

Tabled by Mr Campbell
B 9/11/93
UPON THE TABLE OF THE HOUSE
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THE CLERK OF THE PARLIAMENT

THE NATIONAL ROAD SAFETY STRATEGY



ORGANISATIONS

ORGANISATIONS WHICH CONTIBUTED TO DEVELOPING THIS STRATEGY

This following national organisations are acknowledged for their contributions to developing the National Road Safety Strategy.

- Advocacy for the Brain Injured
- Aged & Community Care, S A
- Association of Apex Clubs of Australia
- Australian Automobile Association
- Australian Bus and Coach Association
- Australian Capital Territory - City Services Group
- Australian College of Road Safety
- Australian Driver Trainers Association
- Australian Education Council
- Australian Federation of Consumer Organisations
- Australian Hospital Association
- Australian Local Government Association
- Australian Medical Association
- Australian Motorcycle Council
- Australian Road Research Board
- Australian Road Transport Federation
- Bicycle Federation of Australia
- Child Accident Prevention Foundation of Australia
- Commercial Vehicle Industry Association of Australia
- Federal Chamber of Automotive Industries
- Federal Department of Health, Housing & Community Services
- Federal Office of Road Safety
- Institute of Ambulance Officers (Aust)
- Motor Trades Association of Australia
- National Health & Medical Research Council
- National Injury Surveillance Unit
- National Road Trauma Advisory Council
- Neurosurgical Society of Australasia
- NHMRC - Road Accident Unit
- New South Wales Police
- Northern Territory Department of Transport and Works
- Northern Territory Road Safety Council
- Queensland Department of Transport
- Road Transport Industry Forum
- Roads & Traffic Authority of New South Wales
- Royal Australasian College of Surgeons
- Society of Automotive Engineers
- South Australia Police
- South Australian Department of Transport
- Tasmanian Department of Road Transport
- Transport Workers Union
- Vicroads
- Victoria Police
- Western Australian Main Roads Department
- Western Australia Police
- Western Australian Traffic Board
- Youth Affairs Council of Australia

THE NATIONAL ROAD SAFETY STRATEGY

AIMING FOR RESULTS

The National Road Safety Strategy is the first national approach by federal, state and local governments, as well as industry and community groups, to reduce the road toll.

The strategy aims to reduce road crashes and their human and economic costs in real terms during the 1990s and into the next century.

It will, by any standard, enable Australia to achieve a level of road trauma among the lowest in the world.

Road deaths account for almost 15 per cent of years of productive life lost by all causes. When disabling injury is added, road trauma becomes the main source of loss of productive life.

Because so many young people are killed or injured on the roads, road trauma is a major factor in the country's future productivity.

This strategy aims to keep road trauma below current levels despite an expected 18 per cent increase in population and a 25 per cent increase in road travel by the year 2001.

With the cooperation of all governments and proper integration into their individual programs, this will help save between 3000 and 4000 lives and up to 150 000 casualties over the next 10 years.

The economic benefits of the strategy to the community could amount to \$1.5 billion a year, plus the resulting higher output from the workforce and savings in expenditure on medical facilities and hospitals.

The objectives of the National Road Safety Strategy will be achieved through:

Coordination and involvement among all agencies to make best use of their resources. It will also increase community participation in road safety decision-making.

Stakeholder commitment through a partnership of governments, police departments, motorists' associations, industry and community groups in developing the strategy and then agreeing on ways to measure the success of the strategy.

