Eswatini
National Road Safety Strategy
2023-2030

June 2023
CONTENTS

From the Prime Minister ............................................................................................................. 3
From the Minister ...................................................................................................................... 4
From the Chairman .................................................................................................................. 5
1. Introduction .......................................................................................................................... 6
   1.1 Commitment to Strengthen Road Safety ................................................................. 6
   1.2 Strategy Document Outline ..................................................................................... 7
   1.3 Legislative Mandate and Policies ............................................................................. 7
   1.4 Acknowledgements ..................................................................................................... 8
2. Vision .................................................................................................................................... 9
   2.1 Sustainable mobility ................................................................................................... 9
   2.2 Safety targets .............................................................................................................. 11
   2.3 Guiding principles ..................................................................................................... 13
3. Issues .................................................................................................................................... 14
   3.1 Too much preventable trauma .................................................................................. 14
   3.2 Weak safety systems .................................................................................................. 16
4. Strategic Directions ............................................................................................................. 17
   4.1 Coordinating a multisectoral and institutional response to the crisis ................. 17
   4.2 Building professional road safety capacity and leadership ................................ 17
   4.3 Investing in strategic information and research .................................................... 17
   4.4 Prioritising road safety in all transport and infrastructure decisions ............... 17
   4.5 Transforming the safety of the road network ......................................................... 18
   4.6 Regulating the safety of vehicles and transport operations .............................. 18
   4.7 Setting and enforcing safety expectations of motorists ......................................... 18
   4.8 Strengthening the post-crash response .................................................................. 18
5. Strategy Implementation ...................................................................................................... 19
   5.1 Governance ................................................................................................................ 19
   5.2 Funding and Investment ............................................................................................ 21
   5.3 Monitoring and Evaluation ....................................................................................... 21
6. Strategic Actions .................................................................................................................. 22
7. Conclusion ............................................................................................................................ 23
From the Prime Minister

Road traffic injury is an intolerable burden on our communities. Quite aside from the grief and suffering, every death and serious injury hits breadwinners and caregivers, reduces the wealth and opportunity for affected families, and sets back our national development agenda.

In November 2020, the Kingdom of Eswatini ratified the 2016 Road Safety Charter of the African Union in the knowledge that we would need to address the critical governance, institutional leadership and funding issues addressed in the Charter.

This strategy, like our success in tackling HIV AIDS, is based on a singular determination to tackle the problem head on. Our vision is the elimination of fatal and serious injury on Eswatini’s roads by 2063.

I pledge the Government’s support for this strategy, and for working together with all elements of society to make this a reality.

Cleopas Dlamini  
His Excellency the Right Honourable Prime Minister
From the Minister

I would like to thank the Road Safety Council for its leadership and hard work in addressing our road safety problem, and for the preparation of Eswatini’s first National Road Safety Strategy.

One of the key tasks or targets given to the Road Safety Council at its appointment was to develop the Eswatini National Road Safety Strategy. This strategy bears testimony to the hard work the Road Safety Council has put out in addressing this key task, which aligns with some of the key obligations of the ratified African Road Safety Charter.

This strategy does not hide or sugar coat our problems, but goes instead to some essential truths. The Road Safety Council is an essential part of our transport system. It now needs to be strengthened in terms of legislative mandate and financial resources if we are to stop the safety situation from worsening further, and then progressively eliminate serious road trauma from our society.

A comprehensive safety approach is required. This strategy identifies the critical issues we must face, the strategic directions we must follow and the strategic actions we must take as we set out on this path. All arms of government must assume responsibility for collaboratively addressing this problem which is a leading cause of death for our children, as well as for the most productive age group (15-49 year olds).

I pledge to bring government and society together to tackle this major public health issue, and head towards achievement of our 2030 road safety targets.

Chief Ndlaluhlaza Ndawandwe
Minister Public Works and Transport
From the Chairperson

This National Road Safety Strategy, Eswatini’s first provides us with a path forward, toward our ultimate goal of eliminating fatal and serious injury.

I would like to thank the members of the Road Safety Council of Eswatini for their efforts and their determination to promote change for good in society. Change does not come easy, but as a Council we must grasp this nettle, and redouble our efforts to lead the national road safety effort.

Careful consideration was given to the critical issues which Eswatini faces, and how we must move forward together. This strategy recognises the task ahead to strengthen the institutional foundations for change. A stronger Council mandate regarding the accountable arms of government is complemented by an ongoing engagement process with all elements of society which wish to deliver on the goals of this strategy.

This strategy takes a systems approach to road safety, with clear principles on how we work and what we do, based on what is regarded as the “Safe System” approach to road safety. All road traffic injuries are preventable, and this approach reflects the global consensus on how we must move forward.

