SELECTED ROAD SAFETY STORIES from UGANDA 2021-2022
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The stories appearing in this compendium are some of the better ones out of nearly 50 assessed for quality. They are the result of training of 29 journalists between 2021 and 2022 in improving media coverage of road safety in Uganda. The African Centre for Media Excellence conducted the training as part of an 18-month project funded by the Global Road Safety Partnership. The journalists were drawn from print, radio, television, and online media platforms.

The stories were examined and scored according to the following criteria: sourcing; data use; background and context; framing; human interest; general understanding of story; clarity; appropriate language use; and evaluation of key behavioural risk factors i.e. speed, drink-driving, seatbelt-use, and crash-helmet use.

A number of these stories are of the enterprise type, where the journalists conceptualised a story idea, developed it through assembling facts and considering different perspectives. They did not depend entirely on news occurrences, press releases or conferences but they explored the forces that shape certain happenings, events, and trends in road safety. The stories are either explanatory, backgrounder, educational or representative of those whose voices are hardly heard.

On sourcing, the writers use different strong sources, including both men and women. This strengthened the stories with different perspectives — another sign of enterprise. Voices heard include those of state authorities, outside experts, industry actors, victims, and members of the public.

The stories also show good use of relevant data including police annual crime reports with reference to road safety; national health statistics; and data from international agencies. This allowed for identification of trends that would otherwise have been possible. The story titled ‘750 Ugandans killed every year between 6pm and 8pm,’ is case in point.

The stories that made it to the top also provide background and context to help the audience understand where the story is coming from. Stories such as ‘Road crashes kill people more than COVID-19’ and ‘Seat belts save lives’ illustrate the importance of context and background, which enable the audience to relate to issues under discussion. Writers of the best stories also framed the issues in such a way that they advocated policy action. It is such framing that brings out stories about the plight of people with disabilities on the roads. It is in the same vein that voices of amputees of road crashes that feel abandoned are amplified to seek government intervention in the
story titled ‘We are abandoned, say accident amputees.’

Several journalists wrote human interest stories which, combined with other elements of good writing, tell powerful and moving tales of what crash victims go through. ‘Will Hussein walk again?’ and ‘Amputees self-networking’ are stories of both sadness and resilience against all odds. But these human interest angles in stories also point to human efforts and advances in sustaining life after crash disasters.

Journalists were expected to use the appropriate language of road safety in their stories. For instance, using crash rather than accident. Good stories did exactly that. Many other writers stuck to the old usage, something that may have been the case of editors, themselves not trained on road safety issues, sticking to the familiar terms. Indeed, journalists were expected to identify the relevant risk factors in their stories. A good road safety story should have related to at least one of the four risk factors mentioned in paragraph two above. Such mention is important to link the road safety issue under discussion to risk factors.

Several other weaknesses were also observed, especially in stories that did not make it into this compendium. First, several stories were based on police reports or news briefings where the writers did not develop the stories beyond what was given. Such stories were largely single-sourced and lacking in enterprise. Some of those stories could have made very good reads. One such story was titled ‘Two cattle dealers perish in Ssembabule crash.’ The reality, however, was that these were two brothers, each on a motorcycle and moving in opposite direction. They were involved in a head-on collision that killed both. It is an oddity even in the area of road safety for brothers to die like that. The story was undermined by poor handling.

Another story quoted a road safety workshop facilitator and bus driving trainer who said that poor pay and working conditions of drivers are a major factor of bus crashes in Uganda. The writer of the story reported only that without taking it further. Yet this authoritative source had given an important tip.

Overall, majority of the better stories came from the print media. This is possibly because newspapers have systems to give editorial support to their journalists to develop stories more meaningfully.

All said, all the stories evaluated show a growth in road safety as an area of journalistic coverage in Uganda. And it is hoped that this compendium, which will be updated after more journalists (including editors this time around) are trained in 2023, will showcase even better-quality work. This is just the beginning. ACME trusts that many journalists will draw some inspiration from the stories in this compilation to do more and better reporting to contribute toward making Uganda’s roads safe for all users.