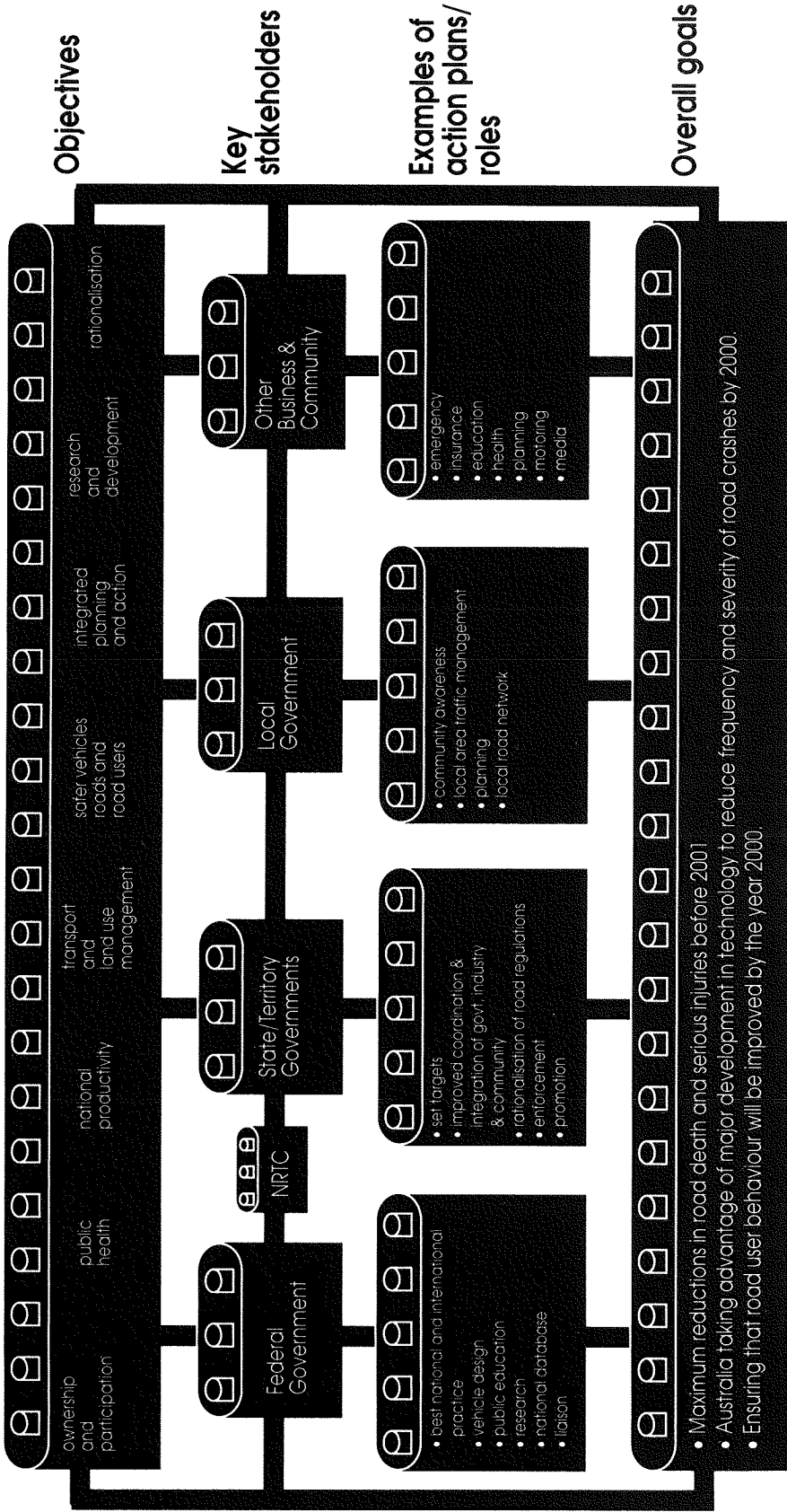
Cost-effectiveness. All stakeholders will be required to set priorities for funding and other resources for road safety programs on the basis of their cost-effectiveness and their contribution to the overall objectives of the strategy.

Research and development. Adequate data is needed before solutions can be found. A strategic research and development program will fill gaps in existing databases, and encourage stakeholders to coordinate their research and development activities to avoid costly duplication.

This commitment stems from a new appreciation, not only of the extent of road trauma and what the community can do to help reduce it, but of its consequences for the economic viability and future productivity of this country. We are all potential road crash victims.

3398
No. 9
Date 9/10/1993
OFFICE OF THE CLERK OF THE HOUSE OF REPRESENTATIVES

THE STRATEGY AT A GLANCE



INTRODUCTION

Federal, state and territory transport ministers agreed in April 1992 to endorse the National Road Safety Strategy as a coordinated approach to reduce road trauma into the next century.

The National Road Safety Strategy is a framework into which the strategic road safety plans of the federal, state, territory and local governments, as well as those of other major stakeholders, will fit.

It is a process for identifying and addressing issues which fall between the responsibilities of the various states and territories; and those where progress can only be made through effective cooperation between each level of government.

The National Road Safety Strategy is not a program of action imposed on the stakeholders, nor is it a substitute for planning and action by them. The strategy enables them to address their own issues and priorities, while making a firm commitment to overall national goals.

The strategy gives a nationally-unified sense of direction in road safety and resolves some of the conflicting priorities of the past. It calls for the community to work together in a national effort to greatly reduce present levels of road deaths and serious injuries before the centenary of Australia's federation.

Formal national targets will be resolved by stakeholders in setting their individual strategies. Victoria and New South Wales have already formally set goals of 30 per cent and 25 per cent reductions in the road toll respectively.

European countries, particularly the United Kingdom and the Netherlands, are also looking at reductions of this order by the end of the century.

The National Road Safety Strategy is a 'living document'. It will be monitored continuously and adjusted as new opportunities or solutions arise.

WHY A NATIONAL STRATEGY?