This strategy provides us with an ultimate vision, with performance targets to 2030 to allow us to track progress in the short to medium term, and with clear directions and actions to begin implementation. It provides the basis for us to seek increased resourcing and priority from Government, and support from our development partners.

It is my hope that the strategy provides the means for government agencies, business and community interests alike to assume their safety leadership responsibilities and support delivery of this strategy, on behalf of all citizens.
1. Introduction

The mandate of the Ministry of Public Works and Transport (MoPWT) is that of “ensuring the provision and maintenance of public infrastructure to the satisfaction of government and users, it also ensures that the transport systems and network are safe, efficient and cost effective, achieved through proper regulation of the transport industry”. Over the years, the Ministry and country at large has faced growing numbers of road users dying or seriously injured as they use the road. This shows the need to continuously improve road transportation systems to strengthen road safety.

The effects road traffic accidents are a concern of global proportions. Governments and international agencies have put concerted efforts towards addressing the road traffic accidents challenge. As a response to this challenge, in 2010, the United Nations came up with the Global Plan for the decade of action for road safety which was to run from 2011 to 2020. The sole purpose of the plan was to provide countries with a framework for policy development and practice enactment towards building road safety management mechanisms, improved safety in road infrastructure among other things (WHO, 2011). A new 10 year global plan was enacted in 2021; its main aim is preventing road traffic deaths and injuries by at least 50% by 2030. The impact of road traffic accidents is felt the most in Africa, the 2015 global status report on road safety pointed out that low to middle income countries were taking the whole gamut of the burden of road traffic deaths and injuries yet they had less motorized vehicles and generally sparse settlements compared to developed countries. In Africa the risk of a traffic death was found to be the highest at 26.6 per 100 000 people (WHO, 2015).

In 2016 Eswatini recorded 203 road fatalities, but according to the WHO this is estimated to be 361. This discrepancy could be as a result of under reporting of cases or the lack of procedures and protocols when it comes to issues of road safety and road usage. In that very same year, the country is believed to have lost around $414 million due to road fatalities and serious injuries related to road accidents. Data from 2016 shows that 81% of road crash fatalities and injuries are in the economically productive age groups (15 - 64 years.). Clearly, this imposes huge constraints on Eswatini’s economy as 10.8% of the country’s GDP in 2016 was spent on road crash fatalities and related injuries.

These sobering statistics call for urgent action by all actors in society. Road traffic deaths and injuries exert an enormous socio-economic and health burden on governments, the society and families. They affect mostly the working class population, potentially exposing them to a life of disability and economic hardship. The hardship is extended to dependents and the society as in most cases those involved are bread winners.

1.1 Commitment to Strengthen Road Safety

Eswatini is alive to the grave consequences of continued road traffic crashes. As a commitment to improve road safety, the country ratified the Africa Road Safety Charter in November 2020. This Charter call for, among other things, the establishment or strengthening of the Road Safety Lead Agencies and provision of adequate financial and human resources to undertake road safety coordination.
Another key obligation outlined in the Charter is the formulation of National Road Safety Strategy to guide coordination of road safety interventions across ministries and road safety stakeholders.

This First Eswatini National Road Safety Strategy (ENRSS) 2023 – 2030 proposes to address this catastrophic situation and contribute to the development of the country. This strategy was formulated by the Ministry of Public Works and Transport through the Road Safety Council of Eswatini (RSCE) assisted by country partners. The notable partners include United Nations Economic Commission for Africa (UNECA) and World Health Organisation (WHO) Eswatini.

1.2 Strategy Document Outline

The strategy document is structured in the table below:

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Introduction</td>
<td>Provides an overview of the road safety crisis, what the country has put up as means to address the crisis and relevant legislative mandates and policies, as well as the outline of the document.</td>
</tr>
<tr>
<td>2 Vision</td>
<td>Outlines the long term vision earmarked to be achieved, short term targets as well as guiding principles for the strategy.</td>
</tr>
<tr>
<td>3 Critical Issues</td>
<td>Provides the reasons why we have the road safety crisis in the country and outlines the current weaknesses of the road safety system.</td>
</tr>
<tr>
<td>4 Strategic Directions</td>
<td>This provides for foundations to consider to improve the weaknesses identified. It is the cornerstone of the strategy.</td>
</tr>
<tr>
<td>5 Strategy Implementation</td>
<td>Outlines important implementation basis to turn around the weaknesses to strengths.</td>
</tr>
<tr>
<td>6 Strategic Actions</td>
<td>This provides for the actions that shall be undertaken to improve road safety in Eswatini.</td>
</tr>
<tr>
<td>7 Conclusion</td>
<td>Formal end of the document</td>
</tr>
</tbody>
</table>

1.3 Legislative Mandates and Policies

The strategy is informed by various legislation documents, country and regional policies, which include but not limited to the following:

