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Practical steps in enhancing road safety

Lessons from the Road safety in 10 countries project in the Russian Federation

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ABSTRACT

This report describes an intersectoral road safety project implemented in two regions of the Russian Federation, Lipetsk and Ivanovo, between 2010 and 2014. Best practices identified from the global literature were used to target behaviour change in road users with regard to three main factors which influence outcomes in road traffic accidents – speed, wearing seat-belts and use of child restraints. The activities comprised social marketing, coupled with enhanced enforcement, and resulted in increases in the use of seat-belts and child restraints by 25–41 and 33–69 percentage points respectively and reduced speeding by 8–17 percentage points, as assessed by regular roadside measurements. Capacity-building workshops were held for traffic police and administrators and first aid training was provided for traffic police and at driving schools. The project structure, main achievements and lessons learned are discussed. The experience from this project, and in particular the social marketing, evaluation and training materials developed, would be valuable for road safety authorities, regional road safety managers and local authorities that would like to implement similar activities. Materials developed in the Russian language are available on the project website.

Key words

ACCIDENTS, TRAFFIC – prevention and control
SAFETY
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CONTENTS

ABBREVIATIONS

BAC	blood alcohol concentration
CPR	cardiopulmonary resuscitation
ECE R	United Nations Economic Commission for Europe Regulations
EMBARQ	World Resources Institute's Center for Sustainable Transport
FIA	Fédération Internationale de l'Automobile
GIBDD	State Inspectorate for Road Safety
GRSP	Global Road Safety Partnership
JHU	John Hopkins University
KAP	knowledge, attitude and practices
NGO	nongovernmental organization
PR	public relations
RRC	Russian Red Cross
RS10	Road safety in 10 countries (project)
RSR	road safety rules
RTC	road traffic crash
RTI	road traffic injury(ies)
RTR	Road Traffic Rules
SM	social marketing
TV	television
UN	United Nations
UNECE	United Nations Economic Commission for Europe
WHO	World Health Organization

EXECUTIVE SUMMARY

In response to the worsening global road traffic injury (RTI) and mortality trends, in 2004 the United Nations (UN) General Assembly adopted resolution 58/289, Improving global road safety, in which it called upon Member States to address the global road safety crisis.

The *World report on road traffic injury prevention (1)*, published the same year, provided countries with recommendations on how to implement specific measures aimed at preventing RTI, decreasing the level of injuries and their consequences, and evaluating the effectiveness of such actions. Practical measures include taking the safety of road users into account when planning and designing road networks; adopting vehicle safety standards; and enacting and enforcing laws on speed limits, addressing drink–driving, wearing helmets and seat-belts, and using child restraints.

In 2010, the World Health Organization (WHO), as part of a consortium which also included the Global Road Safety Partnership (GRSP), the World Bank, Johns Hopkins University (JHU), the World Resources Institute's Center for Sustainable Transport (EMBARQ) and the Association for Safe International Road Travel, with the financial support of Bloomberg Philanthropies, implemented a five-year project to enhance road safety in 10 countries (Brazil, Cambodia, China, Egypt, India, Kenya, Mexico, the Russian Federation, Turkey and Viet Nam). These countries account for almost half of the road traffic deaths in the world and it is expected that road safety measures can potentially save thousands of lives.

In the Russian Federation, the RS10 project was implemented from 2010 to 2014 by three partners – WHO, GRSP and JHU – in cooperation with the Ministry of Health and Ministry of Internal Affairs of the Russian Federation, in Lipetsk and Ivanovo regions, with the support of the regional administrations, the State Inspectorate for Road Safety (GIBDD) and regional departments of health.

The goal of the project was to enhance road safety in the pilot regions through targeted actions addressing three risk factors – speeding, not wearing seat-belts and not using child restraints – with the potential for dissemination of the project experience in the Russian Federation in the medium term.

The main project activities included:

- an assessment of national laws and regulations related to road safety, with emphasis on the selected risk factors; review of institutions, their roles, responsibilities and processes with respect to enactment of such laws and regulations; and identification of areas for improvement;
- the design and implementation in the pilot regions of social marketing (SM) campaigns aimed at changing road users' knowledge, attitude and practices (KAP) regarding the key risk factors and increasing their awareness about enforcement. The SM campaigns were targeted to specific audiences (e.g., young drivers), with a specific message (e.g., understanding the consequences of risky behaviour on the road, increasing awareness of effective measures aimed at preventing RTI and fatalities, etc.);
- enhancing the enforcement capacity of traffic police in the pilot regions and providing support to implement activities aimed at preventing road traffic crashes (RTC) connected with major risk factors; and
- the monitoring and evaluation of the activities implemented through regular surveys of speed limit, seat-belt and child restraint compliance on the roads of the pilot regions.

From 2011, additional activities were implemented, teaching first aid skills, aimed in particular at driving school instructors and GIBDD, as well as trainers training first aid instructors. In 2014, capacity-building activities for health workers in the area of post-crash care were also introduced.

The key to successful implementation of the project was political will at both federal and regional levels, support from the Russian Ministry of Internal Affairs and Ministry of Health, and effective

intersectoral coordination of the road safety activities through regional committees and the Project Advisory Board in Moscow.

Within the framework of the project, in the pilot regions 12 SM campaigns were implemented to change the KAP of road users regarding the selected risk factors (speeding, not wearing seat-belts and not using child restraints). All the campaigns were based on data obtained through qualitative and quantitative studies held before and after each of the campaigns. The studies were designed to reveal the major reasons for risky behaviours, assess prevalence of the specific problems among the population of the pilot regions, and evaluate the effectiveness of the campaigns. The post-campaign assessments showed increased awareness among the target audience about the risk factors and the campaigns held in the regions. All the campaigns focused on improving KAP in line with the existing road-safety-related legislation and were implemented in coordination with enforcement activities aimed at the chosen risk factors.

Within the framework of the project, reviews were produced of the road-safety- and first-aid-related legislation of the Russian Federation; and a training course (including a manual) was developed and piloted for driving schools' first aid instructors. Altogether, in cooperation with Territorial Emergency Medicine Centres in the two pilot regions, 60 first aid instructors for driving schools were trained, and 26 trainers to teach first aid instructors. With the support of the Russian Red Cross (RRC) and the GIBDD, in the two regions 21 first aid instructors and 597 GIBDD officers were trained. On 11 March 2014, WHO and the Russian Ministry of Health organized a meeting on post-crash care in Moscow. The meeting involved international and Russian experts and provided an opportunity to exchange experience and develop recommendations related to the corresponding project activities.

According to roadside surveys conducted by JHU together with Lipetsk State Technical University and Ivanovo State Polytechnic University, seat-belt use among all car occupants increased from 52.4% in October 2010 to 77.4% in October 2014 in the Lipetsk Region, and from 47.5% in April 2011 to 88.7% in October 2014 in the Ivanovo Region. Child-restraint use increased in both regions: in Ivanovo Region from 20.6% in April 2011 to 89.4% in October 2014 and in Lipetsk Region from 20.9% in October 2010 to 54.1% in October 2014. The proportion of drivers speeding decreased from 47% in July 2011 to 27.3% in August 2013 in the Lipetsk Region, and from 54.7% in March 2012 to 33% in July 2013 in the Ivanovo Region. However, subsequent surveys showed that there was an increase in the number of drivers speeding in both regions, probably connected to the legislative changes in September 2013 abolishing the fine for exceeding the speed limit by less than 20 km/h. Thus, in the Lipetsk Region the number of drivers speeding increased to 36.3% in November 2013 and then decreased to 30.4% in October 2014. In the Ivanovo Region, it increased to 46.2% in October 2013 and was almost at the same level, at 46.7%, in October 2014. Notably, most of the drivers caught speeding exceeded the designated speed limit by less than 20 km/h, which can be explained by the legislative changes mentioned above.

Successful implementation of the project was made possible by the commitment and support of federal agencies – the Ministry of Health and the Ministry of Internal Affairs of the Russian Federation – as well as the regional administrations and GIBDD in the pilot regions. Effective intersectoral coordination and collaboration was enabled by using international good practices on road safety adapted to the local context.

SM in the area of road safety proved to be effective as a method of raising awareness and changing the behaviour of risk groups, especially when combined with effective enforcement.

Monitoring based on observation of road users' behaviour is an effective instrument for evaluating progress and making decisions from the point of view of GIBDD and emergency medical services.

The Russian Federation's success with the RS10 contributed to enhancing its perception as a country that pays significant attention to road safety and promotes it within the UN and WHO agendas.

The project experience demonstrated the effectiveness of a comprehensive approach to prevention of RTI and fatalities through measures (intersectoral collaboration, legislation, enforcement and SM campaigns) targeting the major risk factors, and may be used for dissemination in other regions of the Russian Federation, as well as for development of international recommendations for the countries of the WHO European Region and globally.

CHAPTER 1. The problem of RTI, project goals and objectives

The *World report on road traffic injury prevention (1)* reported that almost 1.2 million people die each year as a result of RTC: 59% of road traffic deaths occur among people aged 15–44 and 90% occur in low- and middle-income countries in spite of having a much smaller proportion of the world's vehicles. Half of the road traffic fatalities are among vulnerable road users: pedestrians, cyclists and riders of motorized two-wheelers *(2,3)*.

RTI can be prevented if governments address road safety issues using a comprehensive approach, involving multiple sectors (transport, police, health, education). Initiatives aimed at changing road users' behaviour are also important. These include enactment and enforcement of laws covering the key risk factors, and increasing public awareness of these laws. Some of the risk factors are discussed below.

Speed management leads to reductions in the number and severity of RTI. According to the *Global status report on road safety 2015 (3)*, of the 180 participating countries 90 set maximum urban speed limits of less than or equal to 50 km/h, in line with best practice; only 47 countries, representing 13% of the world's population, meet both legislative criteria for best practice on urban speed management – a national maximum urban speed limit of 50 km/h, and local authority power to reduce this limit further to ensure safe speeds locally. A decrease of 1 km/h in mean traffic speed will result in a 5% decrease in the incidence of fatal RTC *(1)*. Enforcement of speed limits is essential to make them truly effective. Drinking and driving increases the risk of being involved in a RTC. With a blood alcohol concentration (BAC) exceeding 0.05 g/dl, the RTC risk increases dramatically. Thirty-four countries have good drink–driving laws with a BAC limit of less than or equal to 0.05 g/dl, as well as lower limits of less than or equal to 0.02 g/dl for young and novice drivers.

Wearing a standard, good-quality motorcycle helmet can reduce the risk of death by almost 40% and the risk of serious injury by 70%. Only 44 countries (representing 16% of the world's population) have laws that: apply to all drivers and passengers, all roads and engine types; require the helmet to be fastened; and make reference to a particular helmet standard. Wearing a seat-belt reduces the risk of fatal injury by 40–50% for front seat occupants, and by 25% for rear seat occupants. Wearing a seat-belt also significantly decreases the risk of being thrown from the vehicle in the event of a crash. One hundred and five countries have good seat-belt laws that apply to all occupants. The effectiveness of child restraints in reducing injury or death varies by type of restraint. Rear-facing restraints for babies and infants (under 1 year) have been shown to reduce the risk of death or injury by 90% compared to being unrestrained. Children in booster seats (generally aged 4 to 10 years) have a 77% reduced risk of being injured in a crash compared to unrestrained children. Fifty-three countries have a child-restraint law for occupants of vehicles based on age, height or weight, and apply an age or height restriction on children sitting in the front seat. Timely and high-quality prehospital care may save the lives of many RTC victims. One hundred and fifteen countries have a universal access number to activate emergency service response *(3)*.

There were 1.25 million road traffic deaths globally in 2013. Comparisons to assessments made over the past six years, and to data from 2001, show that the number of deaths on the world's roads has plateaued. The plateau in road traffic deaths set against a 3% increase in global population and 16% increase in motorization suggests that road safety efforts may have prevented deaths that would otherwise have occurred. Sixty-eight countries have seen a rise in number of road traffic deaths since 2013, while 79 have seen a decrease *(3)*. To reduce the number of fatalities, it is necessary to increase the pace of legislative change and enforcement, and to pay more attention to vulnerable road users.

RTI are a serious problem for the Russian Federation. At the commencement of the RS10 project, and as reported in the *Global road safety status report 2013 (2)*, the Russian Federation had lost 26 657 people to RTC in 2010, representing 18.6 deaths per 100 000 population. Males (74%) face the highest risk of dying in a car crash, followed by car occupants (53%) and vulnerable road users – mainly pedestrians (33%). For several years the Russian Federation Government has made efforts to improve legislation, and increase effectiveness of enforcement and post-crash care, which has led to a reduction in the number of injuries and deaths over the last decade. However, the situation remains grave, and the estimated loss of gross domestic product due to road traffic fatalities amounted to 1.9% in 2010 *(2)*.

In 2010, WHO, as part of a consortium which also included GRSP, the World Bank, JHU, EMBARQ and the Association for Safe International Road Travel, with the financial support of Bloomberg Philanthropies, began a five-year project to enhance road safety in 10 countries (Brazil, Cambodia, China, Egypt, India, Kenya, Mexico, the Russian Federation, Turkey and Viet Nam) which account for almost half of the road traffic deaths in the world. It is expected that road safety measures can potentially save thousands of lives.

The project methodology required implementation in two regions. In the Russian Federation, Lipetsk and Ivanovo regions were selected after consultation with the Ministry of Internal Affairs and locally. Both regions fulfilled the following inclusion criteria: high levels of road traffic deaths; local concern about road safety; a pledge signed by the Governor of the region; strong commitment from the Regional Administration, road traffic police and health departments; enthusiastic academic partners; and accessibility from Moscow for ease of project implementation and monitoring.

In the Russian Federation the RS10 project was implemented from 2010 in cooperation with the Russian Ministry of Health and the Ministry of Internal Affairs, which has the lead responsibility for road safety in the country. Key regional partners included regional administrations, GIBDD, and regional departments of health. National, regional and international partners worked collectively to achieve the project goals. GRSP worked with local partners to strengthen the capacity of regional traffic police, and JHU worked with Ivanovo State Polytechnic University and Lipetsk State Technical University to monitor and evaluate interventions. WHO took the lead for developing SM campaigns which were aligned with enhanced enforcement *(4)*.

To plan and implement effective interventions addressing the key road safety risk factors, a number of good practices outlined in publications by WHO, GRSP, the FIA (Fédération Internationale de l'Automobile) Foundation and the World Bank were used. These road safety manuals are addressed to policy-makers and practitioners and based on the experience of best-performing countries. Their focus is on achieving and maintaining high levels of seat-belt use, child-restraint use, helmet use, speed management, drink–driving management and pedestrian safety assurance (*5,6,7,8,9*).

The goal of the project was to enhance road safety in the pilot regions through targeted actions addressing the three risk factors – speeding, not wearing seat-belts and not using child restraints – with the potential for dissemination of the project experience throughout the Russian Federation in the medium term.

During the first meeting of the Project Advisory Board in July 2010, key road safety risk factors relevant for the Russian Federation were discussed. The Ministry of Internal Affairs, in consultation with partners, advised on speeding and car occupants not wearing seat-belts as the risk factors for modification by the project; use of child car restraints was subsequently introduced in November 2013. These were selected because they cause a significant burden of injury and because their modification is achievable, acceptable and sustainable. In keeping with the rationale of the project, the successful implementation of the tools and knowledge developed in the pilot regions would lead to their more widespread application in other regions nationally.

1.1 Objectives of the project

By December 2014 the pilot regions should see:

- an increase in the number of all car occupants wearing seat-belts
- a decrease in the number of drivers speeding
- an increase in the number of drivers using child restraints when carrying child passengers.

1.2 Key mechanisms to achieve the objectives

The key mechanisms to achieve the objectives were:

- adapting best practices and implementing initiatives in the pilot regions, focusing on the three major risk factors;
- supporting efforts aimed at preventing RTI and fatalities; and
- improving multisectoral coordination and combining the efforts of national authorities, international organizations and regional authorities for road safety.

1.3 Key activities

The key activities within the framework of the project were:

- the review of current road-safety-related legislation in reference to the main risk factors contributing to injuries and deaths;
- the design and implementation in the pilot regions of the SM campaigns aimed at changing road users' KAP towards key risk factors and at increasing their awareness about enforcement. The campaigns were targeted to specific audiences (such as young drivers), with a specific message (such as understanding the consequences of risky behaviour on the road, increasing awareness of effective measures aimed at preventing RTI and fatalities, etc.);
- enhancing the enforcement capacity of the traffic police in the pilot regions and supporting implementation of the activities aimed to prevent RTC connected with the major risk factors; and
- the monitoring and evaluation of the activities though regular surveys of compliance with speed limits, and use of seat-belts and child restraints, on the roads in the pilot regions.

From 2011, additional activities were implemented to teach first aid skills, aimed in particular at driving school instructors and GIBDD, as well as trainers training first aid instructors. In 2014, capacity-building activities for health workers in the area of post-crash care were also introduced, including a training workshop in Moscow, for emergency care doctors on trauma diagnosis and management, facilitated by staff from JHU.