The direct and indirect costs of road trauma in Australia now amount to more than \$6 billion a year. These costs are significant when compared with other areas where governments are trying to achieve substantial cost savings, eg:

- total health expenditure in Australia is about \$26 billion annually;
- Australia's rail systems draw on public funds to the tune of \$4 billion, or more, each year;
- the direct and indirect benefits of water front reform are expected to be in the order of \$1 billion a year; and
- Australia's deficit on its balance of payments which was around \$16 billion in recent years.

Details of the total and average costs of various types of road crashes are at **Figures 1 and 2**.

Road trauma places a big strain on the country's medical, health and welfare services. For example, 20 per cent of all trauma patients in Australian hospitals are road crash victims. Seventy per cent of the most serious trauma cases were injured in road crashes.

Road crashes reduce resources which could be better used increasing national productivity.

Figure 1: Total (\$m)

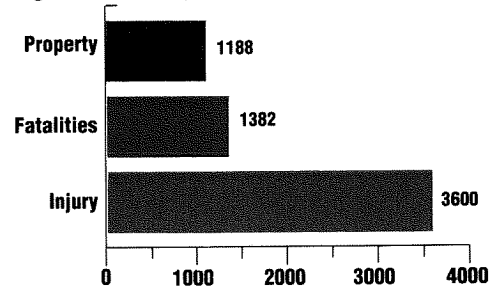


Figure 2: Average cost (\$000s)

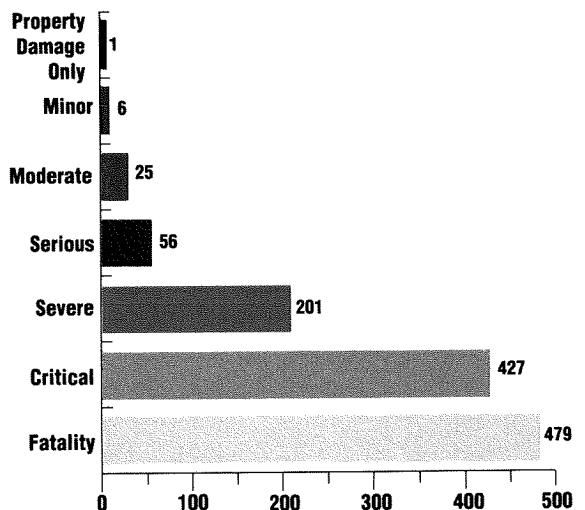
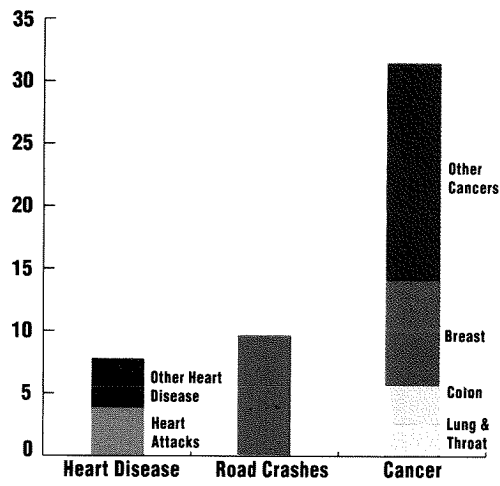


Figure 3: Percentage of total years of potential working age life lost (ages 18 - 65) for various causes of death, females, Australia 1990



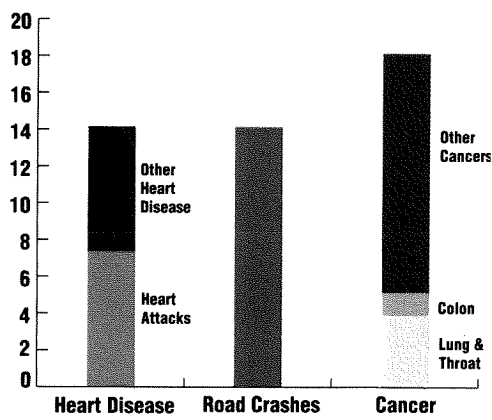
A PUBLIC HEALTH ISSUE

Road trauma accounts for about 2.1 per cent of total deaths. However, it is the leading cause of death for those under the age of 45. In the age group of 15-25 it accounts for about 35.9 per cent of total deaths.

Road crashes account for more years of potential working life lost than all forms of heart disease. For men, the effect of road crashes on working life lost is greater than any form of cancer or heart disease (Figures 3 and 4).

Reductions in road trauma will not only reduce its direct costs, but also reduce the need for new investment in health services.

Figure 4: Percentage of total years of potential working age life lost (ages 18 -65) for various causes of death, males, Australia 1990



ROAD TRAUMA TRENDS

About 2500 people are killed and a further 30 000 are admitted to hospital each year as a result of road trauma. Several times this number receive medical attention outside of hospital.

In the next decade, around one in every 10 Australian families will be directly affected by a road death or serious injury.