African Centre for Media Excellence
Kampala
September 2022
Deaths in road accidents have continued to climb, new police data show, spiked largely by speeding, drink-driving, non-use of helmets, overloading, poor visibility, and lack of training.

Grace Kizza, 28, is one of the hundreds of boda boda crash victims that the national referral hospital, Mulago, receives for treatment every month.

Kizza, an online clothes seller, almost lost her right leg when she was knocked off a boda boda by a car, at Upper Kololo Terrace junction traffic lights, in Kampala. She was knocked on October 17, at 7 pm, while rushing home to beat the 7 pm curfew.

“When the traffic lights allowed the boda boda motorcyclist to cross the junction, the speeding car from another side also moved and knocked the motorcycle carrying Kizza. Kizza and the boda cyclist were badly injured. Kizza’s leg broke and her bone was exposed,” Ibra Baguma, Kizza’s brother, said in an interview.

“Rescuers at the scene stole Kizza’s bag, which had Shs 1.8m. They also stole her mobile phone set worth Shs 800,000 and...
later carried the victims into a police patrol car that took them to Naguru hospital for first-aid,” he said.

“We paid Shs 200,000 for Kizza’s admission and the boda cyclist at Naguru hospital. We also paid Shs 580,000 for Kizza’s first-aid treatment, before being transferred to Mulago hospital for an orthopedic specialist to operate on her leg. The cyclist was discharged with minor injuries,” Richard, the driver of the car which knocked Kizza, said.

Makerere School of Public Health

Esther Bayiga, a research associate in the department of Disease Control and Environmental Health at Makerere University, School of Public Health (SPH), said road crashes in Uganda and Africa kill more people than Covid-19 and Malaria.

“According to the police Annual Crime and Road Safety Report 2020, a total of 3,663 people were killed in road crashes in just one year and 8,370 people were injured. However, in two years since Covid-19 broke out in 2020, about 3,200 people have died,” she said.

According to the police report, there were over 3,269 crashes in 2020, a drop of 4.1 percent; from the 3,407 accidents in 2019. The report says most people killed in road crashes were pedestrians accounting for 34 percent, motorcyclists, 31 percent; and passengers, 25 percent.

Interviewed for this story, the Commissioner in charge of Traffic, Lawrence Nuwabiine, said boda boda cyclists lack skills in traffic regulation because they don’t have leadership and professional training centers.

A UN report found that Uganda loses about 10 people per day in road crashes mainly due to speeding, which is the highest in East Africa.

Richard, driver of the accident car, said he paid Shs 1.2m on Kizza’s leg operation and medication at Mulago hospital. She was later referred to Kiruddu hospital for plastic surgery and grafting.

“At Kiruddu, we paid Shs 2.5m for a plastic surgeon and medication. Since Kizza got the crash, we have spent over Shs 5m on her treatment. The costs are increasing daily since we don’t know how long it will take her to recover. Exposed bones are very expensive to treat,” Baguma said.

Matayo’s wife, assists him to lift his hand at casualty ward

Another boda victim, Matayo Kikumbe, 30, was transferred to Mulago hospital from Hoima hospital to get his broken bones fixed by a specialist.

“He knocked a stationary car by the roadside while speeding on his bike. He broke his leg, thigh, arm and ribs. We are looking for Shs 2m, which doctors need, to fix Matayo’s bones,” Matayo’s mother, Night Peshalina, 68, said.

Rick Matovu, 7, was knocked by a hit-and-run boda boda motorcyclist at Kiteezi, Kawempe division, as he was crossing the road to buy tomatoes.

“Matovu’s thigh was broken and doctors want Shs 150,000 to fix it. I am stuck, my husband refused to give me money, saying I am careless with children,” Sarah Namugerwa, Matovu’s mother, said.

Fred Mugenyi, 35, a boda boda rider at Namasuba stage, in Kampala, was knocked by a car at Seguku, Entebbe road on October 17, at 7 pm.