The purpose of this report is to present the project structure and methodologies, main achievements and lessons learned, and the most effective practices for managers and specialists responsible for road safety at the regional level. Materials developed for the project are described in the annexes.

CHAPTER 2. Project coordination

Taking into account the complex nature of the road safety problem, effective coordination of all relevant agencies and organizations is of vital importance to preventing and reducing RTI and fatality rates. The project was an opportunity to implement various coordination activities at multiple levels through the use of existing mechanisms and the development of new ones.

2.1 Project Advisory Board

The Project Advisory Board was established in June 2010 to monitor and inform the public about the progress in project implementation and to coordinate international and Russian organizations and agencies. It included representatives of ministries and agencies, research institutions and nongovernmental organizations (NGOs), representatives of the pilot regions and representatives of consortium partners (WHO, GRSP, JHU). The Project Advisory Board met twice a year, endorsing the project's annual action plans, reporting and discussing the outcomes achieved, adjusting plans and recommendations to improve performance in the main project areas. All the project activities of 2010–2014 were implemented in accordance with annual action plans endorsed at Project Advisory Board meetings.

2.2 Coordination of the consortium partners

WHO, through its Country Office in Moscow, regularly updated partners on the activities implemented and ensured the necessary coordination by organizing monthly teleconferences and face-to-face meetings twice a year of the Project Advisory Board at the WHO Country Office in Moscow.

WHO also contributed to effective interaction of the consortium partners with the Ministry of Internal Affairs and other organizations in the Russian Federation upon request.

2.3 Coordination at federal level

At the federal level, the project was coordinated by WHO and the Russian Ministry of Health on the basis of biannual collaborative agreements, and by the Russian Ministry of Internal Affairs.

2.4 Visiting pilot regions

Throughout the implementation of the project, WHO staff visited the pilot regions every two months to monitor progress in the implementation of the project activities and to discuss joint action.

2.5 Contact with regional coordinators

Continuous contact with the regional coordinators of the project in the pilot regions enabled WHO to ensure effective communication and exchange of information with reference to the project issues.

2.6 Coordination at regional level

In Ivanovo Region, in accordance with the decision of the Governor, a coordination board was established to organize and coordinate activities within the framework of the RS10 project. From 2013, Deputy-Governor Alexander Fomin headed the board. Vladimir Grishin, Deputy-Head of Ivanovo State Duma, was designated as project coordinator. The board included heads of key departments and committees of the regional government, heads of regional authorities, deputies of all levels, representatives of the media, and heads and representatives of public associations. For the purposes of prompt decision-making, a working group was established which included regional project managers, representatives of departments and committees (education, health, transport, road construction and maintenance, internal politics), GIBDD and an advertising agency. Members of the working group participated in its meetings, in SM activities of the project and other road-safety-related events. Examples of joint participation include traditional days of remembrance for RTC victims, teacher–parent meetings devoted to road safety in all regions, road safety days in municipalities, etc. The work of the coordination board and the working group was widely covered on the websites of the Ivanovo Regional Duma and the government of Ivanovo Region. Appeals and recommendations were addressed to heads of municipalities on behalf of the management of the coordination board.

Thus, the coordination board set, and the working group implemented, the main strategic initiatives of the project. Vladimir Grishin and most of the heads of departments and committees (board members) were also members of the Regional Road Safety Committee.

In Lipetsk Region a similar scheme was used. The governing body included representatives of the Regional Administration, GIBDD, advertising and market research agencies, and academics, and was headed by Vitaly Shikin, Head of Administrative Bodies Department, Lipetsk Regional Administration.

2.7 Conclusions and points for action

RTI are a major public health challenge, both globally and in the Russian Federation, but they are preventable. Governments need to address the problem of road safety using a comprehensive approach, which requires the participation of multiple sectors (transport, police, health, education). The project focused in Lipetsk and Ivanovo regions on addressing RTI through comprehensive actions addressing the risk factors of speeding, not wearing seat-belts, and not using child restraints.

For road safety initiatives addressing particular key factors to be effective, executive authorities should act in coordination, establishing various coordination bodies which represent all the relevant sectors.

The effective implementation of activities aimed at enhancing road safety and decreasing injury and fatality rates requires the creation of a viable regional coordination mechanism. This can be an interdepartmental coordination committee of the regional administration, preferably chaired by the head or deputy-head of the region. It should include agencies and organizations responsible for various aspects of road safety, including highways, enforcement, post-crash care, public information and media organizations. The decisions taken should be implemented at all levels, right down to the municipal level.

CHAPTER 3. Improving road safety legislation

3.1 Introduction

Comprehensive national road safety laws and regulations make an effective contribution to reducing injury and fatality rates among all road users. Collecting data and reviewing all national road safety laws and regulations are the first step to identifying gaps in those regulations.

Within the framework of the project, a review of the Russian road safety legislation addressing such risk factors as speeding and not wearing seat-belts was carried out in 2010, with a further update and review in 2013 for all five key risk factors, in order to find out how the risk factors were covered by the legislation.

3.2 Speed

The current applicable legislation is the Road Traffic Rules (RTR) approved by the Council of Ministers (Government of the Russian Federation regulation of October 23, 1993 No. 1090 (with subsequent amendments)). Section 10 of the RTR, “Road speed”, sets all the major speed limits on the road network of the Russian Federation and governs the choice of reasonable travelling speed by drivers. The same section contains regulatory requirements for maximum speeds for different categories of vehicles, depending on their maximum permissible weight. According to the RTR, speed limits depend on the type of road.

In urban areas, vehicles are allowed to travel at speeds not exceeding 60 km/h and in residential areas and roads adjacent to buildings, maximum speed should not exceed 20 km/h.

The RTR provide for higher speeds (with corresponding signage) on particular sections of road, or in specific lanes, for particular types of motor vehicle if traffic conditions allow. Such decisions can be made by executive agencies of the Russian Federation. However, permitted speeds must not exceed the speed limits set for the respective types of vehicle.

International recommendations on the maximum speed allowed in urban areas are that the limit should be set at 50 km/h *(2,10)*. According to Russian experts, road networks in big cities of the Russian Federation are more oriented to travelling at a speed of 60 km/h. Introducing a 50 km/h speed limit in cities and towns needs further consideration.

Outside urban areas, permitted speed limits are as follows.

- For cars and lorries of not more than 3.5 tons, the speed limit is 110 km/h on motorways and 90 km/h on other roads.
- For intercity and small buses and motorcycles, the speed limit on all categories of roads is 90 km/h.
- For other buses, towing vehicles, and lorries over 3.5 tons, the speed limit is 90 km/h on motorways and 70 km/h on other roads.

As regards speed limits outside urban areas, in 2013, by Russian Federation Government Decision No. 621 of 23 July 2013 the owners or proprietors of roads are permitted to increase the signposted speeds on sections of roads, for certain types of vehicles, if the road conditions allow for travelling at higher speeds. In such cases, the signposted speed must not exceed 130 km/h on roads marked by Sign 5.1

("Motorway"), and 110 km/h on major roads marked by Sign 5.3 ("Automobile road"). Previously, the signposted speed limit would have been 110 km/h and 90 km/h, respectively.

On certain sections of road, local authorities may introduce lower speed limits in response to local conditions.

For all speed limits the RTR define the general principle of choice of speed, in accordance with which the driver of a vehicle, within the permitted speed limit, must choose a reasonable speed taking into consideration additional factors such as volume of vehicle and pedestrian traffic, vehicle specifications, load and its location on the vehicle, road quality and weather conditions.

The RTR state that in all circumstances the speed shall be such as to ensure that the driver has the vehicle under control and to allow the driver to stop completely in the event of a hazardous situation potentially detectable by the driver.

Article 12.9 of the Administrative Code of the Russian Federation, in the edition of Federal Law No. 196-FZ of 23 July 2013, stipulates penalties for exceeding the signposted speed limit.

Paragraph 1 of the Article, stipulating a penalty for exceeding the speed limit by more than 10 km/h but less than 20 km/h, has not been valid since 1 September 2013. Exceeding the speed limit by more than 20 km/h but less than 40 km/h results in a fine of 500 roubles, and increases thereafter in accordance with the excess of speed.

In general, it is reasonable to suppose that the increase in tolerance (from 10 km/h to 20 km/h) before incurring a penalty may have a negative effect on the RTC situation, especially in urban areas where the speed limit is 60 km/h. Successful enforcement of this legal provision should be supported by informed and rigorous speed control with use of specialized electronic photographic and video equipment, including fixed and mobile speed cameras.

3.3 Seat-belts

Seat-belt requirements are also covered by the RTR (Paragraph 2.1.2. of Section 2 "Duties of drivers" and Paragraph 22.9 Section 22 "Carrying passengers"), which state that drivers of vehicles equipped with seat-belts should be wearing a seat-belt, as should any passengers they are carrying. According to Paragraph 5.1 of the RTR, all passengers travelling in a vehicle equipped with seat-belts should be wearing a seat-belt.

Article 12.6 of the Administrative Code of the Russian Federation stipulates a fine of 1000 roubles for any driver of a vehicle equipped with seat-belts who is not wearing a seat-belt while driving, or carrying passengers not wearing seat-belts. Passengers are to be fined 500 roubles for not wearing a seat-belt (Article 12.29 of the Administrative Code of the Russian Federation).

This risk factor should be addressed by mass education campaigns (similar to those held in Lipetsk and Ivanovo regions), by strong enforcement and monitoring behaviour change.

3.4 Child restraints

Paragraph 22.9 of the RTR states that transportation of children is permitted only if their safety is ensured in accordance with the vehicle construction. Drivers transporting children under 12 years of age in vehicles equipped with seat-belts should use special child restraint systems appropriate for the height

and the weight of the child, or other means allowing the child to be secured with the help of the seat-belts provided as standard equipment in the vehicle, and on the front seat of the vehicle only if a special child restraint seat is used. Carrying children under 12 years of age on the rear seat of a motorcycle is prohibited.

Technical Regulation of the Customs Union 018/2011, “On the safety of wheeled vehicles”, which came into force on 1 January 2015, requires child restraining devices to meet the safety requirements of the United Nations Economic Commission for Europe Regulations (ECE R), Standard Regulation 44/04.

It is reasonable to suppose that the expression “through other means” as used in the RTR is unhelpful since it might lead to subjective conclusions by both the driver and the enforcer and could be interpreted as meaning devices other than standard, appropriate child restraints. The Administrative Code of the Russian Federation stipulates that failure to comply with the requirements for safe carriage of children will incur a fine of 3000 roubles. At the same time, to enhance child safety it is reasonable to establish legal sanctions for selling non-safety-certified child restraint systems.

3.5 Drinking and driving

Article 19 of Federal Law No. 196-FZ, “On road safety”, of 10 December 1995 prohibits any use of vehicles by people while under the influence of alcohol, drugs or other intoxicating substances.

Non-compliance with the law is a statutory violation and, in the event of consequences covered by Article 264 of the Criminal Code, may entail criminal liability.

Federal Law No. 196-FZ of 23 July 2013, “On introduction of changes to the Administrative Code of the Russian Federation”, and Article 28 of the Federal Law, “On road safety”, stipulate that drivers are in breach of the law if they drive while intoxicated, evidenced through detection of ethyl alcohol in a concentration exceeding 0.16 mg per litre of exhaled air (equivalent to a BAC of 0.035 g/dl), or presence of drugs or psychotropic substances in the body.

This standard on BAC level corresponds to international agreements ratified by the Russian Federation (in particular, the Convention on Road Traffic) and international recommendations on alcohol limits to prevent drinking and driving.

3.6 Helmets

Section 2 of the RTR, “General responsibilities of drivers”, stipulates that motorcycle riders should wear a fastened helmet and should not carry passengers who are not wearing fastened helmets. This requirement has been included in the RTR since their adoption. Non-compliance, as stipulated by Article 12.6 of the Administrative Code of the Russian Federation, attracts a fine of 1000 roubles for “riding a motorcycle or carrying passengers on a motorcycle while wearing no helmets or unfastened helmets”. Passengers who fail to wear a helmet as stipulated by Paragraph 5.1 of the RTR are liable to a fine of 500 roubles (Article 12.29 of the Administrative Code of the Russian Federation).

3.7 Conclusions and points for action

Improving road safety legislation is key to decreasing RTI and fatalities. The legal and regulatory framework for initiatives addressing key road safety risk factors and their enforcement is of particular importance.

Actions aimed at improving road safety legislation should be jointly executed by GIBDD, members of parliament and representatives of NGOs in accordance with priorities set by the United Nations General Assembly Resolution 68/269 adopted by the General Assembly on 10 April 2014, “Improving global road safety”, sponsored by the Russian Federation *(11)*.

The review of road safety legislation suggests that the Russian Federation has national laws that address all five major risk factors, and for four risk factors its legislation is comprehensive according to the criteria outlined in the *Global status report on road safety 2013 (2)*. The legislation is continually improved and measures are taken to clarify its language. In 2015 there has been progress in negotiations to revise the legislation to reduce the urban speed limit to 50 km/h; to change the RTR with reference to child restraints to remove the words “through other means” permitted to be used as a restraining device, and to make a specific reference to the federally approved standard for child restraints (ECE R Standard Regulation 44/04); and to enhance the effectiveness of enforcement.

CHAPTER 4. Social marketing

4.1 Road safety and road user behaviour

Studies have shown that several factors contribute to RTC, although most of them are caused by human factors. According to Sabey and Taylor *(12)*, human factors are implicated in 96% of RTC, and 65% can be directly explained by these factors. Only 2% of RTC are caused by road factors or vehicle factors alone *(12)*, with the causal link proven. Human factors include human errors and intentional risky behaviour on the road, such as speeding or drink–driving. Unsafe behaviours such as not wearing seat-belts or helmets and not using child restraints also contribute to the severity of injury in RTC.

As shown by various road safety initiatives, human behaviour is a factor which can be influenced and is modifiable. Influencing the risky behaviour of road users can reduce the number of RTC, as well as RTI and fatality rates.

SM campaigns aimed at preventing particular risk factors and supported by effective enforcement and other activities are one of the most efficient instruments to bring about change.

Road safety SM campaigns are an efficient instrument for changing road users' behaviour. The biggest change in attitudes and behaviour of road users can be achieved when SM campaigns are combined with enhanced and targeted enforcement of road safety legislation (*10,12*).

4.2 Goals, objectives, principles of road safety communication campaigns

Road safety communication campaigns are purposeful attempts to inform, persuade, or motivate people with a view to changing their beliefs and/or behaviour in order to avoid being involved in, or suffer injury as a result of, a RTC. They are usually aimed at a specific, well defined audience of road users.

Typically, they are held within a given time period by means of organized communication activities involving specific media channels, and often combined with supportive actions such as enforcement, education, legislation, enhancing personal commitment, rewards, etc. *(4)*.

With reference to the RS10 project, the goal of the SM activities was for the target audience to develop new behavioural skills regarding use of seat-belts and child restraints and compliance with speed limits. The ultimate goal of these measures, as well as of the project in general, was to save lives and safe-guard the health of road users.

The major principles of SM are as follows.

- The target audience needs to be identified and researched so that decisions can be based on an understanding of the characteristics of the target audience.
- Limited resources must not be an excuse to skip steps in the implementation of the campaign.
- Extensive research and the correct choice of professionals (coordinator, advertising agency, research agency, etc.) to implement each phase of the project are key to the success of the campaign.

4.3 SM campaigns held within the framework of the project

In the two Russian pilot regions, a total of 12 SM campaigns were held, focusing on three key risk factors for RTI (see Annex 1). Campaigns addressed different risk factors using a common methodology and stylistic approach.

- The “Don’t break the lifeline” campaign (risk factor: not using seat-belts) was designed in 2010 and run six times: in the Lipetsk Region in 2010, 2013 and 2014; and in the Ivanovo Region in 2011, 2013 and 2014. It was the first campaign within the framework of the project and consisted of three video advertisements. Data obtained regarding the effectiveness of the campaign served as a tool when further SM campaigns were designed and implemented; and scenarios of particular public relations (PR) events (“Santa for road safety”, “Roadside trick or treat”, etc.) and approaches which were found to be effective were used further.
- The “Life prevails over speed” campaign (risk factor: speeding) was designed in 2011 and run four times: in Lipetsk Region in 2011 and 2013; and in Ivanovo Region in 2012 and 2013. Two main video advertisements for television (TV) and one additional internet advertisement, aimed at a younger audience, were created. To maintain the results of the 2010–2011 SM campaigns on speed and seat-belts, mass PR events supported by outdoor advertisements were implemented in 2012 in the Lipetsk Region.
- The “Buckle or lose!” campaign (risk factor: not using child restraint systems) was designed in 2014 and run twice: in 2014 in each of the pilot regions. Two TV advertisements were made: one showing the tough consequences of not using child restraints, and the other offering guidance on purchasing child car seats.

The design of each campaign was based on research, which combined focus groups (4–20 focus groups before each campaign, with 8–10 participants each) identifying motivation for risky behaviours and barriers to changing such behaviours to less risky ones, followed by quantitative studies to analyse the distribution of these barriers among the target audience (600–1600 respondents). People’s knowledge about the chosen risk factor, their attitude to the necessary behaviour and their real behaviour were studied: for example, whether they know it is dangerous not to wear seat-belts; whether they believe it is necessary to wear seat-belts; and whether they really do wear seat-belts. These studies also helped to identify the kind of mass media most popular among the target audience.

