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## ECONOMIC COMMISSION FOR EUROPE

INLAND TRANSPORT COMMITTEE

Working Party on Road Traffic Safety (Forty-third session, 22-25 September 2003, agenda item 6)

### **FUTURE WORK**

#### **Improving motorcycle safety**

#### Transmitted by the United States of America

In the United States, motorcycling is experiencing astounding growth. New unit sales of on-highway motorcycles have increased approximately 91 percent since 1997. About 471,000 new on-highway motorcycles were sold in the US in 2000 compared to 379,000 in 1999. This increasing trend is expected to continue over the next 5 to 7 years.

Along with the increased motorcycle population, motorcycle crash-related fatalities have also been increasing since 1997. Since 1996, more than 100,000 motorcyclists have died in traffic crashes. In terms of vehicle miles of travel, in 2001, motorcyclists were about 26 times as likely to die in a crash than someone riding in a passenger vehicle. This is a steep increase from 1997, when motorcyclists were 14 times as likely to die in a crash than someone riding in a passenger vehicle.

Crash statistics also indicate that head injury is a leading cause of death and serious injury in motorcycle crashes in the United States. Compared to a helmeted rider, an un-helmeted rider is 40 per cent more likely to incur a fatal head injury. Finally, a recent analysis of age shows that over the past 10 years, fatalities in the 20 to 29 year old age group, the group with consistently the highest annual number of motorcycle fatalities, decreased, while fatalities in the 40 and over age groups increased. Similar increases in death rates in this age group have been reported in other countries.

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The U.S. is actively working to promote safer motorcycling and to find effective solutions to this major public health problem. The NHTSA initiated a motorcycle safety programme which is based on a comprehensive approach that works to: (1) prevent motorcycle crashes; (2) mitigate rider injury when crashes do occur; and (3) provide rapid and appropriate emergency medical services response and better treatment for crash victims. Some of the key areas of focus include: rider impairment, rider education and training, motorcycle operator licensing, motorcycle technologies and roadway design and helmet laws.

#### **Recommendations for WP.1 Action**

To start a discussion and exchange of information among WP.1 member nations and key nongovernmental organizations on motorcycle safety programmes.

- 1. Establish a working group to study the extent of the problem among member States
- 2. Identify countries with low fatality and injury rates;
- 3. Identify those countries' successful programmes, outreach campaigns and practices;
- 4. Based on the successful examples, develop strategies that could be adopted by other member States and non-member States

As part of the Action Plan, one task would be to distribute a questionnaire to other member States on:

- How do other countries detect, apprehend and prosecute impaired cyclists?
- Do countries or region require advanced skills training before cyclists are granted licenses?
- Does the driving permit display the skill level? Who pays for the training ?
- What does the motorcycle fatality data show for older (over 40 years of age) cyclists?
- Is the cyclist prosecuted if they have a crash without having had proper training?
- Number of registered motorcycles and cyclists;
- Fatality and injury rates;
- Fatality and injury rates due to motorcyclists not wearing a helmet at the time of the crash;
- Laws governing helmet use;
- Amount of the penalty for not wearing a helmet;
- Are there any types of incentives, e.g., reduced insurance premiums, that are offered to increase the use of helmets;
- Are there any programmes or publicity campaigns designed to increase the use of helmets;
- Are there any repercussions, other than fines, if riders do not wear a helmet;
- Other successful approaches.

#### **Estimated Timeframe**

September 2003	Form a working group
April 2004	Develop and distribute questionnaire
April 2005	Present preliminary results and recommendations to WP.1