Over the past 20 years, the safety of Australia's roads has been consistently improved. Despite an almost doubling of the amount of travel, deaths on Australia's roads have fallen from 3800 in 1970 to 2300 in 1990 and 2112 in 1991.

This is a result of significant improvements in vehicle safety design, better law enforcement, stricter penalties, better roads (including the treatment of accident 'blackspots'), and improved public education programs. **Figure 5** shows these trends.

Australia is already an international leader in road safety, but most countries with relatively good road safety records are planning to reduce death and serious injury by a further 25-30 per cent by the turn of the century.

The world's lowest death rates per 100 million vehicle kilometres (MVK) are in the United States and Sweden, at 1.3 and 1.2 respectively. Australia's present level is about 1.4 MVK, and in some states the figure is slightly better (**Figure 6**).

Figure 5: Road fatalities per year and three year moving average, 1960 to 1990

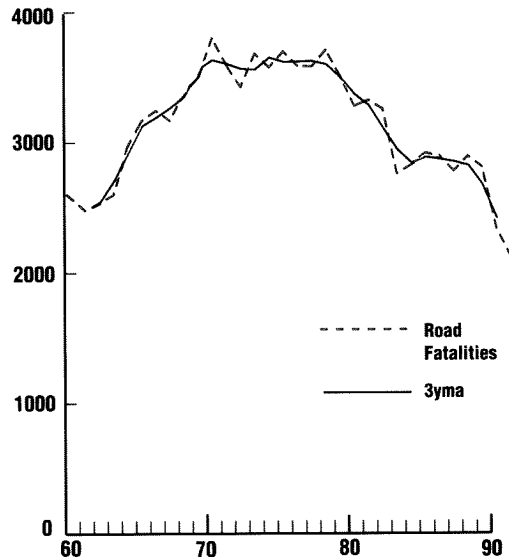


Figure 6: Road fatalities per 100 million vehicle km travelled, Aust, USA, Sweden & UK

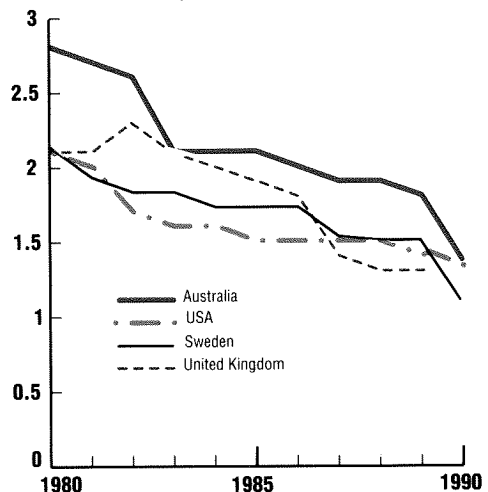


Figure 7: Road fatalities per 100,000 population, Australia, USA, United Kingdom, Canada, New Zealand and Sweden

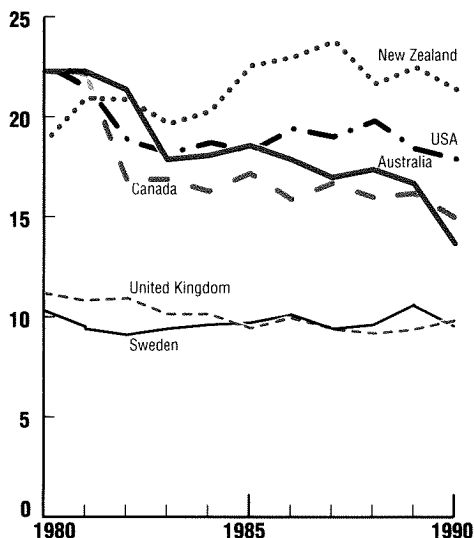
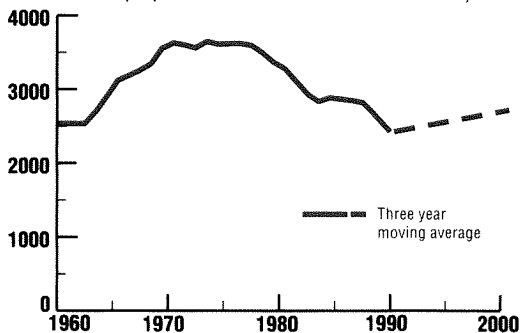


Figure 8: Projected road fatalities 1960 – 2000 (assumes fatalities/population constant from 1990)



On a population basis, Australia's recent performance is also outstanding (Figure 7).

Improving these figures towards the next century provides a tremendous challenge.

Motor vehicle travel in Australia is growing at about three per cent each year. If the road toll improvements of 1990 and 1991 cannot be maintained and if the mobility-related death rate stays at around present levels, total road deaths could rise towards 3000 by the turn of the century unless new policies are adopted (Figure 8).

To hold the annual death toll at current levels to the end of the century, the death rate per 100 MVK will have to be reduced to around 1.1.