Both quantitative and qualitative studies commissioned by WHO were performed by a regional research agency, Romir Lipetsk, with some involvement of partners from Ivanovo Region. The findings were delivered to regional communication agencies for development of SM campaigns, including key messages, visuals and plans for media distribution of the messages.

Generally, each SM campaign used the following approaches:

- TV advertisements on the regional channels most popular among the target audience (on average 2–3 videos per campaign on 3–5 channels for 40 days; repeated at a later date, with fewer repetitions for a longer period of time);
- outdoor advertisements (banners, billboards) (on average 20–30 items, for a minimum of 30 days);
- advertisements on public transport (10–20 vehicles, for a minimum of 30 days);
- radio advertisements (on average 2–3 audios on three radio stations, 40 days);
- printed materials (leaflets, posters and booklets);
- souvenirs with campaign symbols to be used during PR events;
- internet advertisements (flash-banners);
- regular placement of information on social media; and
- a series of mass PR events, held with the support and participation of GIBDD (on average, five long-term actions for two weeks in several locations).

After each campaign, its effectiveness was analysed by the research agency. The key stages of planning and implementation of SM campaigns are discussed below. It is very important to have an agency responsible for organization and coordination of a SM campaign, as well as a research agency and a creative agency. It is vital, though, that the research agency should not participate in the implementation of the SM campaign, to maintain an unbiased approach to the evaluation of its effectiveness.

The development of each SM campaign comprised 10 stages:

1. preparatory stage (coordinators and organizers of the campaign, which must include representatives of the regional administration and GIBDD);
2. research on the target audience (research agency);
3. setting goals and objectives, designing and planning the campaign (coordinators and creative agency);
4. testing of advertisements (research agency);
5. endorsement of activities and advertisements (coordinators and organizers of the campaign);
6. production of the campaign materials (creative agency);
7. implementation of the campaign (creative agency);
8. monitoring (coordinators and organizers of the campaign);
9. evaluation of the campaign (research agency); and
10. wrapping-up and discussing the lessons learned (all participants).

Addressing one risk factor per campaign is key for maximum effectiveness. Even if there are closely connected risk factors and vulnerable road user issues (for example, not using seat-belts and child restraints, speed and pedestrian safety), they should not be addressed in the same campaign.

4.3.1 Preparatory stage

This stage included the following activities:

- analysis of the current situation and the data on the chosen risk factor;
- study of the literature which discusses experience and recommendations regarding the chosen risk factor, including previously conducted research and previous campaigns similar to that planned;
- identifying an agency to coordinate the campaign;
- seeking out campaign partners and stakeholders to support the campaign;
- choosing agencies (one research, one communication) to design and implement the campaign;
- setting up a working group (to include representatives of the regional administration, GIBDD, and the research and communication agencies, under the supervision of the coordinating agency);
- defining the time-frame of the campaign (launch, length); and
- determining the campaign budget, including for research and campaign evaluation.

4.3.2 Research on the target audience

To change behaviours and attitudes relating to a particular RTI risk factor, it is necessary to identify the target audience precisely, that is, the group of people most closely linked to the particular risk factor (drivers who speed, do not wear seat-belts, do not use child restraints, or who drive while intoxicated). The target audience might be selected by using existing road traffic police and health statistics, or other accessible data. Selection of the target audience requires clarification and analysis of gender, age, social status, type of road user, etc.

To obtain detailed information on the chosen risk factor in a particular region and characteristics of the target audience, the market research agency performed preliminary qualitative and quantitative analysis in order to determine:

- the initial level of awareness of the impact of the risk factor, the attitude towards it and actual behaviour with regard to the risk factor; the motivation behind risky behaviour and the barriers to changing this behaviour; the types of media from which the target audience prefers to obtain information (by working with focus groups consisting of representatives of the target audience); and
- the prevalence of the identified motives and barriers among the target audience (that is, how often people are led by a particular motive or face a particular barrier), the most popular media (TV

channels, radio stations, magazines, websites and social media) and forms of receiving information (TV programmes, articles, interactive mass actions, etc.), using quantitative analysis through KAP studies of a representative number of respondents belonging to the target audience.

4.3.3 Setting goals and objectives, designing and planning the campaign

Campaign goals and the target audience are the two most important components of the campaign: every activity should lead to achieving the campaign objectives and be focused on the target audience. Thus, if a campaign is targeted at car drivers in the capital city, carrying out activities in schools or working with students will most probably not lead to the desired outcome and will not contribute to strategic use of resources. At this stage, clarification of the target audience might be necessary, since its characteristics may be adjusted on the basis of data obtained during the preliminary research.

Before identifying goals and objectives, it was vital to decide what behaviour change was desired from the target audience. To achieve behavioural changes, the objectives had to be specific, measurable, achievable and relevant.

Specific means, for instance, that one of the objectives was to persuade all car occupants always to wear seat-belts, regardless of the time of day, length of journey or their position in the car, to avoid injuries or even death in the case of a RTC. A non-specific objective would be raising awareness of how vital it is to be compliant.

For measurable, could the objective be measured by comparing the baseline level and its dynamics after the campaign?

Achievable refers to both the target audience (would they be able to change their behaviour in the time-frame?) and the campaign organizers (were there enough resources to catalyse this type of change?).

Relevant involved asking the question, even if all the target audience adopted a new behaviour, would it lead to a reduction in injuries and deaths?

Setting correct goals and objectives is vital for a SM campaign, since sometimes objectives are too general, which reduces the likelihood of achieving significant results.

As soon as campaign goals and objectives had been identified, the campaign itself could be designed. Based on the outcomes of initial research, it was important to identify the target audience of the proposed campaign, which needed to take into account social demographics, lifestyle, knowledge about the particular risk factor, attitude and actual behaviour of the target audience. Focus groups helped to determine the type of advertising materials to be used (educational, demonstrating severe consequences of risk-taking behaviour, or humorous, for example). The experience of previous campaigns implemented in multiple countries showed that campaigns demonstrating the consequences of risky behaviour and explaining what should be done to reduce risks are the most effective. This was also confirmed by focus groups held during the child-restraints campaign held in the Russian Federation in 2014.

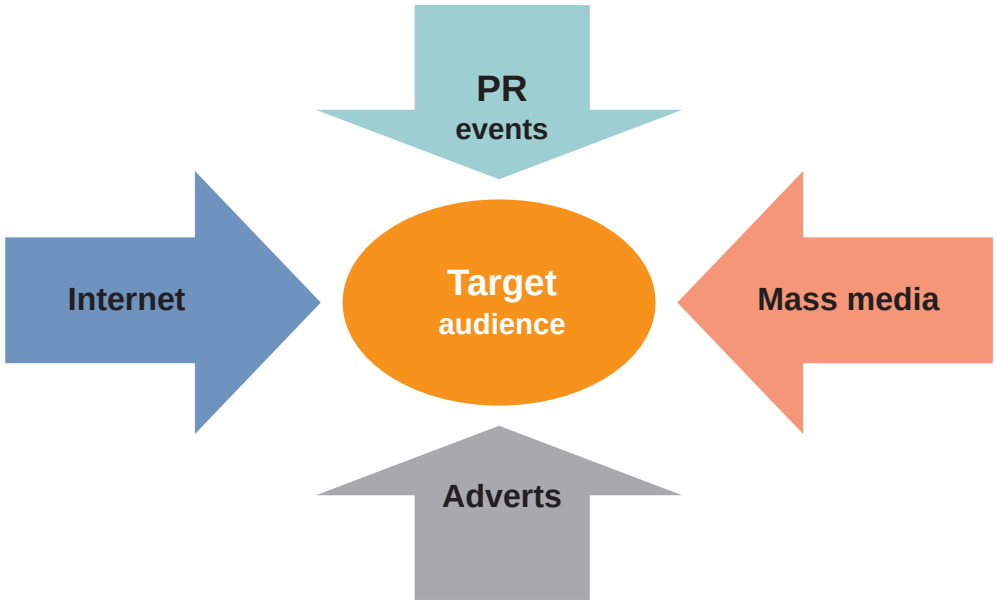
It was necessary to decide what activities (components) the campaign would include – whether it would include TV or radio advertisements, outdoor advertisements, PR events, internet advertising, etc. It should be remembered that with a limited budget only the most efficient components could be included. Data on the effectiveness of particular campaign activities showed that TV and outdoor advertisements would be most effective in stimulating behaviour change in the target audience. Thus, if, for instance, the money were invested into airing TV spots, eventually a significant change in behaviour might be achieved, while mass PR events alone would not be sufficiently effective.

Having determined what activities would be implemented, it was time to develop the verbal and visual base to the campaign, and examples for the advertising materials (a minimum of four versions):

- message (slogan)
- logotype layout
- outdoor banner layout (can be used for advertisements on vehicles)
- scenarios for videos
- scenarios for PR events
- layout of flyer with infographics
- poster layout
- flash-banner layout, etc.

A media plan (a calendar of all the campaign events: that is, where and when the target audience would hear and see the campaign messages and how often) was drawn up. Although event details were not indicated (names, mechanics, scenarios, etc., had not yet been developed), the forms, genres, time, length, number of hours per day were defined and the media plan was a representation of the so-called information pot principle (see Fig. 1). At this stage the scheme of participation and interaction with key partners (GIBDD, administrative bodies, departments of education and health) became clear.

Fig. 1. An information pot, with advertising, media, PR events and internet materials directed at the target audience



4.3.4 Testing of advertisements

The communication agency delivered the designs of various versions of the advertisements to the research agency, which in the second round of focus groups tested the potential impact of each (appealing/not appealing, will/will not have impact), and produced a report with recommendations on the choice and elaboration of the proposed advertisements for the communication agency and coordinators.

4.3.5 Endorsement of activities and advertisements

Based on the research agency's report on the materials which would most effectively influence behaviour, the working group chose the key message, outdoor advertisement layout, scenarios for videos and radio spots, souvenirs and printed material layouts, etc.

The communication agency then elaborated the selected materials, following any particular recommendations (such as colour or image changes, substitution of words in the message, etc.), after which the campaign was endorsed by the working group.

The working group considered all the suggested versions, reached a consensus on the best one and made a final decision before endorsing the materials, on the basis of the recommendations following the research.

4.3.6 Production of the campaign materials

The communication agency produced the campaign materials – made videos, printed awareness-raising materials, outdoor banners, etc. – following the layouts and in the quantities agreed for the campaign.

4.3.7 Implementation of the campaign

This stage comprised the launch and the intensive phase of the campaign. As soon as all the materials were ready, the communication agency placed TV, radio and internet advertisements on TV channels, radio stations and internet portals in accordance with the media preferences of the target audience; placed outdoor advertisements where most of the target audience would see it and awareness-raising information on the social media most popular with the target audience; and started preparing the timetable of PR events to be agreed with key partners.

After all advertising materials had been placed, or immediately before their placement, there was an official campaign launch, to attract the attention of the media and the target audience. This could be a press conference, a public event devoted to the risk factor and handing over or donating relevant equipment (such as presenting radar-detectors to road traffic police, or child restraints to young parents, or handing out helmets, etc.) or a PR event. The campaign launch normally preceded the implementation of key activities, so the campaign had an official start and finish. Campaign activities were accompanied by enhanced and continuous enforcement of the chosen risk factor.

The intensive phase of the campaign then commenced. In addition to major communication channels with TV advertising, key messages were delivered through mass PR events, held in cooperation with

regional GIBDD departments. These events also focused on changing the target audience's behaviour, raising awareness of the campaign and attracting media interest to a particular issue. These were co-ordinated with enhanced enforcement by the police.

Generally, the project included linear PR events repeated over a period of 15 days (see Annex 2).

4.3.8 Monitoring

Monitoring the SM campaigns involved looking at whether the timetable (media plan) had been followed, the quality of work carried out, comparison with what was planned, and identification of any changes needed during the campaign.

Monitoring activities included:

- monitoring information on the campaign and the road safety issues in the media;
- data collection on activities (photographs, videos, number of participants);
- creation of mechanisms to monitor the distribution of flyers, stickers and other educational materials;
- implementing observational (roadside) studies;
- monitoring the condition of advertisements such as outdoor banners; and
- anything else required.

4.3.9 Evaluation of effectiveness

When the main thrust of TV advertising and PR events (intensive phase) of the campaign was over, the communication agency delivered a final report to the research agency, summarizing all the activities (time-lines, implementation sites, photos from those sites, photos of the ready materials). After that a quantitative post-campaign assessment (a KAP study) was conducted to look at the same indicators as the pre-campaign KAP study, to measure change. The protocol would require the evaluation of campaign activities.

In this phase, the qualitative and quantitative changes in KAP, impact of the campaign messages and effectiveness of each particular PR event and type of advertisement were evaluated. The research agency assessed the campaign and provided recommendations to be considered when planning and implementing future campaigns.

4.3.10 Wrap-up

Similar to the launch of the campaign, a final event was organized, with journalists invited to learn about the outcomes of the campaign. Another option was to submit a final press release to the key regional media.

The working group met to discuss the outcomes of the campaign activities and the results achieved, to consider the most effective approaches, lessons learned and problems overcome, with recommenda-tions on future awareness-raising activities.

4.4 Example of a child restraint campaign in Lipetsk and Ivanovo regions, 2014

4.4.1 Preparatory stage

Prevention of RTI and deaths among children is a priority for the Russian GIBDD. According to the baseline study, only 20% of drivers in both regions used child restraints when carrying children. During the initial years of the RS10 project, when campaigns were held explaining the importance of wearing seat-belts, the proportion of drivers using child restraints increased to 41.3% in Lipetsk Region and 82.6% in Ivanovo Region by November 2013, after which there was no further progress. Not using child restraints had been seen as being associated with not wearing seat-belts since 2010.

This was the first experience of designing a SM campaign on child restraints within the framework of the RS10 project, offering the chance to plan and implement a full-scale campaign in 2014, building on the expertise gained previously. The regional research agency and communication agency which had been involved in the previous stages of the project were invited to develop and implement the campaign.

Project partners and coordinators reviewed literature, analysed GIBDD data, studied the experience of previous campaigns on child restraints held internationally and familiarized themselves with the key myths and facts in reference to child restraint systems.

4.4.2 Research

The target audience were men and women aged 18–40 years, who had children aged 0–9 years and who carried them by car not less than once a month and never, or not always, used child restraints for their children.

The pre-campaign research included qualitative studies involving 10 focus groups in each region, with eight representatives of the target audience per group – a total of 20 focus groups with 160 people in the two pilot regions.

The objectives of the qualitative studies were:

- clarification of target audience characteristics and target audience approval of the campaign;
- information on the barriers to using child restraints when travelling by car;
- information on the decision-making process when buying child restraints and identification of reference groups;
- identification of involvement in purchasing child restraints and key factors determining the choice of a particular child restraint; and
- identification of campaign approach.

To decide on the most effective approach, 10 videos on the issue of child restraints, which had already been produced for existing international campaigns, were tested and the video potentially best able to influence the target audience was identified. Each respondent was given a questionnaire to assess the videos (clarity, relevance, memorability, etc.) in accordance with a given scale.

The videos used various methods of persuasion and were based on different approaches (rational, emotional, ironic, etc.).

A quantitative pre-campaign study was also carried out, using structured interviews with 800 representatives of the target audience in each pilot region (sample error below 3.7%) – a total of 1600 interviews.

Both qualitative and quantitative studies identified major motives for and barriers to using child restraints among representatives of the target audience in Lipetsk and Ivanovo regions.

The key barriers to using child restraints which the campaign would address were:

- high cost (especially for young families with a newborn child);
- over-confidence and underestimation of risks (low subjective risk perception, confidence in one's driving skills, travelling short distances or in the countryside);
- technical problems (no anchoring system in the car, carrying more than two children aged under 5 years);
- carrying a child by taxi or in someone else's car;
- inconvenience for the child (child feels uncomfortable in a child restraint, especially on long-distance journeys; necessity to care for the child on the way); and
- lack of information (failure to understand the potentially severe consequences of not using child restraints; lack of knowledge on how to choose a child restraint and fix it in a car).

As key motives for using child restraints, the drivers of the pilot regions named the safety of the child, and a fine for not using a child restraint.

The prevalence of the above-mentioned motives and barriers helped to determine the campaign focus.

After testing international and Russian videos produced for existing SM campaigns aimed at increasing the use of child restraints (based on methodology provided by the World Lung Foundation), the following approaches to video adverts were considered the most effective by the target audience:

- demonstrating the harmful consequences to children of not using a child restraint; and
- explaining the physical damage of abrupt braking on a child's body unprotected by a child restraint and the protection afforded by the child restraint.

Sociodemographic and behavioural characteristics helped to create a profile of the target audience. The media most popular with the target audience (TV channels, magazines, websites and social media, etc.) were also identified, and interviews helped to determine the baseline level of child-restraint use and types of restraint used.