“Doctors said he hurt his spinal cord and broke his legs. His lower body is paralyzed yet we
have spent over Shs 1.2m on different scans, medication, and other tests including Covid-19 and the heart. We are looking for Shs 600,000 for a spinal cord operation,” Mugenyi’s wife, Immaculate Nabisere, said.

**Mulago accident ward**

Dr Alexander Bangirana, the head of Accident Emergencies at Mulago hospital, said doctors are only allowed to ask for money to buy expensive medicines, metals, and sundries to fix broken bones since government hospitals don’t provide such items.

“We provide free human resource services like doctors and nurses because they are paid by the government. If any doctor asks for money for human service, report him. In government hospitals, you don’t pay for specialists and other facilities like theatre, admissions, and dressings,” he said, adding that most people can’t afford to buy expensive implants like metals and sundries such as bandages and plasters to fix bones.

Bangirana said a leg implant costs between Shs 600,000 and Shs 2m depending on the type of injury and implant.

“The more broken parts in your body, the more costly it is to fix them.”

“Special sundries to fix a head injury cost about Shs 1m. The hospital gives about one month for a badly injured patient to stabilize in the Neurosurgical or Orthopedic ward. However, many patients are discharged when they are still depressed and traumatized. Others end up mentally sick or feel victimized especially when they lose arms or legs,” Bangirana said, adding that between September 2020 and September 2021, Mulago hospital received 5,619 road crash victims of whom 3,331 were motorists, while 2,288 were boda boda cyclists or passengers.

Bangirana said the casualty ward still grapples with a daily high turnout of accident victims, which piles pressure on human resources and the few medical supplies.

“You can’t give expected and timely services when patients are overcrowded at the ward, yet doctors are not enough,” he said.

**Cost of motorcycle accident**

An updated 2015 study on the cost of motorcycle accidents in Uganda found that motorcycle accidents are tied to the huge economic and non-economic burden of pain and grief by the crash victims and society.

The study, done by Richard Sebaggala, Fred Matovu and Dan Ayebale, and other researchers from Makerere University and Uganda Christian University, found that “It costs about Shs 7m, ($ 2,800) to treat a boda boda accident victim who is badly injured.”

It also found that the Ugandan economy loses more than Shs 3bn ($1.2m) in terms of lost output due to days spent away from productive work as a result of severe injuries and death.

“If a youth dies in a crash at 35 years and yet life expectancy in Uganda is 67 years, the nation loses 32 productive years of that person, to produce children, pay taxes, build houses and make other developments,” Irene Namuyiga, the Road Safety Engineer and Transport Planner at KCCA, said.

**Road crash loss**

Uganda loses about Shs 5 trillion ($ 1.2bn) due to road crashes annually, according to the Uganda Bureau of Statistics (UBOS), Statistical Abstract 2017/18). The loss represents five percent of Uganda’s Gross Domestic Product (GDP).
**Road safety compliance**

The 2019 study on road safety compliance among motorcyclists in Uganda found that majority of East African countries; Uganda, Tanzania and Rwanda, have the highest number of motorcycle passengers in the casualty wards.

The study, done by Margaret Ndagire, Suzanne Kizima, Nino Paichadze, and Olive Kobusingye from Makerere University School of Public Health, found that more than three-quarters of road crashes affect males mostly in their youth years (15-45 years) yet they are the majority breadwinners and busiest on the road.

“Majority of road crashes between 70 and 90 percent are due to human error, like speeding, driving-against, non-use of helmets, overcrowding, poor visibility and lack of training...,” the study says.

The study also suggests some remedial road closures such as improving road designs, use of helmets, wearing reflective jackets, adequate training before riding motorcycles, valid riding permits and maintaining motorcycles in good mechanical condition, avoid speeding and riding when drunk.

**Road crashes kill more than Covid-19**

Between September 2020 and September 2021, Mulago hospital received 5,619 road crash victims.

Road crashes kill more than Covid-19. The study found that Uganda’s East African country comrades, Tanzania and Rwanda, have the highest number of motorcycle passengers in the casualty wards.

