Pedestrian, passenger and driver vulnerability

Under 5's

Risk factors

- Unique vulnerability of children is reflected in the risk factors



Non-modifiable factors

Age

Sex

Size

Cognition

Development

Hearing & seeing



Modifiable factors

Risk taking

Lack of
experience

Peer
pressure

No safety
equipment

Poor
infrastructure

Unsafe
vehicles

Lack of knowledge

Inadequate post-
crash response

Involvement in RTCs

- Common involvement of children and adolescents in road crashes by broad age groups



Young children

Affected as pedestrians



Young children and adolescents

Affected as passengers



Older children and adolescents

Affected as cyclists and on powered 2/3 wheelers

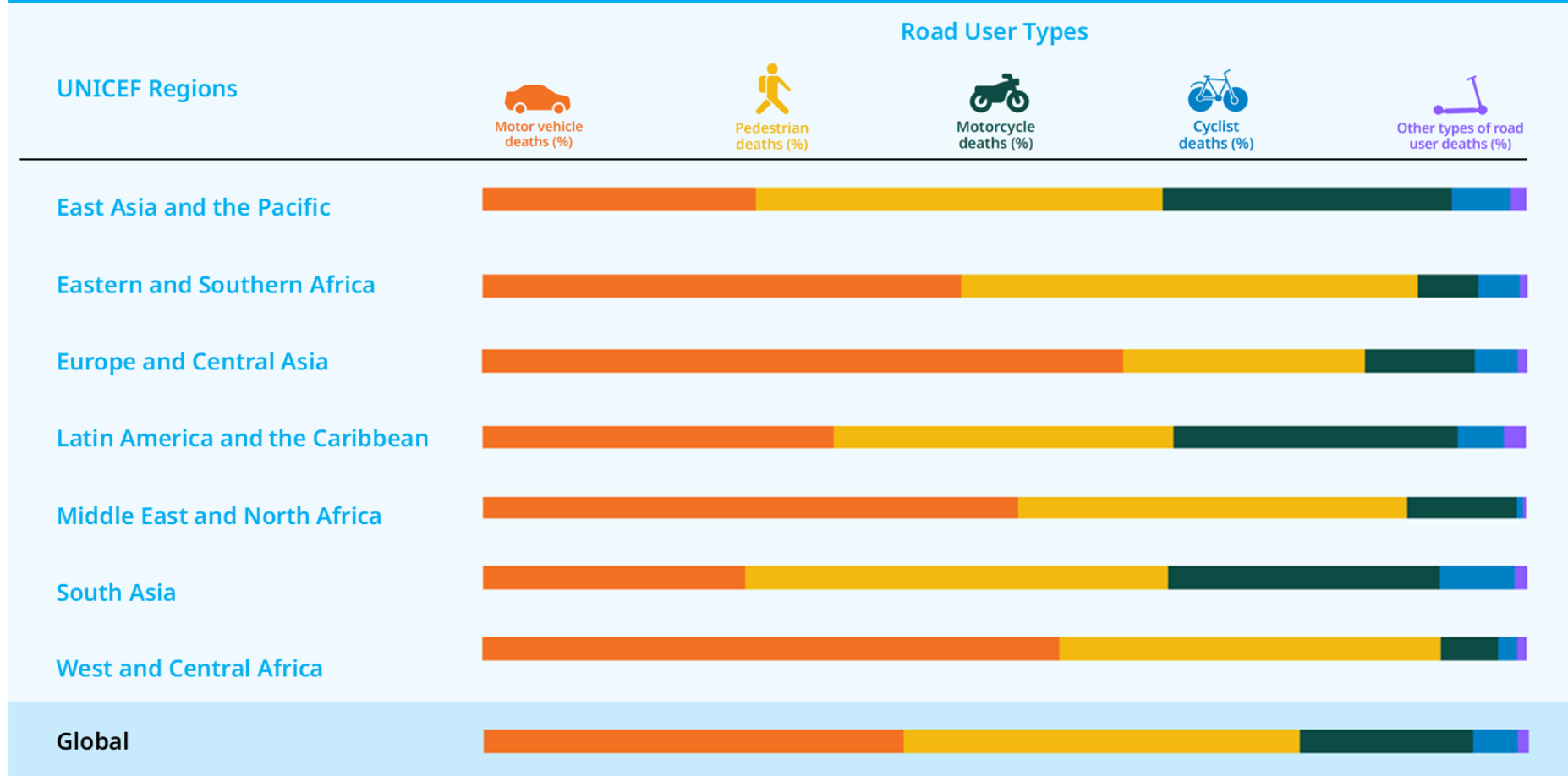


Older children and young adults

Affected as novice drivers

Regional insights

Figure 5. Percentage distribution of country-reported deaths by road user type and UNICEF region for children and adolescents aged 0–19 years, 2021