Alternatively, to keep the road toll constant it would be necessary to reduce the death rate per 100 000 population from 12.5 to 11.7 by the year 2000.

While governments can provide basic support, road safety cannot be delivered by them — it must be practised by the whole community.

LIMITATIONS OF INDIVIDUAL STRATEGIES

Several states have already developed road safety strategies and plans focussing on the year 2001. Other governments have similar work in progress.

Without harmonising these individual strategies, results would be inferior, and there will be gaps in activities between states.

Transport efficiency is important to Australia's economic survival. The country cannot afford to have efficiency eroded by road trauma costs greater than the sum of all traffic congestion costs.

Australia deserves a national strategy to ensure that collective road safety and trauma reduction efforts achieve the best possible results. To achieve this, all local, territory, state and federal governments must be committed not only to the National Road Safety Strategy, but also to their own individual strategic plans. **Figure 9** shows the disparity currently existing between states and territories.

This variation disguises even greater variations between suburbs in cities and between urban and rural areas, for example in New South Wales in 1990 (**Table 1**).

These figures show the impact of through traffic as well as differences in the road systems, and possibly socio-economic factors.

Death rates are generally higher in rural areas, but there is a great deal of variation between states and territories when rural crashes are considered separately (**Table 2**).

Figure 9: Road fatality rate per 100,000 population, all states and territories and Australian average, 1990

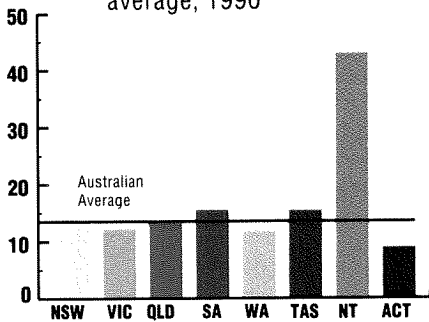


Table 1. Fatalities per 100 000 population for urban and rural areas (NSW, 1990).

Locality	Fatality rate
Western Sydney	11.9
Eastern Sydney	9.1
Wollongong	11.2
Bega	15.2
Newcastle	8.9
Bathurst	11.1
Cowra	0.0
Armidale	22.7
Coffs Harbour	8.0

Table 2. Comparative 1990 fatality rates per 100 000 population

	QLD	WA	NT
rural areas	23.1	24.8	52.3
total for state	19.7	14.9	32.1

THE NATIONAL VISION

Australia subscribes to international road safety conventions and enjoys a growing international reputation for success in reducing road trauma. We have been among the first to adopt many initiatives, the most notable being compulsory seat belt use, motor cycle and bicycle helmets, and random breath testing.

Our rate of improvement over the past 10 years has been among the best in the world, surpassing that of the USA and Great Britain, and approaching that of Japan.

This has been achieved despite our low population density, and travelling distances which are greater than in countries with a similar level of motorisation.

By continuing Australia's current performance to the turn of the century, we can become a world leader in road safety with our levels of road trauma among the lowest, whether measured in transport terms (casualties per vehicle km of travel) or in public health terms (casualties per head of population).

The vision is of a country working in harmony at all levels in the public and private sectors, in the professions and in the community, to achieve status as a world leader in reducing road trauma.

GOALS AND PRIORITIES

The fundamental aim of the strategy is to save lives and reduce serious injury and loss of quality of life resulting from road crashes.

OVERALL GOALS

- 1. Maximum reduction in road deaths and serious injuries before the year 2001.*
- 2. Australia taking advantage of major developments in technology which will help reduce the frequency and severity of road crashes in the early part of the 21st century.*
- 3. Ensuring that by the turn of the century, road-user behaviour will be improved throughout the community.*

SPECIFIC GOALS

- 1. Strive for progressive reduction in the road toll, as measured by the international standard of deaths per 100 000 population, to below 10 by the year 2001.*
- 2. Achieve similar reductions in the level of serious injuries.*
- 3. Road safety objectives to be incorporated in federal, state, territory and national health, education, law and order strategies by 31 December 1993.*
- 4. All governments and other participants to prepare individual strategies and action plans by 31 December 1992, aimed at progressively reducing road trauma through the 1990s.*

PRIORITIES

Priorities for dealing with nation-wide problems will change as progress is made on addressing existing problems and as new issues arise.