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**Use of helmets by cyclists reduces the risk of road traffic fatality by more than 25 percent and the risk of head injury by 70 percent or any brain damage during a crash...,” the study found. However, Bayiga said their latest study on helmet use in Uganda found that some boda cyclists fear wearing helmets. They claim they...
are expensive and are of poor quality. They break during a crash, and the broken pieces injure their skull.

Dr Olive Kobusingye, director of the Trauma, Injuries and Disability program at Makerere University, School of Public Health, said their latest research on boda cyclists proposes a plan for all road users to have selected spaces on the road to avoid crashes.

Namuyiga, however, said managing road safety space and usage is not about increasing or widening lanes; it’s about improving public transport and use of mass transit movement of people.

“When you move in large numbers at once, like a bus carrying 70 people, it reduces chances of crashes than having many vehicles and motorcycles on the road, carrying two or three people, which also increases traffic jam,” she said.

**Global Plan Action 2021–2030**

According to the Global Plan Action for Road Safety 2021-2030, WHO and UN target to reduce road traffic deaths and injuries by 50 percent within that decade by calling on governments and stakeholders to implement an integrated safe system approach, which positions road safety as a key driver of sustainable development.

The report also says that globally, road traffic crashes cause nearly 1.3 million preventable deaths and 50 million injuries annually, making it the leading killer of children and young people worldwide.

“They are set to cause a further estimated 13 million deaths and 500 million injuries during the next decade and hinder sustainable development, particularly in low and middle-income countries,” according to the report.

Namuyiga says road safety is allocated about one percent of the national budget because decision-makers, politicians, and other stakeholders don’t know much about the implication of losing youths, having many orphans, and school dropouts, which strain the country’s development.

“The money, which government spends on orphans and crippled parents in hospitals, would have been invested in other developments like buying drugs, building schools and houses for people,” Namuyiga said.

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Charlotte Kangume, 25, left her parents’ home in Kisaasi, Kampala for Kyaliwajjala to visit a friend who had just given birth. On her way back home, a dark saloon car skidded and smashed into her, writes Moses Nampala.

“I was a fraction of a second, I was smashed against a nearby perimeter wall. I slipped into coma and woke up in the casualty wing of Mulago Hospital, Charlotte Kangume, 25, narrates. Her mother, Jennifer Kafeero, said she found her daughter still unconscious when she was called to the orthopaedic wing of Mulago Hospital.

“When I saw the way the vehicle mangled my daughter’s leg, out of shock, my hypertension levels instantly shot up, tripping me over on the floor, Kafeero recalled.

Born to Eridard and Jennifer Kafeero of Kisaasi, in Kampala, Kangume is the eldest child of four. She had just completed her bachelors in law at Ndege University when the motor crash happened.

Doctors agreed that her leg had to be amputated. She cannot bear to recall what prevailed the amputation procedure, which she describes as a trying moment.

“Nothing is as nerve-wrecking as that moment when a physician appears at your hospital bed, and expresses inability to fix your injured leg, and suggesting the worst,” she says.

She says she was counselled about the need to cut off her left leg, but confesses that no amount of counselling can ever prepare anybody due for amputation.

She says her mother has been the pillar of comfort from the moment you get admission, and suggesting the worst,” she says.

Doctors agreed that her leg had to be amputated. She cannot bear to recall what prevailed the amputation procedure, which she describes as a trying moment.

Artificial limb
Adjustment is not the only challenge of an amputee, getting an artificial limb is another. The cost of prosthetic limbs in Uganda is prohibitive. Kangume paid sh16m for hers. Yet it has not been immune to frequent defects, mostly around the joints.

“The least a repairing service costs is not less than sh200,000,” says Kangume. Her left leg is replaced by an artificial limb, skilfully crafted out of metal and some material.

“Motor crashes happen without warning. It is a tragedy that nobody expects, but always lurking in everyone's future. One minute you are in one solid piece, and a split-second later, your limb is pitifully smashed,” she says.

“Today it is someone else but tomorrow, it could be you. And your life could turn inside out when you are merely an innocent pedestrian strolling by the road side.”

