IJADR

International Journal of Alcohol and Drug Research

The Official Journal of the Kettil Bruun Society for Social and Epidemiological Research on Alcohol

https://doi.org/10.7895/ijadr.503

IJADR2023, 11(2), 89-90

Tackling alcohol-related road traffic injuries is an urgent public health priority in Tanzania and across East Africa

Commentary

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The burden of road traffic injuries across Africa is a significant public health concern, with very high mortality and morbidity rates. In East Africa specifically, there is emerging research and growing interest in outlining the scope of the problem of road traffic injuries, the risk factors and consequences.

In the new article by Staton and colleagues (2023), titled "Road traffic injuries and alcohol use in the emergency department in Tanzania: A case-crossover study" the authors use an intriguing approach to examine the associations between alcohol use and road traffic injuries among patients in need of medical care in Tanzania. The data was collected about 10 years ago, but there is no indication that patterns of alcohol use or road traffic injuries have changed in the past decade so that more recent data would alter the findings or yield different conclusions. Taken as a whole, the findings from the new study are very troubling and underscore the significant scope and urgency of addressing alcohol-related road traffic injuries in Tanzania. There are four key points to highlight in response to the important findings presented in this new article (Staton et al., 2023).

First, the study found that any amount of alcohol use was associated with increased reporting of road traffic injuries (Staton et al., 2023). In fact, the study reported that motorists have six times the odds of a road traffic injury due to alcohol and that this association is dose-dependent (Staton et al., 2023). This finding validates previous research and clearly demonstrates that alcohol is a key contributor to road traffic injuries even for low alcohol amounts. It is often assumed that only heavy alcohol consumption leads to traffic or other injuries. As such, this finding is of great importance and needs to be incorporated into health promotion campaigns for injury prevention. It would be transformative for Tanzania and for East Africa if there were more intentional coordination of alcohol-prevention messaging and sharing of the facts about the burden of road traffic injuries as well as other forms of alcohol-related harm. Road traffic injuries are less often specified in the rationale for alcohol policy development and overall alcohol harm prevention strategies, despite its burden. As such, a coordinated approach for outlining key interventions and countermeasures will be important.

ISSN: 1925-7066

Second, as Staton and colleagues recommend, there is a need to implement strict rules regarding drink-driving and related enforcement policies that have been shown to be effective in other countries (Staton et al., 2023). The World Health Organization lists enforcing drink-driving countermeasures as one of five specific cost-effective interventions and a "best buy" for preventing alcohol-related harm as part of its SAFER initiative (WHO 2018). However, since only about half, or 56%, of stakeholders working in alcohol prevention across East Africa are familiar with the SAFER initiative (Swahn et al., 2023), additional efforts to share best practices and cost-effective interventions are needed. In recent research across East Africa, enforcing drink-driving countermeasures were not as clearly prioritized by stakeholders as other forms of alcohol prevention and harmreduction strategies (Swahn et al., 2023). Perhaps this is the case as research on road traffic injuries is still emerging in the region and findings have not been broadly disseminated to stakeholders and decision makers.

Third, there is emerging research across East Africa highlighting the scope of road traffic injuries, its risk factors, and consequences. In Rwanda for example, road traffic incidents were identified as the most common mechanism of injury (Uwamahoro et al., 2021). In Kenya, road traffic injuries were identified as a growing cause of morbidity and mortality using social media as a new and innovative approach for systematically collecting data (Lee et al., 2022). In Uganda, current drinking was associated with injuries among commercial motorcyclists (Tumwesigye et al., 2016). Similarly, in Kenya alcohol was associated with road traffic injury deaths (Kiama, 2022). In Tanzania, studies have examined alcohol use among injury patients, indicating that alcohol is the leading modifiable risk factor contributing to death and disability in the region (Staton et al., 2018; Staton et al, 2023). As such, the country-specific evidence base is growing across East Africa and needs to be

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disseminated to stakeholders and policy makers. These and other studies have found innovative approaches to contribute significant findings to the field of injury prevention and have in many cases articulated a strong need for addressing alcohol-related harm specifically. Efforts should now be prioritized to include shared approaches and definitions to accelerate research, allow for aggregate findings across East Africa, and facilitate cross-country comparisons of alcohol-related road traffic injuries (Vissoci et al., 2017).

Fourth, efforts to address alcohol-related harm in East Africa have shown substantial variability in readiness across the region (Swahn et al., 2022). East Africa needs to strengthen its readiness and capacity for preventing alcohol-related harm according to research of stakeholders from five countries. Capacity building needs to occur across several key domains to mitigate the limited availability of human, technical and informal resources and also in terms of limited support or attitudes toward alcohol prevention and the willingness to address the problem (Swahn et al., 2022). Tanzania specifically lags behind several neighboring countries including Kenya and Uganda with respect to alcohol legislation, mandates and policies, and with respect to the availability of scientific data on alcohol prevention. These are key factors that need to be addressed to tackle alcohol-related road traffic injuries. Given the fragmented resources and the limited capacity for addressing alcoholrelated harm, including road traffic injuries, within and across countries in East Africa, the development of an alcohol-prevention research agenda for East Africa should be prioritized (Swahn et al., 2023). A shared alcohol research agenda can harness resources, leverage capacity and strengthen output across the research continuum to maximize impact and reduce the overall burden of alcoholrelated harm.

To conclude, Staton and colleagues (Staton et al., 2018; Staton et al., 2023; Vissoci et al., 2017) should be commended for their ongoing and impactful work in injury prevention research that addresses alcohol harm in Tanzania and that serves as a model for other low-resource settings. It is through high-quality research that the case can be made for implementing national and regional priorities that can tackle the disproportionately high levels of alcohol-related harm in Tanzania and across East Africa.

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