



**Economic and Social
Council**

Distr.
GENERAL

TRANS/WP.1/1999/30
15 July 1999

Original: ENGLISH

ECONOMIC COMMISSION FOR EUROPE

INLAND TRANSPORT COMMITTEE

Working Party on Road Traffic Safety

(Thirty-third session, 28 September - 1 October 1999,
agenda item 10)

**COLLABORATION WITH OTHER ECE BODIES AND
INTERNATIONAL ORGANIZATIONS**

Transmitted by the Cochrane Injuries Group

Under this agenda item, the Working Party will receive a presentation from representatives of the Cochrane Injury Group, which is carrying out a review of the effectiveness of pedestrian safety education programmes. Summary information on the review is provided below.

* * *

Safety education of pedestrians for injury prevention: a systematic review.

Background

Almost one million people died in 1990 in road traffic accidents around the world (Murray 1996). The Global Burden of Disease Study projected 1.39 million deaths world-wide (all ages) in 2000 (death rate: 23 per 100,000) due to road traffic accidents, including 279,000 children under 15 and 209,000 adults of 60 or more (Murray 1996). 10-15 million persons are injured in road traffic crashes world wide each year (1985-1986), leading to numerous avoidable hospitalisations and disabilities (UK-TRL 1991). The total annual cost of traffic injuries has been estimated to be 1-3% of the gross domestic product (GDP) in many developing countries. Countries with a GDP per capita of less than \$3,500 (assuming an average cost of 1% of GDP) lose up to \$25 billion annually (Barss 1998).

Pedestrians account for a considerable proportion of all traffic fatalities, up to 84% in some developing countries (Barss 1998). Fatality rates are more than 15 times greater for pedestrians than for car occupants (78 vs 5 per billion passenger kilometres, United Kingdom figures) (Barss 1998). In the western industrialised world, the single leading cause of mortality in 5-9 year old children is pedestrian injuries (Rivara 1990). The elderly constitute another vulnerable group of pedestrians (Barss 1998).

To prevent pedestrian accidents, authors have recommended a combined strategy of education, law enforcement (reduced speed limits in residential areas) and environmental modification (traffic calming schemes, improved urban design) for more than 30 years (Avery 1982, Rivara 1990). In many countries, one component of prevention of pedestrian injuries is through pedestrian safety education programmes provided to children or their parents, and to the elderly. The effectiveness of pedestrian safety education programmes in reducing pedestrian accidents is not clear so far and the money invested in them might be better allocated to environmental changes (Roberts 1994). Some reviews have been carried out on injury prevention but they included causes other than pedestrian crashes and were focused on children and/or adolescents (Towner 1996, Munro 1995). But they included trials of lesser quality than randomised controlled trials (RCTs) and there has been no clear attempt to find non-English publications. Results from RCTs are less prone to bias than other study designs when comparing alternative forms of healthcare (Mulrow 1997).

The aim of this systematic review of randomised controlled trials is to quantify the effectiveness of pedestrian safety education programmes in reducing pedestrian injuries, with a clear attempt to retrieve trials from English and non-English speaking countries.

Objectives

1. To quantify the effectiveness of pedestrian safety education programmes on mortality and morbidity of pedestrian injuries due to road traffic crashes.
2. To quantify the effectiveness of pedestrian safety education programmes for pedestrians on modification of knowledge, skills, attitude and behaviour of pedestrians

References

- Avery J.G., Avery P.J. Scandinavian and Dutch lessons in childhood road traffic accident prevention. *BMJ* 1982; 285:621-6.
- Barss P. Injury prevention: an international perspective - epidemiology, surveillance and policy. New York: Oxford University Press; 1998.
- Mulrow C.D. and Oxman A.D. (eds). *Cochrane Collaboration Handbook* [updated September 1997]. 4th ed. Oxford: Update Software; 1997.

Munro J., Coleman P., Nicholl J., Harper R., Kent G. and Wild D. Can we prevent accidental injury to adolescents? A systematic review of the evidence. *Inj.Prev.* 1(4):249-255, 1995.