The World Health Organization (WHO) road traffic injury report indicates that approximately 1.3 million people die in motor crashes every year, globally

According to Dr Daniel Mwayafu, the head of the orthopaedic department at Mbale Hospital, prosthetic raw materials for limbs include special hinges, sockets and joints. Others on the check list include search foot material. Unfortunately, they are all imported. This makes them very expensive and unavailable on demand.

Mbale Hospital director Dr Emmanuel Tugaineyo says public health utilities don’t receive orthopaedic raw material supplies from the National Medical Stores. Amputees who need limbs have to source the supply by themselves or through international charity organisations.

However, there are private prosthetic artisans in Mbale and Kumi who innovated low cost prosthetic pieces. One provider, Lawrence Okwalinga, says providing alternative prosthetic pieces seems like a good business but it isn’t as rosy.

“We source the prosthetic raw material from abroad and so, they are subjected to high taxes at point of entry,” Okwalinga says.

Another provider, Andrew Wanendeya, also decry the high taxes.

“The lower prosthetic limb above the knee ranges from sh8m-sh20m, while below the knee ranges from sh4m-sh8m. The Upper limb prosthetic limb pieces vary. A piece above the elbow goes for sh2m while below the elbow goes for sh3m,” he said.

It is estimated that 80% of people with disabilities cannot afford artificial limbs.

Currently, the Comprehensive Rehabilitation Services for Uganda (CORSU) Hospital in Uganda has been delivering prosthetic solutions in Uganda. It is now partnering with the University of Toronto to implement a project of using new 3D printing and scanning technology to create artificial limbs for children.

However, Makerere School of Public Health, in their latest research paper – Estimating the Burden of Road Traffic Crashes in Uganda Using Police and Health sectors Data, 2020 – finds the Police motor crash annual statistics too unrepresentative of the country’s crash burden. The paper claims the Police annual report is always short of two thirds of all the road motor crashes that happen in the country during the year. The research contends that survivors that escape motor crashes with grave injuries, annually, account for 87.2%,
WE'RE ABANDONED, “Today it is someone else but, largely not aware of what have helped is in procuring motor crash victims. One addressing the plight of Region Traffic Officer, 44 years. Casualties in the country are that 98% of motor crash casualties in Uganda. The research further observes, and their passengers, the victims,” the research stigma and isolation of a social burden that attracts activities. Disability remains morbidity and ability implications on the victim’s is rampant. Among motor crash survivors says, loss of lower limbs to disability. Cost of lost productivity due which is an alarming hidden bad of lost productivity due to disability. Among others, the report says, loss of lower limbs among motor crash survivors is rampant. Amputation has severe implications on the victim’s morbidity and ability to perform in economic activities. Disability remains a social burden that attracts stigma and isolation of victims,” the research observes. Pedestrians, cyclists and their passengers, the research further observes, have always accounted for the biggest proportion of motor crash casualties in Uganda. The research also contends that 98% of motor crash casualties in the country are averaging below the age of 44 years.

HOW ABOUT 3RD PARTY INSURANCE?

Ruth Ngahire, the Elgon Region Traffic Officer, said the 1999 Third Party Insurance Act made by Parliament was aimed at addressing the plight of motor crash victims. Area this insurance would have helped is in procuring artificial limbs for accident victims. Ngahire says masses are largely not aware of what they deserve from third party insurance and many victims do not make claims to insurance companies. “Relevant authority in government ought to put insurances to task of constantly creating awareness on how the policy works and how people can access their third party insurance claims,” she says. Ronald Wabuji, the Jubilee Insurance branch manager, Mbale, admits that many accident victims do not approach them for compensation.

“There is nothing we can do if claimants don’t show up, though we’ve always taken due diligence to brief them on what they ought to expect from insurance, should they get involved in a motor crash,” he says. “The law says in the event of a motor crash, the person that should lead, insurance compensation (claim) is the owner of the vehicle who, in most cases is on the run,” Wabuji says. “It is our suggestion that the Act should be amended to allow the Police, in absence of the owner, to follow up the compensation matter with insurance companies.”

Police 2020 Annual Traffic and Road Safety report indicates that 12,249 crashes were registered.