4.4.3 Setting goals and objectives, designing and planning the campaign

The campaign objectives included:

- increasing the use of child restraint systems when carrying children in a car; and
- encouraging the correct choice of a child restraint system based upon the child's weight and height and meeting the requirements of ECE R Standard Regulation 44/04.

As mentioned above, research showed that the target audience representatives considered the videos that demonstrated the severe consequences of not using child restraints and containing educational elements to be most effective. It was therefore decided that the campaign should include both approaches. In other words, some of the materials warned about the consequences of not using child restraints when carrying children in a car, while the rest contained new information on some aspect of using child restraints (choice, purchasing, fixing, use, etc.).

The choice of actions (components) for the campaign took into account the media most popular with the target audience, which in this particular case meant the channels through which the target audience were most likely to see or hear the key messages, and were based on the effectiveness evaluation of interventions performed during the previous campaigns in the project. For the purposes of this campaign it was decided to deliver messages through TV advertisements; outdoor advertisements; advertising on transport; linear PR events[1], which had more than once proved their effectiveness; flyers with infographics, to be handed out during PR events and regular special events organized by GIBDD; and placing posters in antenatal clinics, maternity clinics, day-care facilities, schools – that is, in settings with the maximum concentration of target-audience members.

Several versions (4–8) were created of the various materials to be produced for the chosen activities:

- the campaign message and slogan
- layout of the logo
- layout of outdoor and transport banners
- scenarios for videos
- scenarios for PR events
- layout of flyer with infographics and of poster
- layouts of souvenirs.

When defining the media plan, the following parameters were considered:

- the media most popular with the target audience;
- the time needed for production and placement of the materials;
- GIBDD's recommendations regarding the timing of the campaign (September–October, when children are back at school after the summer holidays);
- the recommended length of the intensive phase (40 days);
- the availability of placements for outdoor advertisements and transport advertisements;
- the need to coordinate with GIBDD's plan for child-restraint-related activities;
- the possibility of additional air-time, sponsored by local authorities, to broadcast videos; and
- the accessibility of the chosen TV channels for social advertisements (one of the channels, for instance, did not take social advertisements at all; it is also worth clarifying whether there might be any problems placing potentially shocking videos).

[1] See Annex 2 for a definition of the different types of PR activities.

4.4.4 Pre-testing of the campaign materials

All the materials were submitted to the research agency for the second round of pre-testing with four focus groups (32 representatives of the target audience) in the two pilot regions. A report was prepared, assessing all the materials and indicating which materials the focus group members felt would have the greatest impact on behaviour, and which needed improvement.

4.4.5 Approval of activities and materials

Based on the results of pre-testing, the working group – comprising the project managers, GIBDD officers, representatives of regional administrations, and the communication and research agencies – adopted the key messages and layouts of the campaign materials, improved in line with the feedback received from the focus groups (see Figs. 2, 3, 4 and 5, and Box 1 for examples of campaign materials). The slogan of the campaign was “Buckle or lose!” and the key message was “Child in car – always in a child car seat”.

Box 1. Scenarios for PR events

“In a car seat to fairy land!” was a 15-day carrot-and-stick activity. Driver–parents who carried their children in car seats were given a ticket to a children’s theme park, while non-compliant drivers were fined by GIBDD officers.

“A quick-fire test for driver–parents” was a 15–day inclusion/involvement activity. Parents who had brought their child to a day-care facility were given quick-fire tests to find out how familiar they were with the RTR and statistics in reference to child restraints, the impacts on a child’s body in a RTC, etc. Correct answers were rewarded with souvenirs carrying the campaign symbols.

Fig. 2. Outdoor/transport banner

Fig. 3. Scenarios for videos

Fig. 4. Flyer with infographics and poster

Fig. 5. Layouts of souvenirs (using the outdoor banner layout)

4.4.6 Production of the campaign materials

The following campaign materials were produced, using the approved concepts and scenarios:

- two 30-second videos, one illustrating the severe consequences of not using child restraints, and one with guidance on choosing a child restraint;
- outdoor banners (20 3x6 m banners per region);
- banners for taxis and trolleybuses (10 taxis/trolleybuses per region);
- flyers with infographics (10 000 per region);
- posters (500 per region);
- souvenirs (four kinds); and
- materials for PR events (hoardings, clothes for participants, etc.).

4.4.7 Implementation of the campaign

By the time of the campaign launch, campaign materials had been placed in each of the pilot regions in accordance with the approved media plan as follows:

- TV advertisements: two 30-second videos on three channels (Russia 1, NTV and TNT), aired 14–42 times per day during primetime viewing hours for 40–60 days;
- outdoor advertisements: 20 banners per region for 30 days;
- transport advertisements: 10 taxis or trolleybuses per region for 30 days;
- PR events: two 15-day actions per region;

- placement on the project website throughout the year;
- placement on social media throughout the year;
- distribution of flyers: 10 000 per region during PR events and GIBDD actions; and
- placement of posters: 500 per region in educational and health facilities, starting from the launch of the campaign.

The campaign “Buckle or lose!” was launched in Lipetsk and Ivanovo regions on 5 September and 8 September 2014, respectively.

In Lipetsk Region, the launch took place in the Big Hall of the Regional Administration building, with representatives of WHO, the Department of Administrative Bodies of the Lipetsk Region, GIBDD, Regional Department of Health, Regional Department of Education, academics, and others.

In Ivanovo Region, the campaign was launched during a press conference for regional and local media held at a maternity clinic. The press conference was attended by the management of the project, including representatives of WHO, the Deputy-Governor, the Head of the Regional GIBDD, representatives of Ivanovo State Duma, Regional Department of Health, etc.

To make the events newsworthy, in both regions families with up to seven children were given a child car seat meeting the requirements of ECE R Standard Regulation 44/04.

“In a car seat to fairy land!” and “A quick-fire test for driver–parents” were organized in association with the regional GIBDD in Lipetsk Region, and “Child in car – always in a child car seat” (using the “In a car seat to fairy land!” scenario) and “Let’s do a puzzle together” were organized in association with the regional GIBDD in Ivanovo Region (see Annex 2).

4.4.8 Monitoring

Throughout the entire campaign the regional media were monitored, as were the timeline and quality of the planned activities, and all the results were documented.

4.4.9 Effectiveness evaluation

After the intensive phase of the campaign was over, a quantitative assessment study was performed using 800 interviews per pilot region (sample error up to 3.70%). In total, 1600 interviews were held with representatives of the target audience in the two regions, using the same questionnaires that were used for the pre-campaign research to assess KAP (self-reporting) and awareness about enforcement measures and the campaign messages and activities.

The objectives of the study were to:

- assess the effectiveness of the campaign among the target audience (awareness of the campaign, with and without prompts) and quality of the information provided in the campaign; proportion of target audience who had changed their behaviour, or were ready to change behaviour in the near future; proportion of target audience aware of the consequences of not using child restraints); and
- identify the most effective campaign activities.

This study showed the following positive dynamics after the campaign.

- Twenty-five per cent of motorists in Lipetsk and 14% in Ivanovo stated that they had started to use child restraints more often than at the start of the year.
- Eighty-nine per cent of respondents in Lipetsk and 82% in Ivanovo stated that it was necessary always to use a child car seat when carrying children under 12 years of age in a car.
- Drivers had become much more aware of how to choose, purchase and use a child restraint.
- Parents had become more aware of the link between the age of a child and the type of child restraint appropriate; the proportion of those using an inappropriate car seat for a child under 3 years of age had significantly decreased.
- TV slots and outdoor advertisements were reported by the majority of respondents as the most effective campaign elements. As regards the consequences of not using child restraints, PR events, flyers and transport advertisements were found to be quite effective.
- Awareness of the campaign among the target audience was 90% in Lipetsk Region and 87% in Ivanovo Region.

4.4.10 Wrap-up

In Ivanovo Region, the campaign was brought to a conclusion on 15 December 2014 in the Regional GIBDD Department, with the participation of Deputy-Governor Alexander Fomin, Head of the Regional GIBDD Dmitry Kosterin and Deputy Head of Ivanovo Regional Duma Vladimir Grishin. The sustainability of the road safety activities was discussed. A similar wrap-up took place in Lipetsk Region.

A number of general conclusions and points for action (significant factors to be considered when planning and designing SM campaigns) were highlighted, as follows.

- As regards the length and intensity of a campaign, experience from this project showed that the intensive phase (so-called information pot) should last for 40 days. Should there be limited resources, then it is proposed that the intensity of the advertisements is reduced but that the 40-day duration is retained.
- A narrow focus is best: one risk factor per campaign. This is a key point, even if there are parallel or closely connected factors that could be linked into a campaign (such as seat-belts and child restraints, speeding and pedestrians).
- To maximize the effect and make best use of resources, it is necessary to identify the specific target audience (the particular group of population most affected by a particular risk factor).
- It is necessary to have a clear and unambiguous message. Different advertisements may be created for different target audiences, but the key message should be clear and unambiguous.
- The campaign should be based solely on factual data, without any biased assumptions or hypotheses from the working group.
- Timing and implementation should be planned to take into account all the technical (time required to prepare various materials; delivery time; staffing; etc.) and administrative (administrative regulations, approval time, etc.) factors. The preparatory stage may last 6–9 months.

4.5 Researching availability and affordability of child restraints in Lipetsk and Ivanovo regions

In 2014, Lipetsk State Technical University and Ivanovo State Polytechnic University, in consultation with WHO, conducted a study of the availability and affordability of certified child restraints in Lipetsk Region and three cities of Ivanovo Region (Ivanovo, Kineshma, Shuya). The study protocol was based on the experience of a similar study on helmets, conducted in Mexico, and conformed to international recommendations.

The main goal of the study was to obtain reliable data regarding availability and affordability of certified child restraint systems in the chosen regions of the Russian Federation, which could inform decisions and measures addressing children's RTI and fatalities in the chosen regions. The objectives of the study included:

- ascertaining the prevalence of non-certified child restraints;
- determining the reasons for the use of non-certified child restraints;
- determining the cost difference between certified and non-certified child restraints;
- reviewing the current legislation relating to the manufacture, import, sale and use of child restraints;
- understanding the level of enforcement and policy in reference to the manufacture, import, sale and use of child restraints; and
- developing recommendations addressing the problem of the use of non-certified child restraints.

Three sub-studies were also conducted:

- a review of all standards and regulations relating to the manufacture, import, sale and use of child restraints, and of policies and measures of enforcement;
- a market study of child restraints to identify the cost of certified and non-certified child restraints; and
- a survey of car occupants carrying children in child restraints, to find out how often and why non-certified child restraints were used.

The legislation review regarding certification and availability of child restraints on the market showed that there were no clear standards regarding certification and quality control of child restraints for sale. Recommendations were provided.

The survey of car occupants carrying children in child restraints (500 in each region) showed that 75.4% of respondents in Lipetsk and 54.2% in the cities of Ivanovo Region used child car seats, while 10% and 23% respectively used adapters allowing the child to be secured with a regular seat-belt (which is not prohibited by Russian law). In Lipetsk, 56% of respondents used child restraints to carry children aged 2–5 years, while younger and older children were less often transported using child restraints. In Ivanovo Region, child restraints were used for children aged 2–5 years (child car seats) and for children aged 8–10 years (mainly seat-belt adapters). Only 14.2% of respondents in Lipetsk and 5.4% in Ivanovo Region stated that when buying a child restraint they would check whether it conformed to ECE R Standard 44, while most respondents claimed that the safety and quality of child restraints were very important for them.

For young parents, the cost of child restraints is a barrier to purchasing a child car seat, especially in Ivanovo Region. In both regions, 50 stores selling child restraints were surveyed, which gave a detailed

picture of the models and types of child restraints sold. However, data on child restraint certification was either limited or not available.

The prices in Lipetsk and Ivanovo were significantly different. The latter had lower prices and a wider choice of inexpensive makes. There was limited choice of child restraints of types “0” and “0+” (for children with a mass of less than 10 kg and less than 13 kg respectively).

The study showed that respondents’ understanding of certification varied and always related to ECE R Standard 44. Nevertheless, 90% of respondents in both regions thought that child restraints should undergo obligatory certification in the Russian Federation, and more than 70% stated that child restraints should be tested in accordance with the ECE R Standard 44 regulations. However, only half of the sellers in Lipetsk and about 10% in Ivanovo Region were aware of the necessity for child restraints to carry such certification. This fact attests to poor awareness and gaps in trade rules relating to child restraints in the Russian Federation, and to the necessity of having clear safety standards for approved child restraints.

The findings of the study were reported at the Project Advisory Board meeting on 19 November 2014 with a recommendation to responsible agencies to address this legislation gap.

CHAPTER 5. Cooperation with the media

The media were expected to play an important role in covering the project initiatives, developing an attitude faithful to compliance among the target audience and raising awareness about the possible negative consequences of risky behaviour on the road (not using seat-belts, speeding and wrong choice of speed, not using child restraints).

At all stages of the project, great attention was paid to cooperation with the regional media. However, it should be mentioned that the media's interest in the project was higher at the beginning and at the end of it. In the initial stage, the uniqueness of the project (the first road safety project of its kind in the country), its scale (nine more countries besides the Russian Federation) and the authority of its organizers (WHO, primarily) were factors attracting journalists' interest. Later, road safety issues became more relevant and clearer and initiatives addressing risk factors proved to be effective, which also triggered media interest. The hardest task, however, was to keep journalists interested in road safety issues throughout the implementation of the project.

Within the framework of the project, the following effective forms of cooperation with the media were used.

5.1 Media involvement in SM campaigns

When planning and preparing a campaign, the organizers invited journalists not just to cover campaign activities but also to take an active part in them, which led to some new forms of cooperation.

A good example is the experience of the Lipetsk FM radio station. On Motorist's Day, the radio station organized a three-hour road safety radio marathon. Radio station presenters also participated in the "Human speed signs" event. In Ivanovo Region, among the novelties were the feature programmes "The road in detail" and "Pedestrian, save your life". The Interfax agency (regional office) helped to hold regular press conferences on road safety.

5.2 Generating triggers

Satirical images of a non-compliant driver or pedestrian might be used to present road safety issues humorously and avoid moralizing. This attracts younger people and increases media interest. Thus, in the Lipetsk zoo an old car was placed in a cage with the sign "Common road hog (*Conductor inconsideratus communis*)". This showed in a humorous way that drivers endangering their own and other people's lives should be isolated. Another noteworthy action was the "School for pedestrians", with a sheep obediently crossing the street and serving as an example for human pedestrians.

These actions triggered over 400 project-related news articles, and were covered not only by regional media, but by national media as well. There was also broad discussion by motorists on the media websites.

5.3 Workshops for journalists

Attracting media attention to road safety issues, and enhancing the number and quality of articles related to road safety, were among the most important tasks of the project. Primary analysis of printed, internet

and television materials showed that in the initial stage of the project the major types of coverage were RTC-related news items and statistical data provided by regional GIBDD. The concept of risk factors was unknown to the media and enforcement was seen as violating motorists' rights.

From the very beginning of the project, workshops for journalists, involving both Russian and international experts, were seen as an effective way of engaging regional media to cover road safety issues and of enhancing the quality of such coverage.

The first workshops in 2011–2012 aimed to present the road safety problem from the angle of risk factors and effective measures of control, as well as raising awareness of the goals and objectives of the project, its major interventions and outcomes. Journalists were informed about the chosen risk factors, international approaches and best practices, and major facts and myths, so as to enhance the quality of media items relating to road safety. The workshops included presentations, plenary discussions and critical review of road safety articles. A lot of attention was paid to the most common mistakes to be avoided. Participants were taught to organize their work to find the best way to present their road safety stories. They had an opportunity to analyse their previous experience and find ways of improvement.

The feedback showed that the workshops were popular with the participants; however, the monthly monitoring of the media did not show any significant growth in the number of road safety items in the local media. That could be partly explained by editors having little interest in road safety, as journalists relied on their editors' choice of issues to cover. In 2013, therefore, the project management, in coordination with WHO and the Russian Journalists' Union, changed its approach. Instead of isolated annual workshops, three one-day workshops were held over a six-month period. The major aim of these workshops was to motivate editors and journalists of printed and electronic media to initiate road safety projects or columns; and to train journalists to work with experts and audiences, and in modern ways of preparing and illustrating their pieces. The target audience for the workshops included chief editors and others able to influence editorial policies; and journalists from local and regional printed and electronic media who regularly cooperated with GIBDD. Participation of the editor and a journalist from the same agency was encouraged. It was expected that the series of workshops would contribute to the establishment of regional and municipal communication campaigns, which would have a great impact on the audience, enhancing the quality and the number of pieces on road safety.

To allow participants to get feedback on their mini-projects and recommendations for improvement, and to exchange experience, a group was created in one of the social networks under the guidance of a consultant from the Journalists' Union who was also involved in the preparation and holding of the workshops.

5.4 Journalism competitions

In order to motivate the pilot regions' journalists to come up with road safety pieces and to initiate mini-projects, journalism competitions were organized.

