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## ECONOMIC COMMISSION FOR EUROPE

INLAND TRANSPORT COMMITTEE

Working Party on Road Traffic Safety
(Thirty-second session, 13-16 April 1999,
agenda item 11 (b))

## ASSISTANCE TO THE VICTIMS OF ROAD ACCIDENTS

## Transmitted by the European Federation of Road Traffic Victims (FEVR)

<u>Note</u>: At its thirty-first session, the Working Party took note of informal document No. 3 on assistance to the victims of road accidents submitted by FEVR and asked this organization to draft a formal proposal for the thirty-second session outlining the objectives, proposed actions and a timetable for work by WP.1 on this item (TRANS/WP.1/62, para. 54).

The secretariat reproduces below the document on this subject received from FEVR.

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#### Assistance to the victims of road accidents

1. The study COST313  $\underline{1}$ / and the European Parliament's Conference on Road Safety  $\underline{2}$ / have estimated that the socioeconomic cost of one person killed in a road accident amounts to US\$2 million, quite apart from the infinite suffering it causes to victims and/or their relatives.

2. The experience of and studies done by the European Federation of Road Traffic Victims (FEVR) show that appropriate emergency assistance can lead to a decrease in the number of victims and the gravity of the trauma caused. Furthermore, adequate emotional, social, medical and juridical assistance to the injured as well as to their relatives, could reduce their psychological and physical stress, thus decreasing their suffering, and facilitating their return to a normal life, which in turn would contribute to a decrease in the socioeconomic costs  $\underline{3}/$ .

3. The improvement of first aid for road traffic was among the Recommendations of the third African Road Safety Congress organized in 1997 by the Economic Commission for Africa and the Organisation for Economic Co-operation and Development (OECD)  $\underline{4}/$ .

4. The improvement of first aid and assistance to the victims of road accidents was also included in a recent "Resolution for road safety" adopted by the European Parliament 5/.

5. The World Health Organization (WHO) has expressed its support for FEVR's efforts concerning assistance to the victims of road traffic accidents  $\underline{6}/$ .

6. In the "Universal Declaration of Human Rights", <u>7</u>/ Article 22 states: "Everyone, as a member of society, has the right to social security".

7. In the "Comparative study of the organisation and functioning of emergency medical assistance services" undertaken by the Council of Europe  $\underline{8}$ / in 1990, the possibilities of harmonization and national and international coordination are considered.

8. In Resolution No. 45 approved in 1983 by the European Conference of Ministers of Transport (ECMT), measures aimed at improving first aid in road traffic are recommended to member countries  $\underline{9}$ /. However, in FEVR's opinion, this Resolution only partially covers present day necessities.

9. It appears to FEVR that there is a gap in the 1968 Vienna Convention, the revisions, amendments and resolutions that needs to be addressed by the Working Party on Road Traffic Safety (WP.1).

10. Therefore, FEVR proposes to open a discussion in WP.1 on the following draft resolution on comprehensive assistance to road traffic victims.

On the basis of the documentation cited above,

- convinced that a qualitative and quantitative improvement of first aid in road traffic would contribute towards an increase in the chances of survival of road accident victims and would reduce the seriousness of their injuries;

- convinced that the huge socioeconomic costs of road traffic accidents justify investments in first aid and assistance to victims, proportional to the size of those costs;
- considers that improved education and training at all levels would increase the efficiency of first aid;
- considers that simple first aid procedures should be part of school education and training;
- considers that these simple procedures should also be regularly highlighted by the media, in order to reinforce the education of children and students as well as to keep the general population aware of them;
- considers that knowledge of and proof of simple practical first aid skills should be required in examinations for the issuance of driving licences;
- considers that all motor vehicles should be equipped with a first aid kit;
- considers that professional drivers, policemen, firemen etc. should have the possibility of receiving enhanced education and training in first aid techniques;
- considers that rapid transport of the injured to appropriate health structures may be essential for the survival and reduction of the severity of victim's injuries;
- considers that these health structures should have qualitatively and quantitatively appropriate facilities and medical and paramedical personnel trained in the speciality of emergency medicine;
- considers that, in addition to the medical help given to the injured, it is necessary to provide psychological, social and juridical help to those victims and/or to their relatives as is now often the case with large-scale catastrophes;
- considers that to provide access to rehabilitation to all road traffic victims, and particularly those who have suffered brain damage, is an expression of human rights;
- considers it necessary to maintain at the same level of efficiency each link of the chain of interventions, from first aid to medical care up to final rehabilitation and/or assistance with psychological, social and juridical problems;

the United Nations Economic and Social Council recommends to member countries:

#### A. Early alert

- (a) To install emergency telephones along main roads, highways as well as in accident black spots.
- (b) To agree on a standardized, free, emergency telephone number, for example 112 (which is presently in use in 30 per cent of European countries).