A research paper “Indications And Trends of Amputation as Seen at Mulago Hospital, Kampala, Uganda, a 10-Year Retrospective Study” by Dr Alex Bangirana and Dr Moses Muhumuza of Makerere University, assessed the common indicators of amputations in Uganda. They reveal that, unlike Uganda where road traffic crashes account for majority of limb amputations cases, in the developed world, diabetics and malignant tumours were the most common causes.

The study, Bangirana and Muhumuza, who are consultative orthopaedic surgeons Mulago Hospital, also note that majority of the victims are below the age of 38 years. Bangirana is the head of the orthopaedic department and also a lecturer at Medical School Makerere University. Muhumuza is a lecturer at the medical school, Makerere University.

Dr Daniel Mwayafu, the head of the orthopaedic department at Mbaale Hospital, says 98% of the amputation cases he has handled are casualties of motor crash trauma and majority are juveniles, youth and middle aged. Mwayafu says casualties have to lose limbs because of high force energy impacts. “It is like striking a banana finger or cassava tuber with a hammer. Not only would it flatten the banana and cassava, but also some objects would fly off. It would be impossible to reconstruct it, it has to be severed off,” he says. However, before the decision to amputate is taken, a lot of analysis goes on. “Visible scrutiny of a patient is not enough to make a conclusion of amputation though it’s part of the professional technical yard sticks to that effect,” Mwayafu says. “It is only inevitable if the entire infrastructure of the limb, ranging from skin, nerves, muscles are all but irreparably wrecked. When doctors decide that an amputation procedure is inevitable, they are obliged to inform the patient and seek a formal consent from the patient and relatives.” Mwayafu says amputation surgery usually lasts 12-hours.

Ampu...
Crashed in road accident, will Hussein walk again?

Hussein Abubakar Mukakala, 20, has been bedridden for one and a half years. When his car tyre burst, he lost control, veered off the road, and hit an electric pole.

Mukakala is one of 50 million people globally who get injured or crippled in road crashes that could be avoided. Mukakala, who graduated in 2019 with a diploma in Motor Vehicle Engineering from Nakawa Vocational Institute, has been bedridden since he got the accident in Lusaka, Zambia in 2020. His spinal cord is damaged and his legs broken.

“My father had sent me to Zambia to set up another motor vehicle workshop there since we had succeeded in setting up our Land-Rover Ssesanga Motor Service workshop here at Nsambya, Makindye division,” he said in an interview.

“In May 2020, as I was driving on Makeni road, in Lusaka, Zambia, my vehicle tyre burst, and the vehicle lost control. It rolled, veered off the road, and fell in the valley. I hit an electric pole,” Mukakala said.

He said two of his relatives in the car hit their heads on the dashboard and lost consciousness.

“However, I managed to shout and people came to our rescue. Zambian accident responders are no different from Ugandans. Before they rescued us, they stole everything we had including money equivalent to Uganda

By Zurah Nakabugo

Hussein Mukakala at CoRSU hospital, Kisubi. (Photo courtesy of The Observer)
Shs 1.5m, phones, watches, shoes and almost took off our clothes,” he said.

“They later broke the vehicle glasses and pulled us from the wreckage. They took us to University Teaching Hospital (UTH) for treatment. This is where, I realized that I had sustained multiple injuries on my back, spinal cord and also broke my legs,” Mukakala said.

UTH, formerly Lusaka hospital, is the biggest public university hospital in Zambia with 1,655 beds. Mukakala said his relatives were discharged in a few days but he was retained since he broke his legs and had a damaged spinal cord. He needed surgery.

“I spent over a month in this hospital, in pain and grief but the doctors were not considering me for a quick operation since I was a foreigner. They give priority care to their nationals. We also delayed, since we had to get a police report before treatment, which wasn’t easy to get,” he said.

“They hung my legs and ordered me to sleep on my back as I waited for the operation. I got deep sores on my back, damaged my nerves and my lower body got paralyzed,” he said.

He said doctors in Zambia ordered three of his relatives to donate blood before the operation. They claimed it is government policy to avoid blood shortage in hospitals. Natalie Mashikolo, the spokesperson for UTH, didn’t respond to our email and WhatsApp inquiries.

