

Motorcycle Passenger Helmet Use in Cambodia – A turning Point?

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Abstract

This abstract examines January 2016 start of enforcement of Cambodia's road traffic law as a potential turning point for passenger helmet use (PHU) among motorcyclists. Focus is on Kandal, Kampong Speu, and Phnom Penh provinces, where concerted efforts toward increased PHU have been underway since 2010, first with the Cambodia Helmet Vaccine Initiative (CHVI); and its scale up under the 2014-2016 USAID-DIV funded "Head Safe. Helmet On." (HSHO); implemented by AIP Foundation. School-based education, helmet/voucher distribution, public awareness campaigns, and advocacy and capacity building are combined to steadily increase PHU rates, which jumped subsequent to enforcement start.

Background

In Cambodia, there were 2,226 deaths and 6,005 serious injuries in 2014 (RCVIS, 2015); based on traffic police data in 2015, the fatality rate continued to increase by 5% (GCNP, 2016). Motorcycle users accounted for 73% of fatalities in 2014, while only 12% wore helmets at the time of collision. Helmets are proven to reduce the risk of death by 42% and of serious injury by 69% (Liu et al., 2008).

In 2009, the Cambodian Government endorsed the UN Decade of Action for Road Safety (2011-2020). In 2010, the Government and AIP Foundation launched CHVI in order to increase passenger, including child, helmet use in the three aforementioned, high-risk provinces. The campaign continued three years until HSHO kicked off in 2014 on a broader scale.

Throughout 2014, together with other stakeholders, HSHO's advocacy supported the Government, to draft a new road traffic law that for the first time would require passengers – in addition to drivers – to wear helmets when traveling by motorcycle. The new law containing this provision was officially promulgated on January 29th, 2015. On July 8th, 2015, the Sub-decree on Fines was approved with rates of fines five times higher than under the previous law (AIP Foundation, 2015).

On January 1st, 2016, enforcement began. At the same time, HSHO supported the drafting and approving of national and sub-national level enforcement action plans.

Methodology behind observed PHU rates

HSHO uses methodology developed with technical support from the United States Centers for Disease Control and Prevention. Quarterly helmet observations are conducted by our research partner Handicap International using a filming method to collect data on helmet use rates in 18 target and 6 control communes on the same day during two 1-hour periods at one intersection in each commune, between a local road and a main road such as national highway. The following data

KIM et al. is collected: direction of motorcycles, drivers and passengers wearing helmets, number of passengers, use of chin strap, gender of riders, identification of children below 15 years old (excluding babies). Observations are conducted during weekdays with normal conditions and weather (HI, 2014).

Results of post-enforcement observations

Table 1. Passenger Helmet Wearing Rates (HI, 2016)

	August 2014 (Baseline)		August 2015 (pre-enforcement)		January 2016 (post-enforcement)	
	<i>Target</i>	<i>Control</i>	<i>Target</i>	<i>Control</i>	<i>Target</i>	<i>Control</i>
PHU (averaged across 3 provinces)	10.00%	12.00%	12.78%	13.82%	29.90%	27.90%

Conclusions

PHU rates rose 17.2 percentage points in target areas and 14.08 percentage points in control areas in from August 2015 (pre-enforcement) and January 2016 (post-enforcement). Previous to that, rates from baseline (August 2014) to August 2015, when target areas saw rises of 2.78 percentage points in target areas and 1.82 percentage points in control areas. It is therefore reasonable to conclude that enforcement played a key role in boosting PHU rates.

Alongside this conclusion, however, there is the recognition that observations were conducted two weeks into January – a time at which enforcement was not yet as broad and robust as it is envisioned to be in the future. A new directive from the head of the police calls for stringent enforcement from mid-March. Rates are expected to rise again after.

References

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