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- (c) To encourage the use of mobile phones to call for assistance (free of charge).
- (d) To teach [as part of training for a driving licence] a very simple alarm protocol: "Where did the accident occur? What kind and how many vehicles are involved? How many victims are there and what condition are they in? Is there any fire?, etc."

#### B. Secure the area of the accident

- (a) To teach motorists [as part of training for a driving licence] to secure and signal the area (triangle, lights) in a safe way, so as to avoid further accidents and protect victims until the arrival of the police.
- (b) To teach motorists [as part of training for a driving licence] to avoid and prevent further complications (for instance by switching off the ignition of the vehicle and disconnecting the battery).

#### C. Fast medical assistance

- (a) To teach [driving licence, school, media] very simple first aid techniques (like artificial respiration and stopping bleeding, putting the injured on their side etc.) as well as actions that should be avoided.
- (b) To introduce a disclaimer for nurses or doctors, who give medical assistance before the arrival of the official medical staff dispatched to the accident.
- (c) To encourage the spreading and availability of best practice and instrumentation for advanced emergency life saving techniques.
- (d) To set up a fast well coordinated network for dispatching the injured to hospitals and to organize the system so that victims are not necessarily transported to the nearest hospital, but to the extent possible to the nearest adequate hospital, according to the nature and severity of the injuries.
- (e) To standardize hospital emergency protocols and ensure that they permit road traffic victims to be tracked through the various services.
- (f) To provide and ensure adequate geographical distribution of an appropriate number of ambulances or/and helicopters so that in principle they can be on the scene of the accident in 5 to 20 minutes from when the alarm is received in densely populated areas and in less than one hour in low density areas.
- (g) To properly equip the above-mentioned ambulances, helicopters, fixed and mobile emergency units and to ensure that they are operated by a sufficient number of qualified and well trained personnel (doctors and paramedics specialized in emergency medicine).

#### D. Short, medium and long term assistance

- (a) To provide, in addition to the medical help given to the injured victims, psychological and social assistance to those victims as well as to other concerned persons present or not at the scene of the accident.
- (b) To create or support existing "Centres of assistance" where the victims and/or their relatives can find free emotional, psychological, social and juridical assistance.
- (c) To provide access to rehabilitation to all disabled victims, taking particularly into account those affected by brain damage, and making every effort to reintegrate them into normal life.
- (d) To provide long-term assistance to the permanently disabled.

(e) To introduce some legal discipline (fixed delays for reimbursements, advance payments, exclusion of responsibility for young children and elderly persons etc.) between insurance companies and victims in order to limit conflicts.

#### References

1/ COST313 Coûts socio-économiques des accidents de la route, Commission Européenne, ISBN 1018-5593 (1993).

 $\underline{2}/$  La sécurité routière en Europe: une responsabilité partagée, Conférence tenue au Parlement Européen le 14 octobre 1997, publié par M&M Conseil (1997).

 $\underline{3}$ / Impact of road death and injury. Research into the principal causes of the decline in quality of life and living standards suffered by road crash victims and victims' families. ISBN 2-940183-00-7 Publication, FEVR (1997).

 $\underline{4}/$  Joint ECA/OECD  $3^{\rm rd}$  African Road Safety Congress, Pretoria, 14-17 April 1997.

5/ Resolution of 11 March 1998 of the European Parliament on the Commission's communication "Promoting road safety in the EU - the programme for 1997-2001".

6/ Letter of 11 November 1998 from Dr. C. J. Romer, Chief, Violence and Injury Prevention, Social Changes and Mental Health, World Health Organization (WHO), Geneva, Switzerland.

<u>7</u>/ "Universal Declaration of Human Rights", adopted by UN General Assembly Resolution 217A (III) of 10 December 1948.

 $\underline{8}/$  "Comparative study of the organisation and the functioning of emergency medical assistance services", Council of Europe, Strasbourg, 1990, ISBN 92-871-1726-8.

<u>9</u>/ Resolution No. 45 on "Measures aimed at improving first aid in road traffic", European Conference of Ministers of Transport (ECMT), Paris, 24 November 1983 [CM(83)20].

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