In 2013 WHO, together with the Ministry of Internal Affairs and the Russian Journalists' Union, announced a competition, "Life on the road is dear", to find the best series of pieces on road safety. Professional journalists and authors who had produced a series of road safety pieces, in printed or electronic media or on TV, as well as media paying particular attention to road safety, were eligible to participate. There were five categories: the best series of newspaper and magazine publications; the best series of internet materials; and the best cycle of TV and radio programmes.

The pieces had to be related to road safety, with particular attention paid to risk factors – speeding, not using seat-belts and child restraints, not wearing helmets, and drink–driving. Another aspect was pe-

destrian safety and mutual respect for drivers, pedestrians and traffic police officers, and zero tolerance to those who endangered other people's lives.

The winning materials were characterized by excellent journalistic skill and encouraged action to address risk factors in a clear and trustworthy way. The jury paid particular attention to the involvement of experts and interactive coverage.

The Ministry of Internal Affairs of the Russian Federation commended the outcomes of the competition at national and regional levels. According to the Journalists' Union data, over 1000 works from 350 media representing 65 regions of the Russian Federation were submitted for the competition. Many media created a series of works on road safety especially to participate in the competition, which aligned with the need to increase media interest in road safety. A magazine from Lipetsk Region won the category for the best series in a magazine, and a district newspaper from Ivanovo was awarded the prize for the best series in a newspaper and received a diploma from the Russian Journalists' Union. The new approach to training and involving journalists in coverage of road safety issued thus proved to be effective.

5.5 The project website

A website was created to disseminate information about the project and the major risk factors, and to carry SM campaign materials and project-related news articles. The website also became a good source of information for the media when they needed additional data.

During the campaign on child restraints, the SM materials carried a link to the website, where the people could find detailed information on children's safety in cars.

The website was developed and maintained by WHO, with local editors in the pilot regions, and can be accessed at http://www.rs-10.ru.

5.6 Press releases

To help journalists cover the project activities, press releases were issued to ensure communication with the target audience from the correct angle and which significantly increased the number of published materials.

As a rule, press releases were forwarded to regional and local media before and/or after project activities, and during long-term initiatives (intermediate press releases). When a press release is prepared, it is necessary to remember that it should be interesting, with an attention-grabbing headline, fresh data and interesting facts and expert commentaries.

5.7 Conclusions and points for action

In total, during the project eight workshops were held that trained 144 journalists from Lipetsk and Ivanovo regions. Monitoring the media and the results of the journalism competition showed that the quality of media coverage of road safety issues had improved. Journalists' attitudes to covering road safety issues changed considerably as a result of the work carried out. In addition to news items about RTC, the

media began to carry more analytical material, expert opinions, and feature articles; infographics came into use and feedback from the reader became more common. The number of publications increased from 1691 in 2011 to 4187 in 2013.

As chief editors were motivated by the idea of attracting new audiences and new subscribers as a result of coverage of road safety issues, some regional and district media, which had never covered road safety issues before and believed the topic to be of no interest for their readers, began to include regular road safety columns.

The main conclusions and action points are set out below.

- The most effective way to communicate with the media is through organizing a series of workshops, which must involve chief editors, journalists, representatives of GIBDD educational departments and representatives of regional administrations.
- The workshops should raise journalists' awareness of risk factors, and train them to work with road safety experts and the target audience, and how to cover road safety issues in a modern way.
- Journalists can be motivated by creative competitions on road safety, for different types of media, which are organized with GIBDD and aimed at the production of a series of publications, presenting a deeper understanding of the problems.
- The motivation of journalists can be raised by sending them to be trained in another region and participate in interregional and international events related to road safety.
- It is useful for regional administrations to monitor the media coverage of road safety issues so as to identify the need for improvement.
- For road safety issues to be covered adequately, it is necessary to provide the media with a source of up-to-date and reliable information on various aspects of road safety (websites, guidelines, experts).

CHAPTER 6. The role of enforcement in RTI prevention

The 2004 *World report on road traffic injury prevention (1)* stated that "Good enforcement is an integral part of road safety". Nine years later, *The global road safety status report 2013 (2)* recognized the importance of implementing evidence-based road safety strategies to achieve a sustainable decrease in RTI and deaths. Such strategies also require comprehensive legislation which needs to be well enforced in order to modify risk behaviours. The report highlights the particular role of enforcement for the implementation of road safety laws. Strong and sustained enforcement should be part of any road safety action plan if countries want to achieve progress in addressing the RTC epidemics.

6.1 Points for action in road safety enforcement policies

The international community unanimously supports some recommendations which, if followed, will make a necessary minimum of the enforcement programme. The following recommendations should be mentioned first of all.

- The deterrent must be meaningful in order for traffic law enforcement to be successful. Penalties must be high enough to deter risky behaviour by road users.
- Enforcement levels must be high and maintained over a period of time. This ensures that there is a high level of perceived risk of being caught.
- Offenders who are caught must be dealt with swiftly and efficiently.
- Enforcement measures should be supported by public awareness-raising and SM campaigns. This ensures public awareness of enforcement, creates the perception of the inevitability of a penalty for road traffic law violations, and explains the rationale behind strong enforcement measures as a way of saving lives and preventing injuries.

In addition to these recommendations, there is a growing understanding of enforcement including a political component as well. Enhanced enforcement by traffic police requires the strong and sustained commitment of authorities and political leaders. Thus, GRSP makes the following recommendations.

- It must be acknowledged that traffic police cannot improve road safety on their own. Enforcement must be coupled with additional road safety interventions and enforcement must be supported by all levels of government.
- Traffic police should not be discouraged, directly or indirectly, from applying road safety laws, standards and regulations uniformly across all sectors of society. Violators should not be excused for any reason.
- Political leadership should support communications activities which raise public awareness of road safety and should seek to underpin police enforcement activities, valuing the contribution they make to reductions in RTI and deaths.

GRSP offers a host of recommendations to guide road safety policies. The following measures will contribute to further development of enforcement efforts.

Wherever possible, traffic police should not be temporarily transferred to other areas of law enforcement. Continual enforcement of road safety law is critical to achieving sustainable reductions in RTI and deaths. The transfer of traffic police officers, even temporarily, can have a negative effect on sustained enforcement.

Traffic police should have a vigorous system for the collection of RTC data as well as the analysis of that data to identify so-called black spots and deploy enforcement resources accordingly. This currently takes place in the Russian Federation and deserves recognition.

There should be a career development path for traffic police officers. GRSP recognizes that this is already the case in the Russian Federation. Additional career opportunities should be established for specific roles within the traffic police, such as peer trainers.

6.2 Strengthening traffic police capacity

Within the framework of the project, GRSP, as one of the consortium partners (along with WHO and JHU), had to accomplish the following objectives:

- provide international expert support to assess the current enforcement practices in reference to particular risk factors and to elaborate a strategy that would facilitate higher efficiency of enforcement in order to improve road safety in the pilot regions; and
- assist in implementation of effective strategies for road safety in the pilot regions in the light of international experience and recommendations.

6.2.1 The role of GRSP in the project

Starting in 2010, GRSP facilitated 29 workshops, trainings, round-tables and consultations, which were attended by over 800 participants – traffic police officers working in the field, commanding officers and road safety partners from the project pilot regions – in Lipetsk and Ivanovo regions. During the first two years of the project, the focus of the activities was on educating traffic police officers in the particularities of enforcement related to risk factors (not wearing seat-belts, speeding, not using child restraints); there were also sessions on guiding and implementation of road safety policies.

From 2013, GRSP actively cooperated with regional GIBDD and the Ministry of Internal Affairs to shape the workshops to reflect regional priorities. Agreement was reached that workshops would cover three risk factors and the safety of vulnerable road users. Roadside consultations were provided to traffic police officers on patrol, with the trainers observing the enforcement activities of the officers and providing feedback. Several traffic police officers were trained as trainers for other police staff. At the request of the Ministry of Internal Affairs, GRSP organized workshops devoted to intersectoral cooperation in the area of road safety, which involved multiple regional agencies working in the area of road safety. During those workshops, regional road safety issues were discussed and possible joint solutions were suggested.

Road safety requires a multisectoral approach in order to reduce RTI and death rates, and the results must be sustainable. At the beginning of the project, both pilot regions suffered from lack of comprehensive project management, as well as lack of control and coordination. Evidently, the existing forums for discussion of positive and negative road safety outcomes had to be used more effectively (in particular, regional and municipal road safety commissions). The first multisectoral workshop gave all stakeholders an important opportunity to consider the problem comprehensively. During the course of the project, more attention was given to issues of integration and intersectoral cooperation in both pilot regions.

6.2.2 Points for action

Road safety requires a multisectoral approach in order to achieve and maintain reductions in RTI and deaths. In the two project implementation sites, high-level ownership and coordination for road safety were strengthened, but needed to be more comprehensive and ensured beyond the lifetime of the project. Many activities and new ideas were introduced, but possibly in isolation. The multisectoral workshops therefore offered a good opportunity for more road safety stakeholders of different levels to interact.

An open discussion forum for regional authorities, road traffic police and civil society could help to discuss challenges and problems and ensure the support for governmental efforts by the population.

At senior GIBDD level, a clearly written, rolling 3–5-year strategic road safety plan (re-evaluated and assessed annually) needs to be created. This plan must:

- set out its aims, objectives and targets over the time period;
- use collision data and analysis as its primary source of intelligence information;
- have very clear and well defined road policing activities which are SMART (specific, measurable, achievable, realistic and timed);
- have a tactical/operational implementation section, usable by front-line managers, supervisors and staff so they are able to see how their daily activities will contribute to and support the strategic plan; and
- detail who is responsible, at every level, for the delivery of the plan.

6.3 Enforcement practice changes in the pilot regions

Since 2010, there has been a mixture of SM and enforcement campaigns in both project implementation sites. These have brought about improved public awareness of the fact that seat-belts do save lives and a wider general compliance in use of seat-belts and child restraints.

In Lipetsk and Ivanovo regions, a gradual increase in enforcement and fines has occurred. In general terms, from operational observations, it was seen that the traffic police enjoy the increasing trust and confidence of the public. They have been able to strike that sometimes difficult balance of combining polite, professional and courteous public interaction with robust and practical enforcement, using sensible discretion where appropriate. As a result, they have been able to influence driver culture and compliance. This is evident when analysing the degree of seat-belt use, general speed reduction and public attitudes towards these two primary risk factors.

Naturally, there are many competing demands for the traffic police. These will sometimes inhibit their ability to maintain constant focus on enforcement and road safety activities. However, the improvements witnessed over the last five years coupled with a determination to improve overall road safety has been at the forefront of GIBDD activities. For example, GIBBD have developed and increased their deployment of operational enforcement staff through careful analysis of road casualty data. They are targeting hotspots and driver behaviour that causes casualties. They have sought to engage in additional SM and educational campaigns within the framework of the project.

6.3.1 Mobile speed cameras

During the implementation of the project, 32 mobile speed cameras were purchased by WHO and donated to Ivanovo and Lipetsk regions (16 per region) to support enforcement of speed control in line with Russian road safety legislation.

6.4 Action points for decision-makers

6.4.1 Speed

An increase in the permissible excess of speed over the signposted limit from 10 km/h to 20 km/h led to higher speeds within this 20 km/h tolerance, as proved by observational studies in both pilot regions. Speeds of 80 km/h or more in urban areas can lead to a significant increase in RTC and the severity of their consequences. GRSP recommends reducing the permissible excess of speed to 10 km/h and/or reducing the signposted speed limit in urban areas.

6.4.2 Seat-belts and child restraints

Use of seat-belts and child restraints in the Russian Federation is low in comparison with many developed countries of Europe and the world. Enhancing use of seat-belts and child restraints will save many lives and can prevent severe injuries. To achieve compliance, it is necessary to enhance enforcement in combination with education and communication campaigns. Progress made in the pilot regions of Lipetsk and Ivanovo could be used as an example for other regions.

To guarantee that children of the Russian Federation travel in cars safely, they should be carried in correctly chosen, safe car seats. This requires clearer legislation, including:

- defining the standards for child restraints appropriate to the age, weight and height of the child;
- banning the import and sale of child restraints that do not conform to ECE R Standard 44/04; and
- including child restraints in the list of consumer products whose quality and certification are controlled by Rospotrebnadzor (Federal Service for Surveillance on Consumer Rights Protection and Human Wellbeing).

6.5 Recommendations on enforcement

6.5.1 Fines for speeding

Observations made on both rural and urban roads showed that drivers often exceed speed limits. This problem cannot be solved by communication and education alone, without strict enforcement. It is reasonable, therefore, to rely on the approach that enforcement can be considered sufficient and fines can be considered high enough (with stronger enforcement promoted) only if the majority of drivers always comply with the speed limits.

6.5.2 Speed management evaluation.

Speed cameras are an effective deterrent for drivers. Since 2006, the Russian Federation has been implementing a policy of increasing the number of fixed and mobile speed cameras to improve the situation. As a measure to address the violation of speed limits and to educate drivers, it is recommended, however, to signify how many cameras there are per 100 km of road (or, more importantly, how many kilometres of road there are per camera). Understanding the proportion of roads where speed is managed effectively will highlight the urgency of specific steps to improve the situation.

In order to raise effectiveness and efficiency of speed enforcement, it is recommended that Article 12 of the Administrative Code should be amended to introduce measures against radar-detectors (anti-radars). The following fines are proposed:

- for use by drivers – a fine of 5000 roubles
- for manufacturing and sale of detectors:
  - individual entrepreneurs – a fine of 50 000 roubles
  - companies and corporations – a fine of 500 000 roubles.

Courses for driver rehabilitation/improvement or on awareness of traffic rules and risk factors (including speeding) could be offered to drivers in lieu of a fine for more minor violations of RTR. These options should be considered as a more proportionate response to a minor driving violation to bring about a change in driver behaviour, improve road safety awareness and further develop police/public relations. The law allows a GIBDD officer, when stopping a motorist following an offence, to either warn/advise or issue a fine, but it would be useful to have a third option as described above, namely courses for offenders.

6.5.3 Road safety management

Planning at every level of government is key to successful implementation of all components of the national road safety programme. It is crucial that the traffic police chiefs and the Ministry of Internal Affairs, who decide on road safety policy at the federal level, are supported by regional authorities and traffic police departments in developing regional road safety programmes and plans, in accordance with federal priorities.

6.5.4 Penalty point system

It would be advisable to reintroduce driving licence penalty points. Penalty points are awarded for serious road traffic violations and are necessary as an effective additional deterrent. Such measures have proved to be effective in combination with strong enforcement and education.

6.5.5 Graduated driver’s licence

It is proposed that the introduction of graduated drivers’ licences for younger drivers should be given consideration. Some countries have introduced a set of restrictions for novice and young drivers, acknowledging the fact that they cause a significant proportion of fatal and severe-injury RTC.

CHAPTER 7. Post-crash care

The best way to avoid RTI is to prevent them. However, very often the severity of consequences, including long-term disability or death, can be reduced by provision of timely and appropriate prehospital and trauma care.

In most cases, death in the first hours after an injury is the result of airway obstruction, respiratory impairment and bleeding. To a significant degree, these conditions can be eliminated or their consequences reduced by a simple set of first aid measures. Since eye-witnesses, drivers and traffic police officers are usually the first on the scene of the RTC, it is their willingness and skills that can influence the outcome.

Initially, the working plan of the project did not include any measures aimed at enhancing the quality of post-crash care. However, in 2010–2011 it became evident that the health sector was not sufficiently involved in the road safety discussions, and the issue was raised several times by national partners in the Project Advisory Board meetings.

7.1 Legislative review

Within the framework of the project, in 2013 a review of post-crash first-aid-related legislation was undertaken, in which legislative gaps and deficiencies in reference to first aid were analysed. Among the identified gaps were the following.

- The concepts of “first aid” and “first-aider” are not terminologically clear.
- Potential first-aiders very seldom perform their legal duty due to insufficient training, lack of necessary equipment and no legal obligation to do so.
- So far, only first aid programmes for vehicle drivers have been developed and enacted. Programmes for other categories of first-aiders do not conform to modern standards.
- A lack of specialized first aid instructors, as well as lack of a uniform training certificate, hinder provision of quality, uniform training in first aid.

Following the review, action points on filling the existing regulatory gaps were produced and forwarded to the Russian Ministry of Health.

7.2 Capacity-building in the area of first aid training

In 2012, the first two first aid capacity-building activities were implemented: two workshops for first aid instructors from driving schools of the pilot regions. The trainers were Dr Leonid Dezhurny and Dr Gennady Neudakhin from the Federal Research Institute for Health Organization and Information of the Ministry of Health of the Russian Federation, and Dr Manjul Joshipura from WHO headquarters. Twenty instructors were trained from each region. Later, in 2013, 15 of the newly trained instructors from Lipetsk and 19 from Ivanovo delivered first aid training to 1390 and 2237 driving school students, respectively. Nevertheless, at that time there was still no sustainable system at the regional level of training and monitoring new instructors just using local capacity.