KEY PRIORITIES

- alcohol and drug abuse*
- speeding*
- protection of vehicle occupants*
- driver fatigue*
- road hazards*
- heavy vehicles*
- novice drivers and riders*
- improved trauma management*

CURRENT AND EVOLVING ISSUES

COMMUNITY EXPECTATIONS

- *continued reduction in road deaths and serious injuries*
- *safer roads and vehicles*
- *protection of vulnerable road users (ie, the young, the elderly, pedestrians, cyclists and motorcyclists)*
- *better driver education*
- *a high level of safety education in schools*
- *traffic 'calming', especially in residential areas*
- *improved heavy vehicle safety*
- *improved public transport*
- *less government regulation and more self-regulation*
- *better coordination between states and territories and between police, health professionals and other services*
- *better infrastructure for transport operations*
- *greater community involvement*
- *improved trauma management*

OPPORTUNITIES FOR IMPROVEMENT

Growing public concern with environmental issues will see the development of strategies for traffic 'calming', transport demand management, and better urban public transport. These have similar objectives to the strategy.

There are also opportunities in the strategy for improvements in the health, education and law sectors, by administrations with interests and responsibilities in road safety issues.

Current measures to achieve microeconomic reform also provide opportunities to improve institutional arrangements for road safety.

Technological improvements likely to become available over the next 20 years will offer road safety improvements. These technologies could include new enforcement aids, 'smart' cars, 'smart' highways and design improvements offering better protection for vehicle occupants.

PRINCIPLES SUPPORTING THE STRATEGY

The strategy document is both a process for planning and implementing action, and a framework for the individual strategies of major stakeholders. The national strategy must provide:

- **Consultation and ownership**

Community ownership is essential and can only be attained by adequate consultation with stakeholders.

- **Achievement of goals**

The national strategy must enable the objectives contained within the plans of individual states and territories to be achieved.

- **Integrated action**

Integrated action implies both cooperative effort to maximise the benefits and to avoid wastage of resources through duplication.

- **Research and development**

Adequate scientific research is essential to the development of effective programs.

- **Cost-effectiveness and evaluation**

Priorities should be determined on the basis of cost effectiveness and all programs should be evaluated to ensure their viability.

- **Equity and vulnerability**

Strategies should be suitable for minority groups, whether on the basis of ethnicity, geography or social disadvantage. Special attention needs to be paid to the needs of road users who are particularly vulnerable to road trauma: the young and the elderly, pedestrians, cyclists and motorcyclists.

- **Harmonisation**

While uniformity is desirable, best practice results from harmonisation: consistent treatment of similar problems, ensuring compatibility with practice in other areas. Opportunity for experimentation and innovation will be preserved.

STRATEGIC OBJECTIVES

- A:** *major stakeholder ownership and participation in road safety*
- B:** *road safety as a major public health issue*
- C:** *road safety as a major economic strategy*
- D:** *road safety as a priority in the management of transport and land use*
- E:** *safer vehicles, safer roads and safer road users*
- F:** *integrated framework for road safety planning and action*
- G:** *strategic research and development program*
- H:** *rationalisation of federal, state and territory programs*

Objective A:

**major stakeholder ownership
and participation in road safety**

Strategies

Increase awareness and understanding of road safety issues to encourage greater participation by stakeholders other than traditional road safety agencies, and encourage ownership of the problem and the solution by stakeholders.

Involve stakeholders in the ongoing review and development of the strategy through genuine consultation on issues identified by either the administration or the stakeholders.

Ensure credit is given to stakeholders for their part in successful programs.

Contribute to integration of groups in other sectors to achieve mutually-beneficial results.

Outcomes

Informed public debate and appreciation of road safety issues, and commitment by stakeholders.

Objective B:

**road safety as a major public
health issue**

Strategies

Consolidate links between transport and health administrations in the national and state 'Better Health' programs.

Add emphasis in the 'Better Health' programs and 'Health for All' strategies, about the benefits of trauma prevention. Encourage all health practitioners to make a commitment to it.

Encourage all health authorities to improve their casualty treatment operations and distribution of trauma treatment centres to reduce the disabling consequences of trauma and to conserve life.

Support moves by health authorities and the insurance industry to speed the rehabilitation of road crash casualties.

Promote road safety as a major component of school curricula on health and personal development.

Outcomes

Greater focus on road trauma prevention in national health programs; a reduction in physical consequences of serious crashes and speedier rehabilitation of crash victims.

Objective C:

road safety as a major economic strategy

Strategies

Promote awareness of the economic cost of road crashes in terms of their impact on productivity and human, infrastructure and financial resources, and express these costs in the context of other major public cost-reductions for which governments and industry are striving to achieve: rail operations and the waterfront.

Seek to internalise the costs of road crashes to the road user, avoiding hidden costs and cross-subsides.

Outcomes

Greater awareness of the impacts of road crashes on corporate and national productivity and competitiveness; greater investment by the public and private sectors in countermeasure with demonstrated high benefit-cost ratios; and road safety as a major contributor to economic reform.

Objective D:

road safety as a priority in the management of transport and land use

Strategies

Ensure that potential road crash costs are incorporated in the evaluation of alternative transport and land use decisions.

Encourage transport and land use strategies that minimise the amount of travel necessary to move people and goods.