<table>
<thead>
<tr>
<th>Road Safety Council Act, 1983</th>
<th>The Transport Master Plan, 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Road Traffic Act, 2007</td>
<td>The Kingdom of Eswatini Strategic Road Map 2019 - 2022</td>
</tr>
<tr>
<td>Road Traffic Regulations Notice, 2018</td>
<td>African Road Safety Charter, 2016 as Ratified by Eswatini in November 2020</td>
</tr>
<tr>
<td>Road Transportation Act, 2007</td>
<td>SACU MoU, 1969</td>
</tr>
<tr>
<td>Roads Outspan Act, 1931</td>
<td>SADC Protocol on Transport, Communications and Meteorology, 1996</td>
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<tr>
<td>Pounds Act, 1966</td>
<td></td>
</tr>
</tbody>
</table>
1.4 Acknowledgements

The development of this ENRSS 2023 – 2030 was a collective engagement and consultation between and amongst the transport sector, government institutions and other key stakeholders in the public and private sector, as well as academia. The involvement of UN Agencies as provided for by the 2\textsuperscript{nd} United Nations Decade of Action for Road Safety 2021 – 2030 was particularly impressive and a serious demonstration of cascade of commitment from global to continental and national level. United Nations Economic Commission for Africa (UNECA) and World Health Organisation (WHO) Eswatini deserve special mention in this regard. This strategy takes into account all the relevant policies, protocols and other mandates for which the transport sector is responsible. The strategy reflects the strategic direction and actions to be undertaken as the country seeks to reduce road fatalities, injuries and crashes, and in the process make our road network safer.
2. Vision

All fatal and serious injury on the road is preventable. It is an intolerable burden on our communities, and an unacceptable price to pay for economic progress and development. Our vision is:

*The elimination of fatal and serious injuries on Eswatini’s roads by 2063*

To realise this vision, we need a transformational approach. We need to stop the safety situation from worsening further. Then we need to locate, target and progressively eliminate serious road trauma from our society.

The goal of eliminating fatal and serious injury on the road is consistent with our approach in Eswatini to other major public health issues, like HIV/AIDS. Twenty seven percent (27%) of our adult population live with this disease, but our rate of improvement in pursuit of eliminating HIV has been dramatic.

New infections were almost halved between 2014 and 2018, on the path to the national goal of ending HIV AIDS as a public health threat. By 2020, a decade ahead of schedule, Eswatini and Switzerland were the first countries to achieve the global HIV “95-95-95” targets regarding status knowledge, treatment, and viral load.

Our response to the road traffic safety crisis is well behind our response to the HIV AIDS crisis. An evidence-based multisectoral approach is needed, with political will, government policy, and investment decisions backed up by a strong institutional response. This first national road safety strategy starts us on our path, a path towards the elimination of fatal and serious injury on our roads.

2.1 Sustainable Mobility

As a relatively small country, Eswatini relies on its membership of multilateral organisations and participation in international affairs to inform our approach to major issues of the day. We adapt proven ideas and frameworks and make them our own.

An essential reference point for this national road safety strategy is the decision made in November 2020 that the Kingdom of Eswatini would ratify the 2016 Road Safety Charter of the African Union. With its enduring platform, addressing critical governance issues such as institutional leadership and funding, the Charter is a guiding light for this strategy. Africa’s development blueprint Agenda 2063 gives us a date for us to realise our ultimate goal.


This strategy sets out the strategic goals and directions which we shall follow as we walk the path towards the elimination of fatal and serious injury on Eswatini’s roads.
A health issue, a mobility issue, a development issue, and a sustainability issue

Road traffic injury is a non-communicable disease which disproportionately affects the youngest, poorest and most vulnerable members of the community. The World Health Organisation estimates that 1.35 million people are killed on roads each year, and road traffic injury is the leading cause of death for children and young adults aged 5-29 years of age.

Africa has the highest per capita rate of road fatalities, where road traffic injury is the tenth highest cause of death and is projected to increase over the next decade without significant intervention. Africa also has the highest proportion of pedestrian and cyclist deaths in the world – 44% compared to 26% globally.

Against this backdrop, the Sustainable Development Goals agreed by the UN in 2015 is significant for this strategy in two respects.

Firstly, the SDGs formally recognised road traffic injury as a global development issue for the first time.

Road traffic injury is a gateway to poverty within households. It robs communities of breadwinners and creating a burden of care on others. Preventing road traffic injury is an important anti-poverty and pro-development task.

Secondly, the SDGs located road traffic safety within a wider sustainable transport framework, where the principal concerns are issues such as urban planning, land use and mobility systems. Road traffic safety is a public health issue and, particularly in rapidly urbanizing environments, needs to be addressed as part of a wider sustainable mobility agenda.

SDG 3 Good Health and Wellbeing includes a target of halving road traffic fatalities by 2030, and a Global Plan has been developed for achieving this.