In order to establish such a system, therefore, in 2013 within the framework of the project, a five-day training course was developed for first aid trainers, who would then train first aid instructors for driving schools. The course programme conforms to the "Standard curriculum for professional training of different categories and sub-categories of vehicle drivers" ("Post-crash first aid"), approved by the Ministry of Education and Science of the Russian Federation (Order 1408 as of 26 December 2013), which complies with international recommendations on first aid training. The curriculum for instructors includes a train-the-trainer approach to improve teaching skills especially for adult audiences. This was adopted to further widen the training so that trained trainers could train others.

Guidelines for first aid instructors and for future drivers were developed as training materials *(13,14)*. In addition to modern principles of first aid conforming to Russian Federation law, a lot of attention was paid to the methodology of adult teaching and effective methods of teaching and assessment of the material. Two five-day workshops were held in Lipetsk and Ivanovo in October 2013 at regional emergency medicine centres, which are licensed to train in first aid, including in Ivanovo's case a mandate to train first aid instructors for emergency services such as police, rescuers, etc.

One thousand new manuals for first aid instructors and 500 workbooks for future drivers were printed and distributed among driving schools of the pilot regions. Copies of the manual and the workbook were submitted to the Ministry of Health as a model to be used for first aid training within the framework of the Federal Targeted Road Safety Programme 2013–2020.

In order to evaluate the effectiveness of the training provided and to improve the quality of first aid training in the future, instructor-training workshops were held under the supervision of independent experts. In April and May 2014, therefore, WHO supported two workshops, which were prepared and conducted by previously trained instructors under the supervision of the independent consultants. These workshops proved that the trained instructors were able to teach 20 more first aid instructors for driving schools.

In total, within the framework of the project and in cooperation with the regional emergency medicine centres, 60 first aid instructors for driving schools and 26 trainers to train such instructors were trained in 2012–2014.

7.3 Improving the post-crash care system

In 2014, more attention was paid to improving the existing system of post-crash care. WHO's guidelines, *Prehospital trauma care systems (15)*, were translated into Russian and 500 copies were printed for distribution among practitioners involved in prehospital care.

On 11 March 2014, WHO, in cooperation with the Russian Ministry of Health, held a meeting for health professionals, devoted to strengthening public health approaches to the organization of post-crash care. The meeting was attended by 35 key national and international prehospital trauma care experts, including representatives of the three lead departments of the Russian Ministry of Health (Department for Public Health Monitoring, Analysis and Strategic Development; Department for the Organization of Emergency Medical Assistance and Expert Activity; Department for International Cooperation and Public Relations); the Russian Ministry for Internal Affairs; the Russian Ministry for Civil Defence, Emergencies and Elimination of Consequences of Natural Disasters; experts from leading Russian research and technical institutions on road safety, emergency medical care and public health, JHU, Israel National Center for Trauma and Emergency Medicine Research, World Rescue Organization and WHO.

The meeting included discussion of international recommendations and best practices from a number of countries. The status of post-crash care in the Russian Federation, and national and regional ap-

proaches to post-crash care, were presented and evaluated. Also, priorities were defined for potential support which could be provided by WHO and consortium partners in the context of the RS10 project in 2014. In general, three priority areas of cooperation were identified: strengthening the system of first aid training; retraining of medical staff involved in provision of emergency trauma care; and enhancing the trauma-related data collection system. Following the meeting, the WHO project team continued consultations on potential areas of cooperation.

7.4 Workshop for traumatologists and public health managers

Following recommendations at the meeting on 11 March 2014, a three-day workshop for traumatologists and public health managers was held in December 2014 in cooperation with JHU. The workshop focused on trauma care and injury surveillance, and programmes to improve the performance of trauma centres. Its objectives were: (1) to present the structure of trauma resuscitation and specific aspects of care for the injured patient; (2) to present and discuss the process of establishing and managing injury surveillance systems; and (3) to discuss ways to improve the system of patient care through the introduction of trauma quality improvement programmes. Day 1 of the workshop took place at the Education and Research Medical Centre Department for Presidential Affairs of the Russian Federation (Department of Emergency Care and Extreme Medicine), and days 2 and 3 at the WHO Country Office in Moscow. The workshop was led by Dr Kent Stevens and Dr Isaac Howly, experts from JHU and Bloomberg School of Public Health.

The workshop was attended by 52 people: 42 ambulance physicians and nurses, and 10 representatives of the Department of Emergency Care and Extreme Medicine of the Education and Research Medical Centre Department for Presidential Affairs of the Russian Federation, the Federal Research Institute for Health Organization and Information of the Ministry of Health of the Russian Federation, and the Ivanovo Regional Centre for Emergency Medicine. The workshop helped to identify commonalities and differences in trauma care between the Russian Federation and the United States of America and discussed international recommendations on data management and improving the performance of trauma centres at different levels.

7.5 Study of potential effectiveness of first aid in Lipetsk Region

A study of the potential effectiveness of first aid for saving the lives of RTC victims was conducted in the Lipetsk Region by experts from the Federal Research Institute for Health Organization and Information of the Ministry of Health of the Russian Federation, in cooperation with the Lipetsk Regional Department of Health, in accordance with the protocol approved by WHO and Lipetsk Regional Department of Health *(16)*.

The study focused on identifying (from forensic medical reports) RTC victims whose lives could have been saved if they had received timely first aid (provided by drivers, GIBDD officers, bystanders, etc.). The analysis covered 97 deaths at the crash scene before the arrival of the ambulance, in Lipetsk Region in 2014. The Abbreviated Injury Scale (AIS-90), Injury Severity Score (ISS) and expert opinion were used to assess the severity of trauma. Using these parameters, it was estimated that at least 26% of the deaths could have been avoided if the injured persons had received timely first aid. The most important point is that in none of the 97 cases did the report suggest that first aid had been provided. Thus, it should be concluded that further efforts are needed to improve the training of GIBDD officers and future drivers

in first aid and to record cases of first aid provision at crash scenes by police or ambulance teams. At the same time, it will oblige regional authorities to provide funding for the implementation of preventive programmes, since that is the key way to save the lives of most RTC victims.

7.6 Training of Lipetsk and Ivanovo GIBDD officers in first aid, 2012–2014

Understanding the significance of first aid provision at the crash site as a measure of fatality reduction and severity mitigation, GRSP invited the RRC to train instructors who would be able to teach first aid skills to GIBDD officers in Lipetsk and Ivanovo regions. The RRC is committed to the Decade of Action for Road Safety 2011–2020 (UN Resolution 64/255 of March 2010), and carries out one of the main mandates of national Red Cross societies, the dissemination of necessary first aid knowledge and skills so as to sustain life, mitigate pain and reduce complications of trauma[2]. GRSP, with RRC, developed the vision and the provisional estimate for first aid trainings and introduced the corresponding proposals to the project working plan for 2012–2014. GRSP provided continuous financial and technical assistance for first aid workshops and masterclasses for GIBDD in 2011–2014, and participated in monitoring the trainings held by the trained GIBDD instructors in 2012. RRC reported on the trainings held and placed information on the RRC website (redcross.ru).

The trainings used the unified International Federation of the Red Cross and Red Crescent Societies methodology for first aid provision and conformed to the requirements of Russian law. The curricula were approved and agreed with the Federal Research Institute for Health Organization and Information of the Ministry of Health of the Russian Federation. All the programmes for the workshops and masterclasses were adapted for the target audience (standards and regulations, case studies, group exercises).

During the first stage (December 2011, August 2012), RRC first aid instructors trained 43 GIBDD officers of Lipetsk and Ivanovo regions in onsite first aid provision, based on the RRC's first aid training course (16 hours).

During the second stage (February–October 2012), 21 of the 43 previously trained GIBDD officers were selected and trained as first aid instructors able to teach others (24 hours).

During the third stage (2012), the 21 trained GIBDD instructors trained district traffic police officers within the framework of the peer-to-peer training (four hours) specially prepared by RRC. Altogether, there were 23 training courses which trained 299 traffic police officers (Lipetsk Region – 12 courses, 148 officers; Ivanovo Region – 11 courses, 151 officers). After the training courses, RRC first aid instructors held three-day masterclasses on methods of teaching first aid. As a result, eight first aid instructors were trained from the Lipetsk GIBDD and nine from Ivanovo GIBDD.

During the fourth stage (2013), the first aid instructors/regional GIBDD police officers conducted a second round of training for traffic police officers, training 255 officers in first aid (127 from Lipetsk Region and 128 from Ivanovo Region). RRC supervised four such first aid training courses conducted by the previously trained GIBDD instructors in the two regions, providing further feedback (three days). During those training courses, 47 traffic police officers were additionally trained (17 from Lipetsk Region and 30 from Ivanovo Region).

In November 2012 the concept of a first aid manual for traffic police was developed and in July 2013 the manual was published (1000 copies) and delivered to the regions with the financial and technical support of GRSP. The manual was based on the *European First Aid Manual (17)*. RRC obtained the

[2] See the International Federation of the Red Cross and Red Crescent Societies website, www.irfc.org.

exclusive right to translate and publish the manual in Russian (by agreement with the Belgian Red Cross) and adapted it in accordance with Russian legislation. Lipetsk and Ivanovo regional GIBDD received 500 copies of the manual each and also two dummies for practising cardiopulmonary resuscitation (CPR).

During the fifth stage (November 2014), RRC and Leonid Dezhurny held a two-day pilot workshop focusing on innovative teaching techniques for first aid instructors from driving schools of Ivanovo Region at the Regional Emergency Medicine Centre, Ivanovo. This was used as a masterclass to illustrate active and interactive methods of teaching first aid, the four-step method of teaching complex skills, and case studies.

7.7 Conclusions and points for action

- It is necessary to include training and retraining of driving school first aid instructors in the statutory documents and working plans of emergency medicine centres, and to fund training of first aid instructors for emergency services, who are legally obliged to provide first aid, from regional budgets since emergency services cannot afford to pay for such training.
- It is necessary to make use of the project experience in reference to training and retraining of first aid instructors.
- Further steps are needed to analyse the effectiveness of prehospital first aid for RTC victims and to continue studies started in this regard under the project.
- The system of first aid training among GIBDD officers should be enhanced (development of curricula consistent with current legislation, establishment of system to train and retrain first aid instructors, preparation of guidelines for training and assessing officers' knowledge and skills, etc.).
- It was considered useful to continue training traffic police officers of Lipetsk and Ivanovo regions in first aid.
- It is necessary to introduce a practical course of skills retraining (four hours once every two months for 10 people) under the supervision of a first aid instructor (instructors, CPR dummies, training plan, manual). The fact that it will be a peer-to-peer course – with one of the GIBDD officers serving as a first aid instructor – is of great significance.
- A first aid training classroom is required on GIBDD premises so that officers have the opportunity to master their skills using CPR dummies.
- Periodical assessment of instructors and students is required, as well as competitions to motivate and increase interest in first aid courses.
- The Ministry of Internal Affairs instructions on the protocol for crash-site examination should require that first aid provision by traffic police officers be recorded.

CHAPTER 8. Discrete projects and equipment

The *World report on road traffic injury prevention (1)* mentioned infrastructural solutions and use of special equipment as among the most effective measures of decreasing the number of RTI and fatalities. Despite the fact that initially the project did not include any infrastructural measures, in 2012 the Project Advisory Board decided to implement two discrete projects in the two pilot regions to demonstrate the effectiveness of low-cost engineering measures to enhance road safety and thus to motivate decision-makers to invest in road infrastructure.

8.1 Project in Kokhma, Ivanovo Region – traffic lights

At the request of the Municipal District of Kokhma, Ivanovo Region, traffic lights were installed at one of the most dangerous intersections in the town. In 2011–2012, altogether there were 99 crashes at that particular intersection, with 37 people injured and one death. The intersection is located in a densely populated residential area, and a lot of pedestrians cross it daily at four points. Since the roads intersect at a sharp angle, drivers could not see pedestrians in time and often hit them. After a tender for the best project, the new traffic lights were installed and came into use on 7 December 2012.

According to the GIBDD data, since that time no collisions have taken place at that intersection.

8.2 Project in Lipetsk – a pedestrian crossing

At the request of the Lipetsk regional GIBDD, one pedestrian crossing in Lipetsk, that was prone to accidents, was reconstructed. There had been 5–6 collisions a year involving pedestrians on that crossing. A raised pedestrian crossing was therefore constructed, with a traffic hump next to it and thermoplastic road markings in two colours. On the approaches to the crossing, horizontal thermoplastic road markings and vertical kerb-stone markings were used. Reflective road signs on a yellow background were installed, with another set of road signs over the road. Plastic rumble strips led up to the pedestrian crossing and road signs (“Road Hump” and “Speed Limit”) and pedestrian rails were also installed.

This engineering solution improved pedestrian safety and investment from the regional authorities.

CHAPTER 9. Monitoring and evaluation

Monitoring road safety is essential for decision-making and policy development and served as a feed-back mechanism during the project implementation process which further helped engage local police and decision-makers.

Monitoring has the following three functions:

- to identify the status of critical or changing phenomena (in the present case, road users' behaviour) in reference to which a course of action will be defined;
- to shape the relationship with the object of study, providing feedback on successes and failures of previous specific policies or programmes; and
- to establish conformity to standards and regulations.

9.1 Objectives

The objective of monitoring road users' behaviour is to understand their actual behaviour (or attitude) in reference to a specific RTI risk factor, for example to seat-belt and child-restraint use or compliance with speed limits.

Systematic data collection can be used to observe and measure the rates of seat-belt and child-restraint use, compliance to signposted speed limits, helmet use and other factors, as well as changing trends in these road safety indicators.

The approach to monitoring selected road safety risk factors (speeding and restraint use) in the Russian Federation involved the following:

- what people say – roadside KAP surveys toward speeding and restraint use
- what people do – observational studies on speeding and restraint use
- what happens following RTC – analysis of statistics on RTI and deaths reported by traffic police and hospitals.

9.2 Methods

JHU, in cooperation with the Lipetsk State Technical University and Ivanovo State Polytechnic University, established data collection mechanisms in the two regions: (1) primary data collection via observational assessment of seat-belt and child-restraint use and speeding; and (2) roadside interviews to determine KAP regarding seat-belt and child-restraint use and speeding. Data on RTC outcomes were collected from the Regional Emergency Trauma Centre in each region, and information on RTI and deaths was gathered through published sources.

Cooperation with local academic institutions made it possible to conduct large-scale data collection activities effectively. Professionalism and dedication of the local partners was crucial for the success of these studies: the use of multiple data collection methods, multiple measurement points with regular rounds of data collection, large sample size and carefully designed representation of the districts of

the regions. For the purposes of observational studies, WHO purchased and donated to Lipetsk State Technical University six sets of mobile speed cameras, a laptop and a power inverter.

Observations were carried out in six districts (out of a total of 18) of Lipetsk Region (Lipetsky, Yeletsky, Gryazinsky, Dankovsky, Usmansky and Chaplyginsky). In Ivanovo Region, observations took place in seven districts (out of a total of 21) (Furmanovsky, Ivanovsky, Privolgsky, Rodnikovsky, Shyuisky, Teykovsky and Vichugsky). Observation sites were selected to ensure diversity of traffic and roads. In each district, observations were carried out on three different types of road: city road (urban), main highway and village road (rural). For each round of observations, data were collected from 18 sites in Lipetsk Region and 21 in Ivanovo Region. Observations were limited to daylight hours to allow for more accurate description of drivers, passengers and their behaviour.

The following criteria were used for the selection of the sites for observations on seat-belt and child-restraint use.

- The site should involve an intersection with traffic lights or speed humps or should be located in close proximity to speed reduction road signs.
- It should provide clear visibility to allow observers to see all car occupants clearly.
- It should exclude any features that might pose a potential risk for the safety of study personnel.

The following behavioural safety indicators were observed and recorded:

- seat-belt use by drivers and passengers
- passenger's seating position in the vehicle
- child-restraint use
- number of occupants in the vehicle.

Also, information was recorded on weather conditions, sex and age of car occupants, road and vehicle type.

For observational studies on speeding, sites were selected on the following criteria:

- appropriate environment (that is, a flat, straight or curved section of road with an adequate safe sight distance), allowing drivers to drive freely within the speed limit; and
- located at a distance from a speed camera or other type of traffic/police enforcement.

Only vehicles with a minimum of four seconds clear headway (that is, whose speed was not limited by other vehicles) were included in the road–speed sample. If more than one vehicle passed the observation site, the nearside vehicle was observed. Data were collected using speed guns manufactured in the Russian Federation and procured by local collaborators.

The KAP survey sites covered all six districts of Lipetsk Region and all seven districts of Ivanovo Region where observational studies took place. The selection of sites allowed for representative coverage of the population from both regions.

