

Submission to UK Statistics Authority

Assessment of Reported Road Casualties Statistics

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Introduction

The Institute of Public Health in Ireland

The remit of the Institute of Public Health in Ireland (IPH) is to promote cooperation for public health between Northern Ireland and the Republic of Ireland in the areas of research and information, capacity building and policy advice. Our approach is to support Departments of Health and their agencies in both jurisdictions, and maximise the benefits of all-island cooperation to achieve practical benefits for people in Northern Ireland and the Republic of Ireland.

IPH welcomes the opportunity to respond to this consultation given the significant burden of injury, disability and mortality associated with road traffic collisions. IPH supports the development, maintenance and use of appropriate data to inform public health policy and practice and to promote road safety at national, regional and local levels.

IPH has been actively engaged in research and policy development relating to the interface between health, travel and the built environment. IPH published a review of the 'Health Impacts of Transport' (Kavanagh et al, 2005), 'Health Impacts of the Built Environment' (Lavin et al, 2006), 'Active travel - healthy lives' (Lavin et al, 2011).

IPH has made submissions to the following road safety consultations on the island of Ireland:

- Department of the Environment's Road Safety Strategy 2010-2020 for Northern Ireland, in which we highlighted the importance of cross-sectoral working, our support for active travel, the benefits of a Health Impact Assessment and the need to consider inequalities in relation to road deaths and injuries (Institute of Public Health, 2010).
- Private Member's Bill on 20mph speed restrictions in residential areas in Northern Ireland, in which we supported the proposals on the basis of helping to reduce pedestrian deaths and injuries and promote active travel through safer walking and cycling routes (Institute of Public Health, 2012).
- Road Safety Authority's Road Safety Strategy 2013-2020 for the Republic of Ireland, in which we supported the development of indicators and targets to monitor road casualties with particular reference to vulnerable road users (such as younger people, older people and cyclists) and social inequalities (Institute of Public Health, 2012).
- Department of the Environment's Draft Road Traffic (Drink Driving) Amendment Bill and Additional Measures to Tackle Drink and Drug Driving in Northern Ireland, in which we supported the proposals to fix the legal (driving) alcohol limit to 50mg/100ml on the basis of evidence showing that this can reduce road deaths and serious injuries. We also supported a combined approach of

random breath testing, the use of roadside evidential testing equipment and the removal of the statutory option as a more efficient and accurate means of identifying drink drivers and deterring those who may consider drink driving (Institute of Public Health, 2012).

IPH is a member of the Injury Observatory for Britain and Ireland (IOBI). IOBI is an international collaborative network representing public health observatories from England, Scotland, Wales and Ireland. The purpose of IOBI is to support injury prevention practitioners working on the prevention of injuries caused by accidents, violence or self-harm, through relevant and easily accessible information, tools and analysis. These include injury trend data, policies and strategies, systematic reviews and prevention tools (Injury Observatory for Britain and Ireland, 2013).

IPH was also a partner in the development of the European Child Safety Report Card as part of the TACTICS (Tools to Address Childhood Trauma, Injury and Children's Safety) project of the European Child Safety Alliance programme of Eurosafe.

IPH is a member of the Republic of Ireland's Health Service Executive's Child Injury Prevention Planning Group.

Key points

- IPH supports the development, maintenance and use of appropriate data to inform public health policy and practice and to promote road safety at national, regional and local levels.
- DfT's road casualties statistics are useful, comprehensive in scope, well-documented and updated in a timely manner.
- One area of concern about the statistics is the under-reporting of non-fatal casualties to police and the perceived completeness of the statistics by users of the statistics. While DfT assesses and estimates the level of under-reporting, it could be made more prominent in DfT's technical documentation.
- As an organisation that covers both the Republic of Ireland and Northern Ireland, IPH recommends that statistics for Northern Ireland be made directly comparable with, and reported alongside, statistics for Great Britain.
- Tackling inequalities in injury fatalities is a key component of public health policy and practice. It is important that we have good evidence to quantify these inequalities. Therefore it would be very useful to examine casualties by measures of social class / deprivation.

Please indicate which of the statistics you use, how you use them or how you would like to be able to use them.

IPH has used DfT's statistics on:

- Costs of casualties
- Contributing factors to casualties
- Casualties where alcohol or drugs were involved
- Casualties by road type

IPH uses the statistics to quantify the burden of road casualties and as evidence in our work to inform policy and support injury prevention.

How well these statistics meet your needs, and how they could be improved. Please consider their comprehensiveness, the level of detail, accessibility and timeliness, commentary and presentation, and any explanations of methods or other available metadata.

DfT's road casualties statistics are comprehensive in scope, well-documented and updated in a timely manner.

The documentation includes a good assessment of the strengths and limitations of the data especially concerning the under-reporting of non-fatal casualties to police. DfT also make reasonable efforts to quantify and address this limitation by combining the reported road casualties data with other data source (eg hospital admissions, survey data) to produce a "best estimate" of the total number of road casualties.

The data are published for relevant unit of analysis – people, casualties and type of road user.

IPH would make the following recommendations for improvement:

1. As an organisation that covers both the Republic of Ireland and Northern Ireland, IPH recommends that statistics for Northern Ireland be made directly comparable with, and reported alongside, statistics for Great Britain. This would allow for more direct comparisons between Northern Ireland and Great Britain.
2. IPH has a particular focus on health inequalities. Tackling inequalities in injury fatalities is a key component of public health policy and practice. It is important that we have good evidence to quantify these inequalities. Therefore it would be very useful to examine casualties by measures of social class / deprivation. At present the only such factors recorded are the address of where the accident occurred and the address of where the casualty normally resides. IPH recommends that statistics be routinely reported by local area deprivation of the address of where the accident occurred and the address of where the casualty

normally resides. These statistics would require cautious interpretation as it is difficult to separate individual effects from area effects.

3. As noted above, DfT assesses the level of under-reporting of casualties to police by comparing police data with hospital admission data for road traffic accidents. As the estimated level of under-reporting is considerable (48% in DfT's 'Reported Road Casualties in Great Britain: 2011 Annual Report') it would be advisable to include this estimate in DfT's [Transport statistics notes and guidance: Road accident and safety web page](#) and as a note in the data tables.

How satisfied you are with the way that the producer team in DfT engages and consults with you as a user. For example, if you have had any communication with them about these statistics in response to email enquiries, at user days or through consultations.

IPH has accessed statistics from the DfT website but has not engaged directly with the producer team in DfT.

It may be useful for us to share your comments with DfT, to enable them to take account of your views as they develop the statistics. Please let us know if you are happy for us to pass your comments on.

IPH is happy for DfT to receive a copy of this consultation response.

Contact details

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