SDG 11 Sustainable Cities and Communities includes a target of safe (free from fatality or injury), affordable, accessible and sustainable transport systems by 2030.

These goals and targets are supported by voluntary road safety targets developed through the World Health Organisation. This strategy aligns Eswatini’s road safety agenda with the 2030 Sustainable Development Agenda, and creates a platform to pursue our road safety goals in the context of the health and wellbeing of our country as a whole.
2.2 Safety Targets

This strategy adopts the 2030 road safety targets prepared by the United Nations under the Sustainable Development Goals.

We seek to achieve a 50% reduction in road deaths and serious injuries. Taking the years 2019 to 2021 as a baseline, this equates to no more than:

- 150 fatalities and 530 serious injuries by 2026
- 100 fatalities and 355 serious injuries by 2030.

*Historical and Targeted Fatalities & Serious Injuries 2011-2030*

These are the headline “safety outcome” targets. Eswatini has a lot of catch up to do. We must be able to demonstrate progress towards these targets over the first years of this strategy, and build a strong foundation as we proceed. The initial focus of this strategy will be to do strengthen governance and leadership arrangements, put monitoring and evaluation strategies into place, review applicable laws and safety practices, and make funding and investment arrangements.

Our mid-term goal as we implement the strategy is therefore to lay the platform for significant safety improvement. A series of supporting “safety performance” targets, based on the Voluntary Road Safety Performance Targets prepared by the WHO, have been prepared. These draw attention to critical areas of action which we must make concrete progress on. A mid-term horizon allows us to put the foundations in place, assess progress, and delivery concrete safety improvements over the course of this decade.

These outcome and performance targets will be reinforced by “delivery” targets, which will be set out in an Action Plan, with government agencies and relevant stakeholders accountable for delivering major road safety development projects.
<table>
<thead>
<tr>
<th>Safety Performance Indicator</th>
<th>2030 Target</th>
<th>Mid-Term Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TARGET 1</strong> 2020 Multi-sectoral National Road Safety Plan</td>
<td>Completed</td>
<td>A three-year Action Plan is signed off to begin implementation of this Strategy</td>
</tr>
<tr>
<td><strong>TARGET 2</strong> 2020 Accession to UN safety legal instruments</td>
<td>At least 1</td>
<td>Work begins to accede to UN vehicle safety conventions</td>
</tr>
<tr>
<td><strong>TARGET 3</strong> 2020 Safety star rating for highway network</td>
<td>At least 3-star</td>
<td>An IRAP study is conducted on Eswatini’s major rural and urban roads</td>
</tr>
<tr>
<td><strong>TARGET 4</strong> 2020 Travel on main roads that meet a 3-star safety rating or better</td>
<td>&gt; 75%</td>
<td>An IRAP study is conducted on Eswatini’s major rural and urban roads</td>
</tr>
<tr>
<td><strong>TARGET 5</strong> 2030 Application of global vehicle safety standards</td>
<td>100%</td>
<td>Formal decision to begin implementing United Nations vehicle safety standards</td>
</tr>
<tr>
<td><strong>TARGET 6</strong> 2030 Vehicles exceeding the posted speed limit</td>
<td>- 50%</td>
<td>A baseline measure is taken, and Police equipped and resourced to enforce existing laws with supporting behaviour change programs. Consideration of permanent speed cameras to be made to augment speed enforcement</td>
</tr>
<tr>
<td><strong>TARGET 7</strong> 2030 Motorcycle riders correctly using helmets</td>
<td>100%</td>
<td>Motorcycle use is closely monitored and helmet wearing regularly checked</td>
</tr>
<tr>
<td><strong>TARGET 8</strong> 2030 Motor vehicle occupants using seatbelts / child restraints</td>
<td>100%</td>
<td>Seatbelt laws are strengthened, a baseline measure is taken, and Police resourced to enforce existing laws with supporting behaviour change programs</td>
</tr>
<tr>
<td><strong>TARGET 9</strong> 2030 Alcohol related road fatalities and injuries</td>
<td>- 50%</td>
<td>A baseline measure is taken, and Police equipped and resourced to enforce existing laws with supporting behaviour change programs</td>
</tr>
<tr>
<td><strong>TARGET 10</strong> 2030 Mobile phone use (talk/text/read) while driving</td>
<td>- 50%</td>
<td>A baseline measure is taken, and Police resourced to enforce existing laws with supporting behaviour change programs</td>
</tr>
<tr>
<td><strong>TARGET 11</strong> 2030 Laws in place restricting professional driving time</td>
<td>In Place</td>
<td>Thorough review conducted of all aspects of safety related to commercial freight and passenger transport</td>
</tr>
<tr>
<td><strong>TARGET 12</strong> 2030 Time between crash and first professional emergency care</td>
<td>Metric/Target to be developed</td>
<td>A baseline measure is agreed within the health sector and then taken</td>
</tr>
</tbody>
</table>
2.3 Guiding Principles

Eliminating fatal and serious injury on the road will take some time, and requires some fundamental change to how the road traffic system is managed.