9.3 Results

In Lipetsk Region, during the study period 15 rounds of observational studies on speeding and 17 on seat-belt and child-restraint use were carried out, and seven rounds of KAP studies on speeding and six

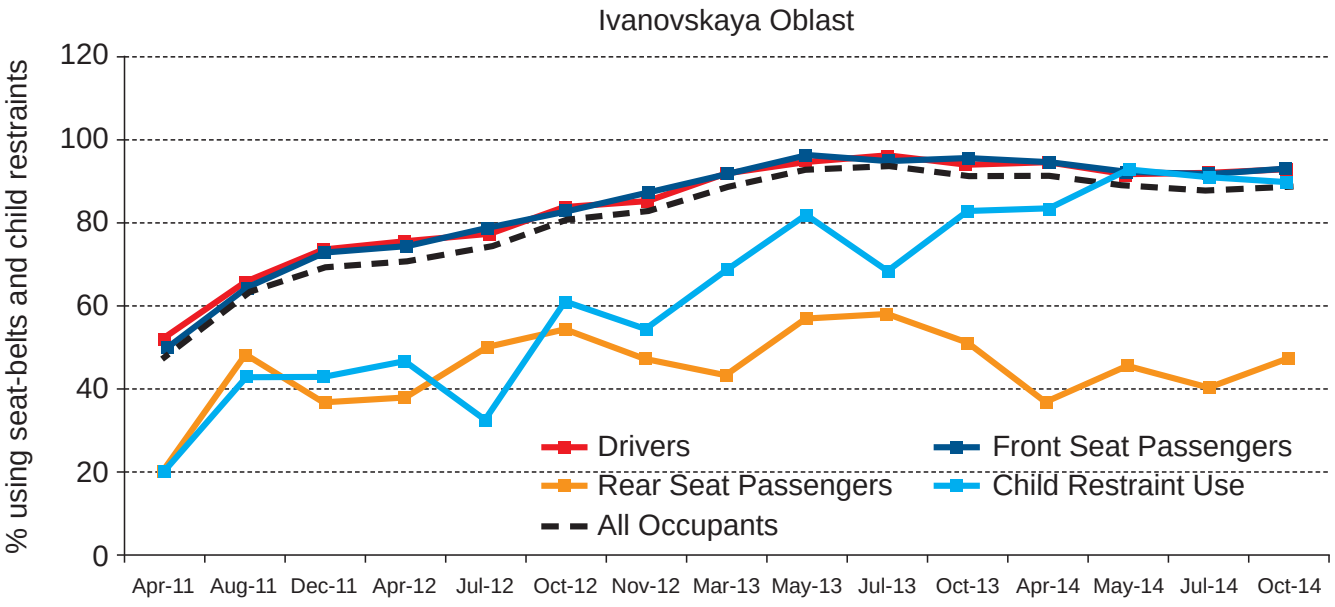
on seat-belt and child-restraint use. In Ivanovo Region, there were 12 rounds of observational studies on speeding and 16 on seat-belt and child-restraint use, and four rounds of KAP surveys on speeding and seven on seat-belt and child-restraint use. Each observational study had an average sample size of 30 000 observations and each KAP survey included 600 interviews.

9.3.1 Seat-belt and child-restraint use

Seat-belt use increased in both regions during the study period: in Ivanovo Region from 47.5% in April 2011 to 88.7% in October 2014 (Fig. 6); and in Lipetsk Region from 52.4% in October 2010 to 77.4% in October 2014.

Although the increase was larger in Ivanovo Region, child-restraint use increased in both regions: in Ivanovo Region from 20.6% in April 2011 to 89.4% in October 2014 (Fig. 6); and in Lipetsk Region from 20.9% in October 2010 to 54.1% in October 2014.

Fig. 6. Observed seat-belt and child-restraint use in Ivanovo Region, 2011–2014

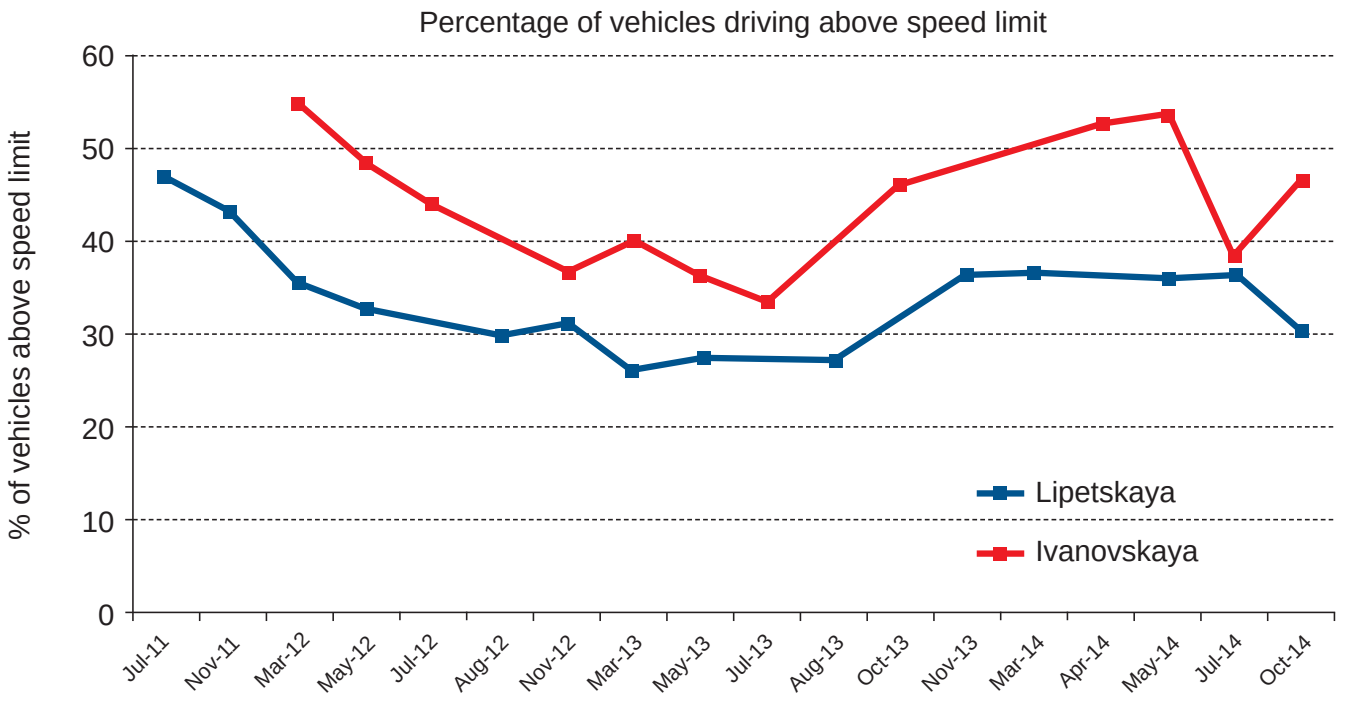


9.3.2 Speeding

The overall prevalence of speeding had been decreasing in both regions until autumn 2013, when a considerable increase in the percentage of vehicles speeding was observed in both regions. In Ivanovo Region, speeding decreased from 54.7% in March 2012 to 33.4% in July 2013; speeding increased to 46.2% in October 2013 and was almost at the same level, at 46.7%, in October 2014 (Fig. 7). In Lipetsk Region, speeding decreased from 47% in July 2011 to 27.3% in August 2013; speeding increased to 36.3% in November 2013 and then decreased to 30.4% in October 2014 (Fig. 7).

This increase in speeding was probably associated with a change in enforcement regulation according to which speeding tickets were not issued for vehicles exceeding the speed limit by up to 20 km/h.

Fig. 7. Percentage of vehicles speeding in Ivanovo and Lipetsk regions, 2011–2014



9.4 Action points for other regions

- It is suggested that local authorities use the potential of existing monitoring methodology to inform decision-making and influence road safety, and provide the corresponding funds.
- Future studies on the risk factors should try to conduct observations both during the day and at night to fully evaluate road safety conditions in the regions.
- Information on risk factors and road users' behaviour might differ between regions, considering the size and diversity of the Russian Federation.
- In order to adequately determine the relationship between enforcement and outcomes of the programme, it is important to consider enforcement activities being conducted.
- It is advisable to involve local technical universities in monitoring road safety through regular observational studies of road users' behaviour.
- The experience of Ivanovo and Lipetsk regions shows that each region has their own approach to road safety communication activities, and such activities are most effective at the regional level.

CHAPTER 10. Conclusions

This four-year implementation of the RS10 project in the Russian Federation achieved its aim to improve road safety in two pilot regions. This was achieved through targeted actions that addressed the risk factors of speeding, not wearing seat-belts and not using child restraints. The regional model, methodology and materials developed incorporated best practice and there is potential for their dissemination across the Russian Federation, as well as the experience gained.

By December 2014 both regions showed a statistically significant increase in the number of all car occupants using seat-belts, a decrease in the number of drivers speeding, and an increase in the number of drivers carrying child passengers in child restraints.

10.1 Main achievements and lessons learned

The requirement for intersectoral collaboration for successful implementation of road safety programmes was emphasized in the UN resolution on improving global road safety *(11)*. This project demonstrated how investing in collaboration between the justice/interior, health and transport sectors at both national and regional level was essential to achieving the outcomes of the project. It required in-depth consultation with stakeholders nationally, and establishing coordination mechanisms at international, national and regional level, which engaged national and regional authorities, associations, social marketing companies and universities *(4)*. Such a whole-of-society approach in achieving public health gains was emphasized in *Health 2020 (18)*. Another important lesson from this project is the need for high-level political commitment, which was obtained from the Minister of the Interior and Minister of Health at the national level, and from governors at the regional level. It resulted in the deputy governors closely following coordination and implementation of the project locally. Successful implementation of the project was made possible by the commitment and support of federal agencies – the Ministry of Internal Affairs and Ministry of Health of the Russian Federation, and GIBDD, who worked closely with the regional administrations and GIBDD departments in Lipetsk and Ivanovo regions. Effective intersectoral coordination and collaboration was facilitated by the use of international good practices on road safety adapted to the local context.

SM in the area of road safety proved to be effective as a method of raising awareness and changing the behaviour of risk groups, especially when combined with effective enforcement. Twelve communication campaigns on three risk factors (not wearing seat-belts, speeding and not using child restraints), in combination with enforcement, led to an increase in seat-belt use (among all car occupants), a decrease in speeding and an increase in child-restraint use. This adds to the evidence base and is of particular relevance in the Russian context, where these approaches are novel.

Using effective ways of attracting media attention to road safety issues led to an increased number of publications and higher quality of road safety coverage in pilot regions.

Implementation of targeted activities contributed to enhancing the capacity of GIBDD in the pilot regions for effective enforcement in reference to the three risk factors.

Methods for the objective monitoring and evaluation of road safety actions on the three risk factors proved to be effective. Monitoring based on observation of road users' behaviour is an effective instrument to evaluate progress and make decisions, for GIBDD and emergency medical services. Feedback was provided to local authorities and influenced managerial decisions by road traffic police and emergency

health services. This approach further improved police, emergency medical service and local authority engagement. It is necessary to find ways to continue such monitoring, which could be commissioned by and conducted for regional agencies involved in road safety work and for GIBDD.

The project contributed to enhancing intersectoral road safety coordination, including in the regions.

The experience gained in the project can be used in other regions of the Russian Federation, and implementers of the project can provide expert assistance if necessary. Other regions are encouraged to use the materials and learn from the experience developed by the project within the framework of the Federal Targeted Road Safety Programme 2013–2020 *(19)*. The social marketing materials, measurement tools, capacity-building materials developed and information on organizational approaches have been stored on an accessible website to facilitate implementation of the programmes for speed control, and use of seat-belts and child car restraints in other regions *(20)*.

The Russian Federation's success with the RS10 project contributed to enhancing its perception as a country that pays significant attention to road safety and promotes it within the UN and WHO agenda.

The multisectoral nature of the road safety problem resulted in enhancement in related areas that were initially not directly targeted within the project. Some of these are listed below.

- First aid training capacity has been enhanced with the development of a course for first aid instructors. The basis for a quality first aid training system for GIBDD officers and driving school students was created. With the use of manuals, 60 first aid instructors and 26 first aid trainers (who will teach instructors) for driving schools and 597 GIBDD officers were trained in first aid. Further steps should be taken to support the first aid training system with funds from regional budgets and the Federal Targeted Road Safety Programme.
- The potential effectiveness of first aid to save the lives of RTC victims was studied in the Lipetsk Region and its potential to save lives on Russian roads was proved.
- Inclusion of the third risk factor, child restraints, during the last year of the project complemented other measures to increase the effectiveness of passive safety measures and built on previous experience gained within the project.
- The methodology used for road safety SM and communication activities proved to be effective in raising public awareness of other socially significant issues in the regions (antidrugs campaign; popularizing reading among young people).
- Lipetsk Regional Administration contributed resources to SM campaigns and provided additional airtime for broadcasting the project advertisements on TV; in Ivanovo Region, outdoor advertisements were displayed for a much longer time than was funded by the project through the support of local municipalities and business communities that owned the advertising space.
- Annual workplans for the project were harmonized with regional road safety plans, which allowed effective use of resources and better coordination of activities, as well as stimulating development of regional road safety programmes.

People's safety and health are among major priorities for national, regional and municipal authorities, which devote a great deal of attention and effort to ensuring that cities and settlements provide a healthy environment, to prevent risk factors that lead to disease, injury and death. The project experience provides tools that can be used to prevent RTI and deaths, and contribute to the overall goal of increasing the length and quality of life through improving road safety.

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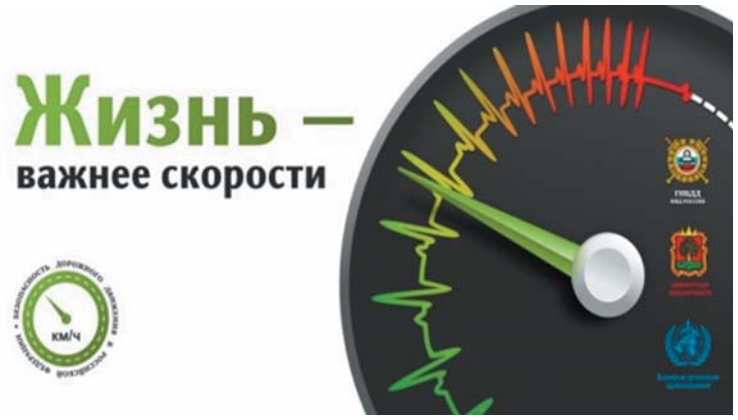
ANNEX 1. Social marketing campaigns

1. Risk factor – not wearing seat-belts

				Campaign materials	
				TV advertisements:	**3**
				Businessman:	http://www.youtube.com/watch?v=dlWJYjscwrI
				Love story:	http://www.youtube.com/watch?v=Ysgh7cfoN_o&list=PL9S6xGsoqIBWAhPnNtIDoxP3OcRYqaQa0&index=42
				Family:	http://www.youtube.com/watch?v=aUQlzsiMv44&list=PL9S6xGsoqIBWAhPnNtIDoxP3OcRYqaQa0&index=41
				Radio advertisements:	**3**
				Outdoors:	**1**
Don't break the lifeline!		**Year:**	2010	**PR events with GIBDD:**	**23**
Pre-tested by:	**WHO**			**Campaign messages:**	• **Hard hitting** • **Consequences** • **Enforcement**
Is this campaign an ad-aptation of an existing one?	**No**				
Broadcast:	**Regional Media**	**Evaluated by:**		**Romir, Lipetsk (*Image Factor)**	

Regional media	Campaign timeline	Length	Place	Evaluated	Coverage	Value measured
5 most popular TV channels	Oct–Dec 2010	9 wks	Lipetsk	Feb 2011	87%	Awareness of the campaign among all types of media
6 most popular TV channels	May–Jul 2011 (less often until Dec)	7 wks	Ivanovo	Jul 2011*	75%	Awareness of the campaign among all types of media
1 regional TV channel	Jun–Aug 2013	10 wks	Lipetsk	Dec 2013	69%	Awareness of the campaign among all types of media
3 most popular TV channels	May–Jul 2013	8 wks	Ivanovo	Dec 2013	89.6%	Awareness of the campaign among all types of media
3 most popular TV channels	Jun–Aug 2014	6 wks	Lipetsk	Nov 2014	57%	Awareness of the campaign among all types of media
3 most popular TV channels	Jul–Aug 2014	6 wks	Ivanovo	Nov 2014	65%	Awareness of the campaign among all types of media
In 2013 Lipetsk Regional Administration funded additional airtime on one regional TV channel, June–August, to broadcast three videos, 20 times per day, and then with less frequency for the rest of the year.						