Encourage land use planning and development decisions that minimise the physical risk to road users, including pedestrians.

Outcomes

Incorporation of potential crash costs in the 'user pays' principle; and a reduction of the community's total exposure to crash risk.

Objective E:

safer vehicles, safer roads and safer road users

Strategies

Safer vehicles: Work towards enhanced occupant protection by encouraging new, safe technologies in the operation of vehicles, management of the road system, and in the relationship between these and road users; and promote nationally standards of the best national and international practice in motor vehicle design and maintenance. Increase appreciation by consumers of options available to improve vehicle safety; and stimulate consumer demand for features providing greater primary and secondary safety.

Safer roads: Seek coordinated use of best available practices in road safety; introduce corporate safety auditing principles into all road design, construction and maintenance; and use traffic management programs to address existing problems such as road hazards and to avoid new ones.

Safer road users: Redress existing inequities through targetting disadvantaged and vulnerable road users; use school-based and public education to move progressively from strategies concentrating on deterrence and enforcement to ones based on developing more appropriate behaviour; and provide greater opportunities for modifying high-risk behaviour.

Outcomes

Best world practices applied consistently to similar circumstances, and removal of inequities in the level of protection offered any group of road users.

Vehicles with improved crash-avoidance and crash-survival characteristics for the protection of occupants and other road users.

Elimination of road hazards and the creation of more 'forgiving' roadsides.

More courteous and responsible behaviour by all road users with speeding and fatigue becoming recognised as socially-unacceptable behaviour.

Objective F:

an integrated framework for road safety planning and action

Strategies

Accelerate development of a national road crash database which includes hospital morbidity, insurance, and crash data.

Rationalise the use of government, industry and community resources to avoid duplication of effort.

Coordinate action between stakeholders to obtain the most cost-effective use of available resources.

Outcomes

Cooperation resulting in optimal use of available resources to maximise the benefits to each stakeholder, and better appreciation of the connections between vehicle design and victim injuries.

Objective G:

a strategic research and development program

Strategies

Establish priorities for nationally-relevant research and development needs.

Create a program for the training, development and transfer of road safety expertise.

Begin planning for the development and implementation of long-term strategies.

Outcomes

Technical expertise and information providing more effective countermeasures that address national priorities in both the long and short terms.

Objective H:

rationalisation of federal, state and territory programs

Strategies

States and territories to work together wherever possible to avoid duplication of effort and to improve cooperation in road safety programs.

Develop a remote area program to address interstate regions which have more in common with one another than with their particular state or territory in general.

Outcomes

Cooperative arrangements that ensure avoidance of duplication; and sharing of road safety publication and research projects.

ROLES

THE FEDERAL GOVERNMENT

The federal strategy will address those objectives that are particular to its own responsibilities as well as those of the National Road Safety Strategy.

The federal government will:

- *deliver its own strategy and related action plan*
- *provide a national focus on road safety and on the need to adopt best international and local practice*
- *develop and implement vehicle safety design and construction standards which harmonise with international standards*
- *help coordinate national public education programs*
- *provide an international point of contact for liaison with the world road safety community*
- *develop comprehensive and complementary data gathering criteria*
- *foster nationally-significant road safety research*
- *support the activities of the National Road Trauma Advisory Council.*

STATE AND TERRITORY GOVERNMENTS

In addition to their contribution to the national strategy, states and territories will concentrate on priorities within their own responsibilities, including:

- *separate road safety strategies and action plans*
- *indicative targets for progressive reduction in road deaths and serious injuries*
- *high-level communications between relevant road safety authorities*
- *improved coordination at all levels of government involving legislators, administrators, enforcement agencies, traffic authorities, health and medical services, local government, emergency services and other relevant interests and users*
- *promotion of road safety programs supported by corporate sponsorship*
- *rationalisation of road traffic laws and enforcement*
- *enable the development of other stakeholders' strategies, and increase community awareness of the socio-economic effects of road trauma.*

THE NATIONAL ROAD TRANSPORT COMMISSION

The drafting of this strategy in 1991 occurred prior to the establishment of the National Road Transport Commission (NRTC), whose task was originally to develop nationally – consistent charging and regulation in respect of road transport.

The strategy was adopted by the Australian Transport Advisory Council (ATAC) in April 1992. Since that time the Commonwealth, state and territories' Heads of Government have agreed to extend NRTC's responsibilities to cover the development of uniform or consistent standards for all road vehicles and other road users in Australia.

As NRTC's role now directly and indirectly impacts on the safety of all vehicles and road users, the commission will work in its own right and with other agencies to improve road safety across Australia.

In areas of joint responsibility NRTC will work closely with other jurisdictions in the preparation of targets and priorities.

LOCAL GOVERNMENT

Local government is closest to the community and is best placed to foster community development. It has responsibility for a major part of the road network.