Murray C.J.L, Lopez A.D. WHO, editor. Global health statistics: a compendium of incidence, prevalence and mortality estimates for over 200 conditions. WHO; 1996.

Rivara F.P. Child pedestrian injuries in the United States: current status of the problem, potential interventions, and future research needs. *AJDC* 1990; 144:692-6.

Roberts I., Ashton T., Dunn R., Lee-Joe T. Preventing child pedestrian injury: pedestrian education or traffic calming? *Aust J Public Health* 1994; 18(2):209-12.

Towner C., Downswell T., Simpson G., Jarvis S. Health promotion in childhood and young adolescence for the prevention of unintentional injuries, Health promotion effectiveness reviews; 2. London: Health Education Authority, 1996.

The full text of the review can be found on the internet: http://www.ich.ucl.ac.uk/srtu/docs/prot_od.htm

Contact address:

Dr Olivier Duperrex
Systematic Review Training Unit
Department of Epidemiology and Public Health
Institute of Child Health
30 Guilford Street
London WC1N 1EH
United Kingdom
Telephone 1: +44 171 242 9789 extension: 2655
Telephone 2: +44 171 242 2723
E-mail: O.Duperrex@ich.ucl.ac.uk

The Cochrane Collaboration

The Cochrane Collaboration is an international, not for profit, organisation involved in preparing, maintaining and promoting the accessibility of systematic reviews of the effects of health care interventions. The collaboration's work is based on nine key principles:

Collaboration, by internally and externally fostering good communications, open decision-making and teamwork.

Building on the enthusiasm of individuals by involving and supporting people of different skills and backgrounds.

Avoiding duplication, by good management and co-ordination to maximise economy of effort.

Minimising bias, through a variety of approaches such as scientific rigour, ensuring broad participation, and avoiding conflicts of interest.

Keeping up to date, by a commitment to ensure that Cochrane Reviews are maintained through identification and incorporation of new evidence.

Striving for relevance, by promoting the assessment of healthcare interventions using outcomes that matter to people making choices in health care.

Promoting access, by wide dissemination of the outputs of the collaboration, taking advantage of strategic alliances, and by promoting appropriate prices, content and media to meet the needs of users worldwide.

Ensuring quality, by being open and responsive to criticism, applying advances in methodology, and developing systems for quality improvement.

Continuity, by ensuring that responsibility for reviews, editorial processes and key functions is maintained and renewed.

For more information visit the Cochrane website: <http://hiru.mcmaster.ca/cochrane/>

The Cochrane Injuries Group

The main work of the Collaboration is done by about fifty Collaborative Review Groups, within which Cochrane Reviews are prepared and maintained. The Cochrane Injuries Group is one of these Collaborative Review Groups. Registered in 1997 the Group, which is based at the Institute of Child Health in the UK, has published 12 full reviews and nine protocols on the Cochrane Library. These reviews concern questions about the prevention, treatment and rehabilitation of Injury. The Group has an international membership of people with expertise in Injury research and the care of Injured patients. More information about the Injuries Group can be obtained by contacting Frances Bunn, Department of Epidemiology and Public Health, Institute of Child Health, 30 Guildford Street, London WC1N 1EH. Tel +44 171 905 2655, Fax +44 171 242 2723. E mail f.bunn@ich.ucl.ac.uk or by contacting the Group's website at: <http://www.cochrane-injuries.ich.ucl.ac.uk>

The systematic reviews produced by the Collaborative Review Groups are published on the Cochrane Library. This is updated quarterly and distributed on an annual subscription basis on disk, CD-ROM and via the Internet. It includes several different databases:

- The Cochrane Database of Systematic Reviews contains protocols and reviews prepared and maintained by the Collaborative Review Groups.
- The Database of Abstracts of Reviews of Effectiveness, which contains critical assessments and structured abstracts of other systematic reviews.
- The Cochrane Controlled Trials Register contains bibliographic information on tens of thousands of controlled trials.
- The Cochrane Review Methodology database

More information about the Cochrane Library can be found at: <http://www.cochrane.co.uk> or by e-mail at info@update.co.uk.
