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THE BURDEN OF ROAD TRAFFIC INJURIES IN GUYANA: TIME TO PRIORITISE ROAD SAFETY INVESTMENTS

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Background Guyana, like other low- and middle-income countries (LMICs), is rapidly motorising with limited systemic support for road safety initiatives. Understanding the epidemiology of road traffic injuries (RTIs) is an important first step in prioritising investments.

Aims/Objectives/Purpose To quantify the burden of RTIs in Guyana and inform priority action areas for prevention efforts at the national level.

Methods A review of PubMed, grey literature, and internet search engines was performed. Ministry of Health (MoH) data for select years were accessed electronically, and police data from 2000–2010 were obtained during a site visit. A stakeholder analysis was conducted following meetings with representatives from key ministries and civil society.

Results/Outcomes MoH data indicates RTIs are a leading cause of death among persons aged 5–64 years. According to police data, there were 115 road traffic (RT) deaths, or 14.8 RT deaths per 100 000 population in 2010; this rate has been stable for the past 3 years, but represents a decrease from 22.8 earlier in the decade. For the period 2000–2010 pedestrians accounted for the largest proportion of RT deaths, followed by motorcycle users and bicyclists. While conscientious, the lead agency is understaffed and underfunded.

Significance/Contribution to the Field RTIs are a major concern in Guyana. We offer the following priority areas for consideration in Guyana: improving data systems; capacity building for road safety; investing in the Emergency Medical Systems; improving infrastructure; fostering greater inter-sectoral collaboration; and increasing funding for injury prevention programmes. These areas might hold relevance to other LMICs in the region.