Source: Global Burden of Disease Estimates 2021, IHME 2023

Safety regulations in RTCs



37.2%

of countries test all drivers involved in a fatal collision for alcohol



19.3%

of countries have a child restraint law **and** anchor standards



28.5%

of countries set BAC ≤ 0.02 g/dl for novice drivers



56.4%

of countries have a child restraint law **only**



66.9%

of countries ban children from sitting in the front seat



33.7%

of countries set age/height criteria for child motorcycle passengers



90.1%

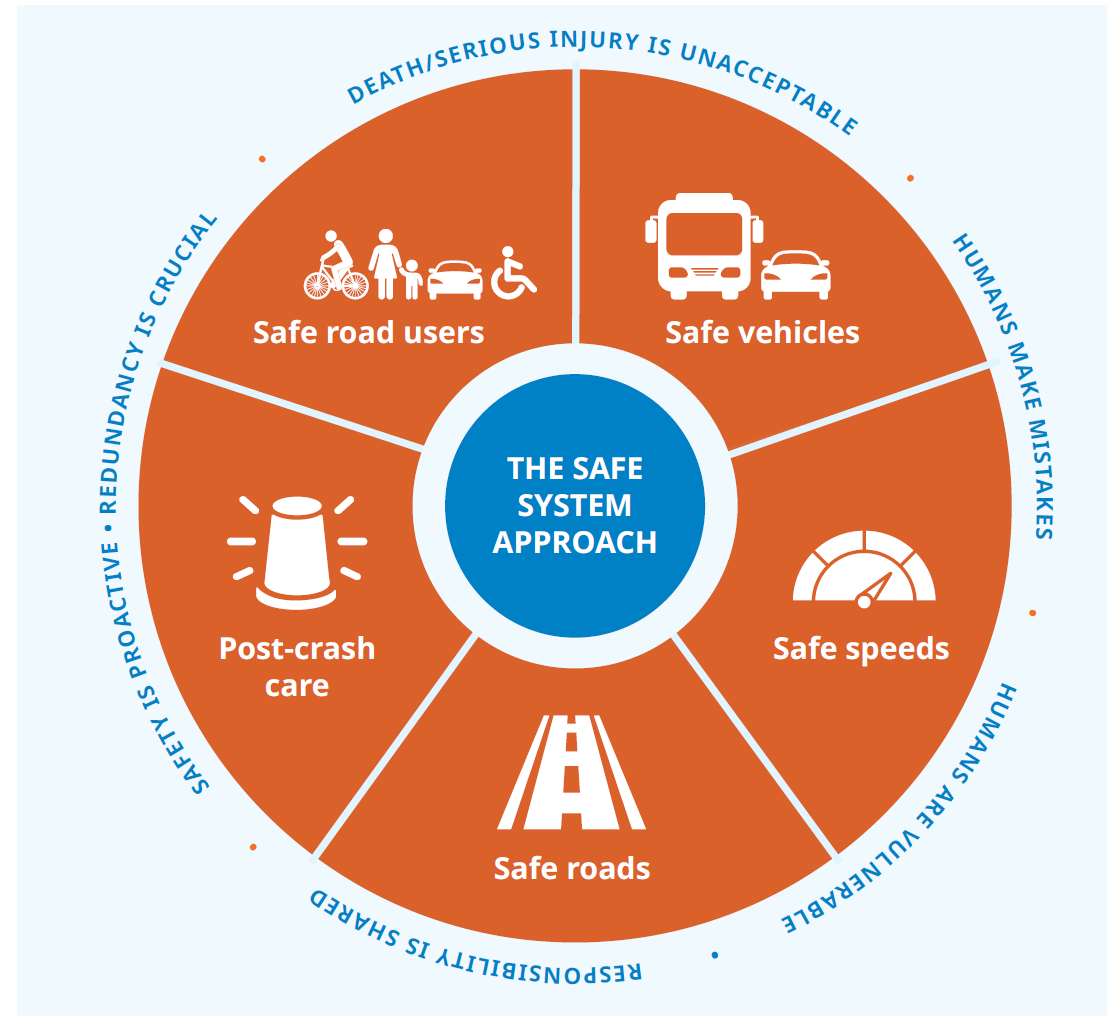
of countries have a distracted driving law in place



91.3%

of countries have drug driving laws

Safe Systems Approach



Children-centered SS's

- Roads are designed for adult cognition and behaviour
- Children:
 - Poor speed/distance judgment
 - Smaller therefore less visible
 - Less predictable
- Therefore: Safe systems must be child-adapted, not child-trained

EXAMPLES OF EFFECTIVE ROAD SAFETY INTERVENTIONS

INTERVENTION	ESTIMATED EFFECTIVENESS
30 km/h speed zones	70% reduction in fatal child pedestrian injuries
Sidewalks/footpaths	40-60% casualty reduction
Separated cycling lanes	44% fewer bicycle deaths in cities
Pedestrian refuge islands	25-40% reduction in pedestrian injuries
Bicycle helmets fitted and worn properly	48% reduction in head injury 60% reduction in serious head injuries 53% reduction in traumatic brain injuries 34% reduction in the number of deaths or serious injuries
Motorcycle helmets	69% reduction in the risk of head injury 42% reduction in the number of deaths

Conclusions

- Road traffic injury is preventable — not inevitable
- Children are not small adults on the road
- The burden falls on LMICs — and on vulnerable road users
- The policy landscape is not keeping pace
- Safe Systems, applied with a child lens, is the answer