We shall rely on four of some of the Safe System Approach guiding principles in our decision-making and actions over the life of the strategy, and as we implement this strategy and deliver commitments through road safety action plans.

a. **People make mistakes when using the roads which can lead to crashes** – the road traffic system needs to be designed to prevent crashes and prevent serious injuries if crashes do occur.

b. **The human body has a limited ability to tolerate crash impacts** – speed management is critical to this along with a focus on the needs of the most vulnerable road users such as pedestrians and children

c. **There is a shared responsibility amongst those who design, build, manage and use the roads and vehicles to prevent or reduce crash impacts** – the obligation is on government to lead and encourage safety measures from the private sector and community interests.

d. **All parts of the traffic system need to be strengthened** – the aim is to multiply the safety benefits and ensure that road users are protected if one part in the system fails.

The overall philosophy being adopted internationally is described as the “safe system” approach to road safety.

This approach looks well beyond individual behaviours on the road. It considers every element of the road traffic system (management, road design and maintenance, vehicle, user, speed, medical care) which affects the safety of all people using the road.

The safe system approach is focused on the ultimate goal of eliminating serious road trauma, largely by controlling the energy impact on the human body when a crash does occur.\(^1\)

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3. Critical Issues

This strategy recognises that systemic change is required to tackle our growing road safety problem. Eswatini is confronted with some serious road safety issues, which must be strategically addressed.

3.1 Too much preventable trauma

Eswatini is suffering too much preventable road trauma, and it is getting worse. There are significant deficiencies with our road safety data in Eswatini, which makes us more reliant on estimates, such as that made by the World Health Organisation (WHO). The most recent estimates from WHO suggest that in a region of the world with low levels of safety, there has been a steady increase in the road fatality rates in Eswatini.2

\[ \text{WHO Estimated Fatalities / 100,000 Population in SADC} \]

The need for a significant upgrade in data systems is illustrated by the significant gap between the fatalities which are recorded by Police and the fatalities which are estimated by the WHO, and the Global Burden of Disease study Institute for Health Metrics and Evaluation (IHME).3 While these are estimates only, it highlights the need for considerable attention to be given to improving Eswatini’s road safety data systems.

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2013</th>
<th>2016</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Police Recorded Fatalities</td>
<td>216</td>
<td>197</td>
<td>203</td>
<td>187</td>
</tr>
<tr>
<td>WHO Estimated Fatalities</td>
<td>320</td>
<td>334</td>
<td>361</td>
<td>384</td>
</tr>
<tr>
<td>IHME Estimated Fatalities</td>
<td>432</td>
<td>411</td>
<td>393</td>
<td>397</td>
</tr>
</tbody>
</table>

2 See Global Health Observatory [https://www.who.int/data/gho](https://www.who.int/data/gho)
In 2019, road traffic injury in Eswatini was estimated as the:⁴

- 2nd biggest cause of death for people aged 5-14
- 3rd biggest cause of death for people aged 15-49
- 6th biggest cause of injury (disability adjusted life years) for the whole population
- 9th biggest cause of death for the whole population.

In 2019, the economic cost of crashes in Eswatini was estimated to be $485 Million⁵ which was 10% of the country’s gross domestic product that year, nearly one quarter of the country’s exports.

Despite current deficiencies, the data that is recorded by Police informs us of the issues which we face. Pedestrians are most at risk, comprising 2 out of every five fatalities. While there has been no systematic study of the risks which pedestrians face in Eswatini, experience across Africa suggests there are two major issues:

- There is a lack of good footpaths for walking along our major roads, and safe facilities for crossing our major roads.
- Motor vehicles are travelling too fast in areas where there are larger numbers of pedestrians, such as schools, churches and markets.

The high proportion of motor vehicle occupants, particularly passengers, is also a major concern. Again, African experience suggests speeding is highly likely to be a major factor in these fatalities. Alcohol consumption by drivers is also highly likely to play a major factor. WHO reported a 45% increase in alcohol consumption in Eswatini between 2010 and 2016, and estimates that alcohol was a factor in over one quarter of all road traffic fatalities in 2016 alone. The use of seatbelts, particularly in commercial transport operations, is also likely to play a major role.

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⁵ This is based on Dadhah & McMahon, The True Cost of Road Crashes: Valuing life and the cost of serious injury. It uses the WHO estimate of 384 fatalities, the GDP per capita figure for Eswatini in 2019 of USD3890, and assumes that there are fifteen times more injuries than fatalities.
3.2 Weak safety systems

There are many different reasons for our problem which relate to the wider socio-economic conditions within Eswatini, the impact these have on health outcomes, and the state of our overall mobility system – the ways in which people and goods move.