**CoRSU hospital**

Interviewed for this story, Dr Cornelius Masambu, a specialist at the department of Plastic and Reconstructive Surgery, at CoRSU hospital, Kisubi, said, “a spinal cord injury requires definitive surgery done in less than six hours from the time of the accident for quick recovery. However, many people miss it in six hours, even in developed countries.”

He said the lack of surgery in less than six hours affected Mukakala’s spinal cord.

“Medically, Mukakala is a paraplegic. This means he had a spinal cord injury, which left him paralyzed from the waist to the lower body including legs. He will take long to walk again,” Masambu said.

Masambu also said Mukakala has recurrent pressure sores, chronic pain, and bladder and stool incontinence, muscle and bone loss. He can’t bathe or dress up himself.

“He has been sleeping on his stomach since he was re-admitted and uses a catheter to urinate since his lower body part lost senses. His attendants change his pamper every after two hours,” he said.

He said Mukakala is being treated for joint stiffness and bedsores since he has been bedridden for a long time.

“We want him to go through counseling and psychotherapy to prepare him for life out of the hospital when discharged. This will also help him to psychologically address his fears and unrealistic expectations in society,” he said, adding that the moment his wounds heal, he will be able to sit again,” Masambu said.

He advised road crash victims to avoid loneliness and join support groups that share similar information. “This prepares them to fight the problem of post-traumatic stress disorder.”

**Mukakala’s Father**

Mukakala’s father, Hajji Abdulkareem Ssesanga said his son’s first surgery was done a month after the accident in Zambia. They put metal orthopedic implants to fix his legs, he said.

“I decided to return him to Uganda in December 2020, since it was too expensive to treat him in Zambia. I took him to CoRSU
SELECTED ROAD SAFETY STORIES FROM UGANDA 2021–2022

Crashed in road accident, will Hussein walk again?

Mukakala was readmitted at CoRSU hospital for skin grafting to heal wounds. At the moment, he can’t sit nor walk since his wounds have not yet healed and his spinal cord is still paining,” Ssesanga said.

He said after starting treatment at CoRSU in January 2021, the hospital released all patients ahead of the presidential election. The doctors advised that Mukakala could continue with homecare nursing until after the elections.

“However, homecare nurses failed to treat the wounds, and immediately after elections, Mukakala said.

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He said doctors are waiting for sores to heal to operate on him again and improve his chances of sitting and walking again.

“I am requesting all orthopedic specialists, therapists, nurses, and the general public, to exchange ideas with me. I want to find ways of improving my son’s condition so that he can sit and walk again,” Ssesanga said.

He said he spent about Shs 60m on Mukakala’s treatment in Zambia and so far about Shs 30m at CoRSU. According to Zambia’s 2020 police traffic road safety report, about 28,484 road traffic crashes were recorded, of which 1,404 were fatal. About 4,427 persons were seriously injured and 5,729 were slightly injured.

Uganda’s situation, however, is more worrying. In one year alone, about 3,663 people were killed in road crashes and 8,370 injured, according to the Police Annual Crime Report 2020.

**Makerere Study**

A study done by Margaret Ndagire, Suzanne Kiwanuka, Nino Paichadze, and Olive Kobusingye from Makerere University School of Public Health found that more than three-quarters of road crashes affect males, mostly youth aged between (15 and 49 years) yet they are breadwinners for their families and are busiest on the road.

“Majority of the road crashes, between 70 to 90 percent, are due to human error, like speeding, drink-driving, non-use of helmets, overloading, poor visibility and lack of training to ride motorcycles,” the study found.

**Global Plan Action 2021–2030**

According to the Global Plan Action for Road Safety 2021-2030, road traffic crashes cause nearly 1.3 million preventable deaths and 50 million injuries annually, making it the leading killer of children and young people worldwide.

“They are set to cause a further estimated 13 million deaths and 500 million injuries during the next decade and hinder sustainable development, particularly in low and middle-income countries.”