2. Risk factor – speed



				Campaign materials	
				TV advertisements:	**3**
				Wheelchair	http://www.youtube.com/watch?v=RZ2qwxZRyT0
				The last date	http://www.youtube.com/watch?v=46DcEPiOCUo&index=38&list=PL9S6xGsoqIBWAhPnNtIDoxP3OcRYqaQa0
				Youth	https://www.youtube.com/watch?v=VoYHZafLXD4
				Radio advertisements:	**2**
				Outdoors:	**1**
Life prevails over speed!		**Year:**	2011	**PR events with GIBDD:**	**28**
Pre-tested by:	**WHO**			**Campaign messages:**	• **Hard hitting** • **Consequences** • **Enforcement**
Is this campaign an adaptation of an existing one?	**No**				
Broadcast:	**Regional Media**	**Evaluated by:**		**Romir, Lipetsk (*Image Factor)**	

Regional media	Campaign timeline	Length	Place	Evaluated	Coverage	Value measured
5 most popular TV channels	Aug–Sep 2011; repeated in Nov 2011	5 wks 2 wks	Lipetsk	Oct 2011	78%	Awareness of the campaign among all types of media
PR events and outdoor advertisements	Apr–Aug 2012		Lipetsk	Aug 2012	71%	Evaluation of PR events and outdoor advertisements
PR events and outdoor advertisements (a mix of seat-belts and speed)	Sep 2012–Feb 2013		Lipetsk	Oct 2012 Feb 2013	69% 44%	Evaluation of PR events and outdoor advertisements
5 most popular TV channels Supporting PR events	Apr–Jun 2012 (less often until Dec 2012) Oct–Nov 2012	6 wks	Ivanovo	Dec 2012*	77%	Awareness of the campaign among all types of media
2 regional TV channels	Sep–Oct 2013	6 wks	Ivanovo	Oct 2013	89.3%	Awareness of the campaign among all types of media
1 regional TV channel	Sep–Oct 2013	4 wks	Lipetsk	Oct 2013	83%	Awareness of the campaign among all types of media
In 2013 Lipetsk Regional Administration donated TV airtime for two video slots on one regional TV channel, for four weeks in September–October, 12 times per day, and with less frequency until the end of the year. Ivanovo Administration provided free extra placement of outdoor banners.						

3. Risk factor – not using child restraints

<table>
<tr><td colspan="3"> 
</td><td colspan="2">Campaign materials</td></tr>
<tr><td colspan="3"></td><td>TV advertisements:</td><td>2</td></tr>
<tr><td colspan="3"></td><td>500 kg baby</td><td>http://www.youtube.com/watch?v=ihoKh5W5dMs&list=PL9S6xGsoqIBWAhPnNtIDoxP3OcRYqaQa0&index=2</td></tr>
<tr><td colspan="3"></td><td>Choosing a CR</td><td>http://www.youtube.com/watch?v=BC1zSBEJ_gM&list=PL9S6xGsoqIBWAhPnNtIDoxP3OcRYqaQa0&index=</td></tr>
<tr><td colspan="3"></td><td>Radio advertisements:</td><td>0</td></tr>
<tr><td colspan="3"></td><td>Outdoors:</td><td>1</td></tr>
<tr><td colspan="2">Buckle or lose!</td><td>Year: 2014</td><td>PR events with GIBDD:</td><td>5</td></tr>
<tr><td>Pre-tested by:</td><td>WHO</td><td rowspan="3"></td><td rowspan="3">Campaign messages:</td><td rowspan="3">Hard hitting
Consequences
Enforcement</td></tr>
<tr><td>Is this campaign an adaptation of an existing one?</td><td>Partially – only the video was adapted</td></tr>
<tr><td>If yes, which one?</td><td>2008. Think Or Pay! Czech Republic</td></tr>
<tr><td>Original TV advertisement:</td><td>  </td><td colspan="2">Think Or Pay!</td><td>http://www.who.int/violence_injury_prevention/videos/czech_child_restraints_madhouse/en/</td></tr>
<tr><td>Broadcast:</td><td>Regional Media</td><td colspan="2">Evaluated by:</td><td>Romir, Lipetsk</td></tr>
</table>

Regional media	Campaign timeline	Length	Place	Evaluated	Coverage	Value measured
3 most popular TV channels	Sep–Oct 2014	6 wks	Lipetsk	Nov 2014	90%	Awareness of the campaign among all types of media
3 most popular TV channels	Sep–Oct 2014	6 wks	Ivanovo	Nov 2014	87%	Awareness of the campaign among all types of media
The campaign was developed based on the data from testing international and Russian videos in line with the World Lung Foundation methodology.						

ANNEX 2. Sample scenarios of the most successful PR events

This Annex sets out details of the 10 most effective PR events, according to the SM campaign evaluation, that complemented TV advertisements and other SM activities focusing on the selected risk factors. The events fell into one of three categories.

1. **Linear events** are a series of successive events of the same type, with a similar script or scenario and presentation format, over a relatively long period of time (average 15 days). The events are not tied to a single locality. The main thrust is to bring the same message to the largest possible number of members of the target audience within a certain time.

2. **Involvement–inclusion events** may be one or a series of events where the main objective is interaction with the target audience. Along with verbal and visual stimuli, the audience may experience tactile sensations, memory, motor skills, logic and strong emotions. There are several stages to this sort of event: attracting the attention of the participant, who should become interested in the event and take part in it, initially as a passive participant, and subsequently actively involved in performing a specific task. To consolidate the impressions, participants should be given something concrete (for example, a souvenir with the logo of the campaign).

3. **Resonance PR events** are usually single events designed to attract the attention of the largest possible number of media. It is important that the media information issued is not in a dry, formal format, but comprises live events to stimulate journalists' interest in covering the events, and that they include a variety of emotional stimuli and ways of presentation. The components for the success of such events are: high level of creativity, potential importance and interest of the topic to a broad media audience, innovative approaches, and involvement of celebrities or well known people in an unusual context. An additional benefit would be to organize the event with reference to the ongoing calendar of events to ensure the best focus.

Before each PR event, a press release was provided to the media with information about the event, its goals, target audience and participants, and key information on the risk factor. Where appropriate, all events and locations were agreed with Lipetsk regional GIBDD.

In a car seat to fairy land
(Child in car – always in child car seat)

Format	Linear, using carrot-and-stick approach
Focus	Use of child restraints
Goals	Raising awareness of the potential consequences of not using child restraint systems, as well as their protective effects and correct use; changing target audience behaviour, to encourage regular, mandatory use of child restraints; enhanced enforcement in reference to child restraint systems and encouragement of compliance; attracting media attention
Partners	GIBDD; administration of Lower Park municipal park
Length	15 days, two hours per day
Estimated number of participants	At least 1000 people
Location	Temporary traffic police checkpoints; time and place variable, depending on the weather and other circumstances; recommended locations: safety islands, with traffic taking children to and from school on weekdays and to the cinema or park at weekends
Details	Participants from youth NGOs (2–3 people) and a GIBDD officer conducted random checks on the roads of Lipetsk region to ensure that children were transported in car seats. If a car seat was used, the child received a free ticket to a theme park. Non-compliant drivers were fined. All drivers were handed an infographics flyer about the necessity to use child restraints. About 70 theme park tickets were distributed during every check. Checkpoints displayed flags carrying the logo of the campaign: “Buckle or lose!”
Expenses	• equipment (flagpoles) • design and production of flags • clothes for participants (T-shirts, caps) • procurement, design and printing of tickets • design and printing of flyers • transport for equipment and, if necessary, for participants • personnel costs (two people) • supervisor’s fee

Human speed signs!

Format	Linear, using visual effects, an unusual approach and a large number of participants
Focus	Compliance with speed limits
Goals	Attracting the attention of car occupants; triggering media interest
Partners	GIBDD
Length	15 days, two hours per day
Estimated number of participants	At least 70 000 people
Location	Problematic sections of roads with low speed limits and a lot of traffic
Details	Participants from youth NGOs (Russian Youth Union, Student Union of Lipetsk State Technical University), carrying replica speed limit signs, served as a human installation to attract passing drivers' attention. A special event to make a sign about 1000 m in length, involving 70 participants, marked the beginning and the end of each event.
Expenses	• design and production of replica signs • clothes for participants (T-shirts, caps) • transport for equipment and, if necessary, for participants • personnel costs (10–70 people) • supervisor's fee

Your seat-belt ticket to the movies

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Format	Linear, using a carrot-and-stick approach
Focus	Use of seat-belts and child restraints
Goals	Enhancing the use of seat-belts and child restraints (with special attention to passengers in the rear seats), through enforcement and rewarding compliant drivers; triggering media focus on these safety measures
Partners	GIBDD, the Malina cinema
Length	15 days, two hours per day
Estimated number of participants	At least 1000 people
Location	Temporary traffic police checkpoints; time and place variable depending on the weather and other circumstances; recommended location: streets in the city centre
Details	Participants from youth NGOs together with a traffic police officer conducted spot-checks on the roads of Lipetsk region, paying particular attention to cars with 2–4 occupants. Car occupants wearing seat-belts and using child restraints were rewarded with a free cinema ticket (one per occupant) – about 70 tickets were distributed each day. Violators were fined. Checkpoints displayed flags carrying the event logo.
Expenses	• equipment (flagpole) • design and production of flags • clothes for participants (T-shirts, caps) • procurement, design and printing of tickets • transport for equipment and, if necessary, for participants • personnel costs (two people) • supervisor's fee

Quick-fire tests for driver–parents (Child in car – always in a child car seat)

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Format	Linear, inclusion–involvement
Focus	Use of child restraints
Goals	Raising awareness of the potential consequences of not using child restraints, as well as their protective effects and correct use; changing target audience behaviour, to encourage regular, mandatory use of child restraints; enhancing knowledge of legislation and enforcement regarding use of child restraints and rewarding compliant drivers; triggering media interest
Partners	GIBDD, regional administration's Department of Education and Science
Length	15 days, two hours per day
Estimated number of participants	At least 1000 people
Location	Kindergarten car parks; best time is at the end of the working day, when parents come to take their children home; time and place variable according to the weather and other circumstances
Details	Participants from public and non-profit-making organizations carried out quick-fire tests on parent–drivers' knowledge of RTR and statistics relating to the use of child restraints. Those who answered the questions correctly received promotional gifts and information leaflets encouraging the use of child restraints. Campaign banners were displayed at the sites where tests were held.
Expenses	• equipment (tables, frame for banner) • design and production of banners • design and production of promotional gifts • clothes for participants (T-shirts, caps) • design and printing of tests • design and printing of leaflets promoting use of child restraints • transport for equipment and, if necessary, for participants • personnel costs (two people) • supervisor's fee

Quick-fire tests
(Life prevails over speed)

Format	Linear, inclusion–involvement, using an unusual approach
Focus	Compliance with speed limits
Goals	Raising awareness of potential consequences of speeding; stimulating the target audience to change their behaviour; encouraging compliance with signposted speed limits; rewarding compliant drivers; triggering media interest
Partners	GIBDD, regional administration's Department of Education and Science
Length	15 days, two hours per day
Estimated number of participants	At least 3000 people
Location	Places frequented by drivers (the GIBDD building; car parks of supermarkets); time and place variable, depending on the weather and other circumstances
Details	Participants from public and non-profit-making organizations conducted quick-fire tests on RTR and speed-related statistics. Drivers who answered correctly were rewarded with promotional gifts.
Expenses	• equipment (tables, frame for banner) • design and production of banners • design and production of promotional gifts • clothes for participants (T-shirts, caps) • design and printing of tests • design and printing of flyers • transport for equipment and, if necessary, for participants • personnel costs (two people) • supervisor’s fee

Let's do a puzzle together

Format	Inclusion–involvement
Focus	Use of child restraints
Goals	Raising awareness of the potential consequences of not using child restraints, as well as their protective effects and correct use; changing target audience behaviour, to encourage regular, mandatory use of child restraints; triggering media interest
Partners	Children's educational institutions (kindergartens, schools, educational centres); GIBDD; Ivanovo regional emergency medicine centre
Length	Once a week for a month (or more, depending on the number of municipalities involved)
Estimated number of participants	At least 300 people
Location	Schools/preschools
Details	A large jigsaw puzzle of the banner of the "Buckle or lose" campaign was made, consisting of four pieces, each a puzzle in itself. The four puzzles were delivered to the municipalities. Each week, there was an event in one of the municipalities, when children, their parents, volunteers and GIBDD officers came together to do the puzzle. Before starting to do the puzzle, volunteers and traffic police officers talked to the families present about the importance of using child restraints and showed them how to install a child restraint in the car correctly. After the puzzle was solved, all participants received promotional gifts. When all the municipalities had completed their parts of the bigger puzzle, all the pieces were brought to the main town of the region, put together and installed on the GIBDD premises. Representatives of municipalities (children and their parents) were invited to install this unusual version of the campaign banner. Coordinators of the RS-10 project in Ivanovo informed the audience about the goals and objectives of the campaign. Each family received promotional gifts and tickets to a children's entertainment centre.
Expenses	• production of the jigsaw • procurement of tickets to the entertainment centre • clothes for participants (T-shirts, caps) • transportation (of organizers to municipalities and of participants to the regional centre) • promotional gifts • personnel costs (two people) • supervisor's fee

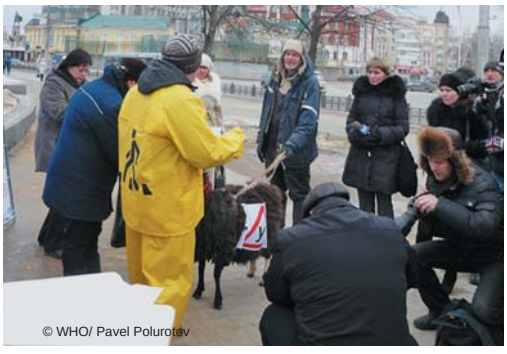
Santa for road safety
(Don’t break the lifeline!)

Format	Linear, using an interactive and unusual approach
Focus	Use of seat-belts and child restraints
Goals	Enhancing use of seat-belts and child restraints; rewarding compliant drivers; promoting the activities of traffic police; stimulating a positive attitude to the work of traffic police officers; triggering media interest
Partners	GIBDD
Length	15 days, two hours a day
Estimated number of participants	At least 1000 people
Location	Temporary traffic police checkpoints; time and place variable, depending on the weather or other circumstances; recommended location: streets in the city centre
Details	In this New Year event, participants wearing Santa and the Snow Maiden costumes (well known figures), together with a traffic police officer, conducted spot-checks on the roads of Lipetsk region. Primary attention was paid to drivers wearing seat-belts, who received promotional gifts bearing the logo of the campaign (about 70 per day). Non-compliant drivers were fined. Checkpoints displayed flags carrying the campaign logo.
Expenses	• equipment (flagpole) • design and production of flags • clothes for participants (three costumes) • design and production of calendars and promotional gifts • transport for equipment and, if necessary, for participants • personnel costs (three people) • supervisor’s fee

Roadside trick or treat

Format	Linear, using a carrot-and-stick approach
Focus	Compliance with speed limits
Goals	Stimulating changes in target audience behaviour, to promote regular, mandatory compliance with speed limits; rewarding compliant drivers; triggering media interest
Partners	GIBDD
Length	15 days, two hours a day
Estimated number of participants	At least 1000 people
Location	Places with heavy traffic with a signposted speed limit of 40–50 km/h (near schools and kindergartens, near federal roads running through towns/villages)
Details	Participants from youth NGOs together with a traffic police officer conducted spot-checks on municipal and regional roads. Compliant drivers received chocolate bars and promotional gifts; non-compliant drivers were fined.
Expenses	• design and production of promotional gifts and equipment (banner) • design of wrapper and production of chocolate bars • clothes for participants (T-shirts, caps) • transport for equipment and, if necessary, for participants • personnel costs (two people) • supervisor’s fee

School for pedestrians



Format	Resonance, using interactive action, strong visual effect and an unusual approach
Focus	Pedestrian safety
Goals	Changing pedestrians' behaviour in speed risk zones; motivating positive public attitude to the main idea of the campaign; triggering media interest
Partners	GIBDD
Length	One day
Participants	Media representatives
Location	Speed risk zones, where pedestrians may be at risk from drivers travelling too fast
Details	The demonstrator, watched by the media, opened the school for pedestrians, teaching its first student (a sheep wearing a cloak with the letter "U") how to cross the road. Then, the demonstrator and student cross the road in compliance with the RTR. Meanwhile, participants distribute flyers with instructions on crossing the road safely, with the message: "Be smart – cross the road on the pedestrian crossing".
Expenses	• design and production of promotional gifts • hire of the sheep • animal handlers' fees • clothes for participants (T-shirts, caps) • transport for equipment and, if necessary, for participants • personnel costs (four people) • supervisor's fee

Courteous driver – grateful pedestrian

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Format	Linear
Focus	Pedestrian safety
Goals	Changing drivers' behaviour when driving through high-risk zones for pedestrians; triggering the media to motivate positive public attitudes to the main idea of the campaign; triggering media interest
Partners	GIBDD
Length	15 days, two hours a day
Estimated number of participants	At least 10 000 people
Location	Unregulated pedestrian crossings (zebra crossings) on those roads of Lipetsk along which the target audience drives, where pedestrians may be at risk from drivers travelling too fast
Details	Columns of participants crossed the road on a zebra crossing, thanking drivers with a thumbs-up sign, placards carrying the words "Thank you" and "Good luck" and applause to express their gratitude for the driver's courtesy in giving way to pedestrians. Ahead of the pedestrian crossing, traffic police ensured that drivers slowed down when approaching the crossing and participants with flags warned drivers of the crossing ahead and the necessity to slow down. Drivers who did not give way to pedestrians, or pedestrians who did not cross the road at the pedestrian crossing, were fined or reprimanded.
Expenses	• design and production of gratitude signs and flags • clothes for participants (T-shirts, caps) • transport for equipment and, if necessary, for participants • personnel costs (15 people) • supervisor's fee

The WHO Regional Office for Europe

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Practical steps in enhancing road safety

Lessons from the Road safety in 10 countries project in the Russian Federation

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