As these wider issues are addressed, safety should improve incrementally, but we must actively address the immediate issue. Our road traffic safety systems are too weak to control the impact of an increasing population and increasing motor vehicle traffic. Several key aspects of this issue are set out below.

3.2.1 Governance

The Eswatini Road Safety Council is mandated as the lead agency for road safety in the country but the mandate is too limited and its budget too small to allow it to effectively lead the national road safety effort. There is insufficient accountability within government for the delivery of vital safety services.

3.2.2 Compliance

Antiquated motor vehicle and driver licensing regulatory systems make it very difficult to assure that only roadworthy vehicles are being operated on the road, and that they are only being driven by fully competent drivers. This directly affects the safety of commercial passenger and freight transport operations.

3.2.3 Behaviour

Legislative gaps with good practice remain for user behaviour, such as seatbelt requirements for backseat passengers, penalties are too low for the scale of the risk involved, particularly for speeding, and traffic enforcement is not sufficiently strong to lead a major behaviour change program across the country.

3.2.4 Roads

The road network has been designed and managed to support more motor vehicles traveling faster, and does not support the safe movement of people. The inherent safety of the infrastructure needs to be assessed, and a series of design and speed management reforms introduced through a dedicated safety works program which must include frequent maintenance of roads and address road safety issues.

3.2.5 Victim support

Emergency care for victims of road crashes needs to be considerably strengthened as part of a Kingdom wide initiative which addresses trauma management facilities as well as professional capacity and training.

3.2.6 Research and data

While there is sufficient information to promote a strong safety agenda now, not enough is known about key road safety issues to drive continued improvement into the future. Major upgrades are needed in crash and injury data systems (data collection, collation, analysis and use).
4. Strategic Directions

We must direct our efforts to those areas and activities where we can be sure that action now will either:

- enable significant improvement in the future, or
- deliver substantial benefits now.


4.1 Coordinating a multisectoral and institutional response to the crisis

The mandate and resources of the Road Safety Council need to be considerably strengthened, in line with Eswatini’s obligations under the African Road Safety Charter. The Road Safety Council Act 1983 must be revised, and a modern governance structure put in place to coordinate key government agencies, and create an ongoing safety partnership with the private sector and community interests.

A mainstreaming program is also needed across society. Each government agency (such as the Ministry of Education or Town Councils) and major corporation should be able to publicly demonstrate that they have integrated road safety expectations into their procurement processes, and are building road safety knowledge and capacity from within their own workforce, capable of building road safety commitment within the wider community.

4.2 Building professional road safety capacity and leadership

Every major profession engaged in road safety must have its own knowledge base and training programme, including roads and traffic engineers, motor vehicle regulators, traffic police, emergency medical specialists and academia. This needs to be augmented with ongoing national road safety leadership and management training and development programmes. These programs need to ensure senior leaders within government agencies are in a position to advocate and promote a systems-based road safety response from decision makers and influencers within government and society.

4.3 Investing in strategic information and research

We need to significantly increase our capacity to collect, collate, analyse and use road safety data, and ensure that our crash and injury data systems bring together police and health data. A road safety data management system needs to bring all relevant data together including vehicles and drivers and operators; crashes and injuries and deaths; safety performance targets such as seat belt wearing rates and speeding; and the economic impacts of road traffic injury.

4.4 Prioritising road safety in all transport and infrastructure decisions

We need to make budget arrangements for sustainable financing through domestic sources to get our institutions and services focused on a safe road traffic system. A means has to be found to create a separate budget line for road safety, using for example an allocation of 10% of road maintenance resources, regulatory fees and charges, an allocation from the
fuel levy, MVA premiums, or a combination thereof. Opportunity to supplement these internal sources will come from the government giving greater priority to road safety in our work with development partners.

4.5 Transforming the safety of the road network
We need to comprehensively review the safety of the road network, and identify medium and long-term safety improvement programs, using International Road Assessment Program protocols which form the basis of global infrastructure safety targets. This process needs to capitalise on progress to date and transform the road safety engineering capacity within Eswatini, focusing on the safety of the most vulnerable users. Safety focused improvement programs need to be given major project status, initially in demonstration projects, and then as long term improvements are rolled out.

4.6 Regulating the safety of vehicles and transport operations
A comprehensive improvement to vehicle safety standards is needed, firstly to ensure that any vehicles entering the country meet appropriate UN regulated standards, and secondly to ensure that the light and heavy vehicle fleets are subject to ongoing maintenance and periodic inspection. The initial compliance focus will need to be on commercial vehicles, but a much wider issue is the quality of the passenger transport system in Eswatini. A comprehensive review of the safety of passenger transport operations is needed to promote greater use of high occupancy vehicles, and to ensure that these operations are safe. Within a safety focused project, a travel demand survey would be valuable.