Its role in relation to the national strategy is mainly to develop community awareness of local road safety issues, and to provide and manage the safety of local transport infrastructure in accordance with the community's safe environment objectives.

Local governments will be encouraged to develop and foster strategies applicable to their individual jurisdictions.

OTHER ORGANISATIONS

Health, police, ambulance, rescue, education and planning authorities can make a major contribution to road safety.

Very often these contributions will be achieved in the course of attaining their own objectives. Road trauma prevention will help to reduce medical treatment costs. These organisations will be encouraged to include specific road safety objectives in their strategic planning.

The efficiency of the transport sector and its allied industries is directly affected by the hidden costs of road crashes in terms of working time lost and delays in the delivery of services.

The insurance industry can encourage safer driving and safer vehicles through pricing mechanisms which reward good drivers and safer vehicles.

While the motor vehicle industry operates in a difficult international environment, it can bring to Australia the best international safety practice.

Consumer organisations provide an important line of communication between road users and the road safety administrators. They can make a major contribution to both community development and the appreciation by government of community expectations.

- **Health industry**

promoting prevention of trauma delivering highly expert and efficient trauma treatment

- **Town planners**

providing sensible, functional road hierarchies with traffic 'calming' a feature of residential, recreational, and shopping areas

- **Motoring associations**

encouraging safe driving by their members promoting safety as a major criterion in motor vehicle choice

- **The media**

placing equal emphasis on 'routine' incidents of road trauma and the catastrophic.

CREATING "COMMUNITY OWNERSHIP" OF ROAD SAFETY

- **Enforcement agencies**

focussing on priority problems using technology to improve efficiency

- **Insurance industry**

providing premium disincentives for unsafe driving and violation of traffic laws, and incentives to use relatively safer vehicles.

- **Education authorities**

*ensuring the integration of road safety education into school curricula
developing responsible attitudes to road safety*

IMPLEMENTATION

OWNERS AND LEAD AGENCIES

The national strategy will be achieved through development of strategies by all major stakeholders, particularly by government agencies, but also by other private organisations with a major interest in road safety and road trauma.

These strategies will incorporate action plans addressing their own priorities, but harmonising with the strategies of others and contributing to the national goals.

THE NATIONAL TASK FORCE

The Road Safety Group of officials within the Australian Transport Advisory Council (ATAC), which represents the federal, state and territory transport ministers, will assume responsibility for implementing the strategy.

This will be achieved through a task force that meets periodically but will have a limited time frame of operation. During this period, procedures will be developed for the coordination process to be incorporated in the routine operations of ATAC or the NRTC.

The task force will generally comprise representatives from the state and federal authorities responsible for road safety policy. It will also include representatives from key national stakeholders representing education, police, health, local government, the heavy vehicle industry, motorists' organisations and vehicle manufacturers.

While it is essential that the national strategy be seen to be owned by all stakeholders, there must also be a driving force to provide representative leadership. The task force will fill that role.

Other responsibilities of the task force will be to:

- *encourage lead agencies to develop and implement their road safety strategies*
- *help in the exchange of information*
- *possibly develop road safety targets*
- *coordinate research priorities*
- *progress the National Road Safety Strategy.*

THE NATIONAL ROAD TRAUMA ADVISORY COUNCIL

The role of the National Road Trauma Advisory Council as an independent organisation will be to:

- *raise the profile of road safety and road trauma as issues and enhance public awareness by 'selling' the national strategy to key players and maintaining their commitment*
- *independently monitor implementation of the strategy, including development and implementation of all stakeholders' strategies, action plans and achievements*
- *recommend to governments, if necessary, intervention of a strategy or modifications and future emphasis.*

KEEPING TABS

The task force will report annually to key stakeholders on progress made on adopting the national strategy and areas where improvement can be made.

Monitoring of the strategy and reporting on programs will be undertaken at three levels:

- 1. by major stakeholders in terms of their own commitments*
- 2. by the task force, which will overview the entire strategy*
- 3. by the National Road Trauma Advisory Council, (NRTAC) which will overview and monitor the progress of all stakeholder strategies and action plans in national context.*

The NRTAC may recommend modifications to strategies and changes of future emphasis to governments.

The strategic planning process requires regular review to take account of new opportunities or emerging difficulties.

The Road Safety Group will establish a process for periodic review of the strategy, in consultation with major stakeholders and in the light of progress in attaining goals and targets, and changes in the external and internal environments that pose threats to the strategy or opportunities to enhance it.

The Road Safety Group will also provide periodic feedback to stakeholders through progress reports.

The National Road Safety Strategy was endorsed by the Australian Transport Advisory Council in April 1992. The Council comprises Transport Ministers representing the Federal Government and the governments of:

New South Wales

Victoria

Queensland

South Australia

Western Australia

Tasmania

Northern Territory

Australian Capital Territory.