4.7 Setting and enforcing safety expectations of motorists
The driver licensing system needs to be transformed in line with new regulations, including the delivery of electronic registries and licensing systems which are capable of verifying driver identity and competence. This reform needs to be reinforced with ongoing strengthening of laws regarding alcohol, speed and seatbelts and enforcement and compliance operations. The capacity of Traffic Police to strictly enforce speeding, drink driving and seatbelt laws needs to be considerably strengthened and behaviour change programs introduced to promote driver and passenger safety.

4.8 Strengthening the post-crash response
The quality of the emergency medical response to a crash has a direct bearing on fatality and serious injury outcomes. A single national emergency response number is required, and first responder training provided in the community, supported by Good Samaritan laws which support a community based response. Ambulance and other transport systems need to be improved, and investment is required to equip and train medical staff in national and sub-national health facilities to respond to road traffic injury. A national trauma registry is required to complement improvements in crash data systems.
5. Strategy Implementation

In line with our obligations under the African Road Safety Charter, the first focus of this strategy will be establishing a firm institutional response to the road safety issue.

5.1 Governance

The Road Safety Council Act 1983 will be amended to reconstitute the Road Safety Council with a much stronger mandate to lead Eswatini’s national road safety efforts.

5.1.1 Road Safety Council

The Road Safety Council will be established as a council under the Public Enterprises Act. It is proposed that members of the Council, to be appointed by the Minister, comprise the heads of public agencies to promote greater accountability:

- An Independent Chair
- Head of Traffic Police (Ex-Officio)
- Head of Roads Authority (Ex-Officio)
- Head of Transport Department (Ex-Officio)
- Chief Executive of Motor Vehicle Accidents Fund (Ex-Officio)
- Senior executive within the Ministry of Health (nominated by Director General)
- Executive Director of Eswatini Road Safety Council (Ex-Officio)

The functions of the Council will be to:

a. Bring all stakeholders together to advise the Minister on, and coordinate implementation, of Eswatini’s road safety policies, standards, strategies and plans.

b. Review, develop and maintain safety standards and compliance requirements for all aspects of road safety in Eswatini, including roads, vehicles, drivers, and post-crash services.

c. Promote a no-blame response to road safety issues from all stakeholders who are in a position to significantly improve the safety of Eswatini’s road users.

d. Advise the Minister on road safety funding and investment plans required to achieve Eswatini’s road safety targets, and on the allocation of public funds to government agencies for the purposes of achieving those targets.

e. Develop and implement a monitoring and evaluation framework for road safety in Eswatini, including oversight of data management systems, crash data reporting, and a program to track agreed road safety indicators and deliverables.

f. Promote and commission road safety research and development projects in Eswatini, including demonstration projects and capacity building programs in collaboration with relevant stakeholders.

The powers will reflect the final composition of the Council, recognising that stronger oversight powers will be needed if the heads of agencies are not appointed.
5.1.2 Road Safety Forum

It is proposed that the Road Safety Council, and the accountable public agencies associated with it, will be complemented by a stakeholder led Road Safety Forum, supported by the Executive Director of the Council as the primary consultative forum on road safety, and the key point of engagement with the community on significant road safety issues.

Membership of the Forum would be open to any incorporated body which commits to the goals of the Eswatini national road safety strategy and so may comprise:

- Representatives of the transport industry and of transport consumers
- Government agencies such as Ministries of Education, Emergency and Rescue Services, Land Management, Finance, Eswatini Standards Authority etc.
- Academia who will offer assistance on the research aspect.
- Any other private sector interests, or non-government bodies, who wish to support achievement of Eswatini’s road safety goals.

5.1.3 Roles and responsibilities

5.1.3.1 Public Agencies

All stakeholders have a vital role to play. The following public agencies have a particular responsibility to promote the safety of all road users.

<table>
<thead>
<tr>
<th>National Road Safety Council</th>
<th>Lead agency responsible for the national road safety effort</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ministry of Public Works and Transport</td>
<td>Oversight of road safety strategy and contributions of departments and agencies within the Ministry</td>
</tr>
<tr>
<td>Roads Department</td>
<td>All aspects of planning, design and management of national road network</td>
</tr>
<tr>
<td>Road Transport Department</td>
<td>All aspects of regulation of motor vehicles, motor vehicle drivers and commercial operators</td>
</tr>
<tr>
<td>Royal Eswatini Police Service</td>
<td>Enforcement of road traffic law</td>
</tr>
<tr>
<td>Ministry of Health</td>
<td>Public health support (non-communicable disease) and emergency medical services</td>
</tr>
<tr>
<td>Ministry of Education and Training</td>
<td>Safe movement of students to and from educational centres, and safety research and development</td>
</tr>
<tr>
<td>Ministry of Justice and Constitutional Affairs</td>
<td>Oversee preparation and administration of legislation to support community safety on the road</td>
</tr>
<tr>
<td>Motor Vehicle Accidents Fund</td>
<td>Support crash victims through national injury insurance scheme</td>
</tr>
<tr>
<td>Town councils</td>
<td>Provide local road services</td>
</tr>
<tr>
<td>Academia</td>
<td>Support research and curriculum development</td>
</tr>
<tr>
<td>Eswatini Standards Authority</td>
<td>Develop Eswatini National road safety standards</td>
</tr>
</tbody>
</table>
5.1.3.2 Private Agencies

Aside from the responsibilities held by publicly accountable government agencies, several key organisations are likely to be important if we are to successfully tackle our road safety problem.

| Business Eswatini / Federation of Eswatini Business Community | Coordinate greater private sector commitment to and involvement in road safety |
| National Road Transport Council                                | Coordinate greater transport sector commitment to and delivery of safe road transport services |
| Coordinating Assembly for Non-Government Organisations         | Promote societal and community commitment to and involvement in road safety |

Members of these or other organisations outside government are encouraged to engage directly through the Road Safety Forum.

5.2 Funding and Investment

Road traffic injury costs Eswatini 10% of our GDP. We cannot afford to not invest in road safety. The only question is how. Existing funding mechanisms within the transport sector disconnect the charges which users of the transport system pay from the services they receive, and do not work in favour of safety. A national road safety fund needs to be established in order to support the operations of a much stronger Road Safety Council. The fund should be overseen by the Council, and investment in road safety allocated according to transparent rules.

Road safety cannot be left to annual budgetary decisions, or to voluntary contributions from concerned agencies. Attention also needs to be given to increasing the importance of safety within all land transport funding decisions. 10% of all capital investment budgets should be paid into a national road safety fund.

5.3 Monitoring and Evaluation

An annual progress report on road safety will be prepared and published by the Council within three months of the end of the calendar year. As well as statistical data, it will report on the implementation of this strategy and related action plans. Further periodic reports will also be published.
6. Strategic Actions

Implementation of this strategy will be further detailed in two road safety action plans, setting out agency accountability for major road safety focused development projects. We can however look out towards the first action plan and identify critical major initiatives which will need to be incorporated. The first priorities are drawn from the African Road Safety Charter.

The implementation priorities for this strategy are to:

i. Review legislative and institutional arrangements relating to the Road Safety Council, to strengthen its legislative mandate, stakeholder governance and coordination, and human and financial resources.

ii. Establish ongoing national road safety funding arrangements for the Council, based on internal revenue sources, and the primacy of Council review and advice to government on the allocation of safety funding.

iii. Establish an ongoing road safety capacity building program under the Council, to ensure that key agencies and stakeholders considerably strengthen their technical road safety capability and leadership response to the issue.

Other major initiatives which will be pursued are:

iv. An iRAP (International Road Assessment Programme) study of a sample of the most highly trafficked main roads, and the preparation of a road safety investment programme to improve safety star ratings for all road users.

v. An AVIS (Assessment of Vehicle Inspection Systems) study of vehicle safety standards and inspection programs to prepare a prioritised schedule of vehicle safety reforms (as has been done in several African countries).

vi. An external good practice review of Eswatini’s driver licensing system, to identify the actual processes and electronic systems and registries required to manage the licence life-cycle, and establish a pathway for improving identify safety standards.

vii. An external review undertaken by a senior traffic police specialist of the Traffic Police function in Eswatini, addressing institutional/organisational/operational issues as well as capacity building.

viii. A monitoring and evaluation project to establish and track baselines of speeding, drink driving and seatbelt wearing.

ix. A project to diagnose current crash data systems and make specific recommendations regarding a new or greatly improved system.

x. A sustainable mobility review of public transport systems (both formal and informal) to promote greater use, and significant safety improvement.

xi. Implementation of a single national emergency medical response number, measuring time between crash and care, and developing/training networks of voluntary first responders in the community.

xii. A speed management review, including good practice speed limits, and piloting supportive infrastructure for integration in the road safety investment programme.
7. Conclusion

The strategy addresses the critical weaknesses in the road safety space in Eswatini and effective implementation arrangements are required to ensure optimum benefit of this ground-breaking first National Strategy on road safety. One person dying on our roads is one too many. The target of 50% reduction of road deaths and serious injuries is a guideline to effectively drive towards zero. No death is acceptable on the roads because it is totally avoidable. The Safe System Approach is a winning formula that shall be adopted as implementation is carried out and for future strategies to succeed this in 2030. Continuous research shall be undertaken to inform effective intervention of road safety mitigation measures.