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Christmas road carnage

News Analysis | RONALD MUSOKE

Minister of Works and Transport, Gen. Edward Katumba Wamala, wants Ugandans travelling to their upcountry homes for the end of year festivities to do so cautiously. He is one of many leaders campaigning against the many road crashes that happen in Uganda during the December Christmas holiday.

Records from the Police’s traffic directorate show most road crashes in Uganda happen in December. In 2020, for example, 1,445 road crashes were recorded in only 31 days translating into 46 road crashes per day.

Katumba and the others do not want that to happen this year.

“Let us plan our journeys, ensure that our vehicles are in proper mechanical condition, drive at appropriate speeds, avoid wrongful overtaking, be courteous to all road users, respect traffic rules and regulations, traffic signs, signals and road markings and exercise the highest discipline while on the road,” Katumba said on Dec.13.

Katumba was at the launch of this year’s Road Safety Week in Kampala. The week which runs in mid-December every year when thousands of Ugandans start trekking to their upcountry homes for Christmas and New Year festivities, was marked under the theme, “Road safety is a shared responsibility.”

Katumba said that lives in Uganda are being wasted yet life is not expendable. He is right to
be worried about the ever rising number of road crash victims during the end of the year.

At the launch of the road safety week, the retired Bishop of Mukono, Elia Paul Luzinda Kizito, gave road users; especially motorists, a series of questions to ask themselves before they embark on their journeys.

“Is it wise to speed unnecessarily? Is it wise to use road-unworthy vehicles? Is it wise to overtake? Is it wise to drive under the influence of alcohol? Is it wise to have unlicensed drivers on our roads?”

He said Ugandan roads should not be turned into “places for slaughtering human beings.” Bishop Luzinda’s was not the only blunt message at the event.

Benon Kajuna, the director in charge of the transport department in the Ministry of Works and Transport particularly pushed the bluntness a notch higher.

“Some of us have got new cars and we shall be flying to the villages,” he said, “But as you fly, don’t fly to the place I don’t want to mention.”

Traffic policemen pursue an errant driver on Masaka road in 2016. They have stepped up operations against bad driving. UNRA PHOTO

‘Fika Salama Extra’

Gen. Katumba said his Ministry alongside the Uganda Police Force has launched what he referred to as “Fika Salama Extra” operation to check errant drivers. This operation, he said, is aimed at influencing change of driver behaviour during the festive season on all highways.

“The Gamba Nogu business is over,” he said, “Everybody must conform and the traffic police should not bat an eye. We want the numbers of road crash victims to reduce.”

Police noted in its annual crime report for 2020 that there was an average of 14 fatalities on Uganda’s roads every day in December. That is a 40% jump in the number of people who died on Uganda’s roads everyday. The average number is 10 according to the United Nations Economic Commission for Africa’s Road Safety Performance Review report for Uganda which was published in 2018.

The Deputy Director, Traffic and Road Safety in the Uganda Police, Assistant Superintendent of Police (ASP), Philip Acaye, shared even more damning statistics of how road crashes are impacting Ugandans.

He said over the last five years, at least 3500 people have perished on Ugandan roads every year while close to 10,000 escaped with severe injuries.

And in each of those years, young men have been the most affected. Last year, in 2020, the police recorded 3,663 people who died on Ugandan roads. About 80% of the dead (2,945) were men while the rest were women. More worryingly, 75% of those killed on the roads were under 45 years old.

People who perished in road crashes and were below 18 years were 628 (382 male and 246 female), those aged 18-24 were 536 (470 male and 66 female), those aged 25-34 were 921 (803 male and 118 female), while those aged 35-44 were 664 (570 male and 94 female). Meanwhile those who died and were above 55 years old were 351. Still, the majority were men (257) compared with 94 women.

Acaye said the majority of people who are dying on Ugandan roads are “young people many of whom are school-going kids and young adults beginning life.” “They are young, up and about while those above 75 years are not so much on the road,” he said.
In relation to the category of road users who perished, Ugandan roads were more unforgiving to pedestrians (34%), followed by motorcyclists (31%). The rest were passengers on public transport (25%), pedal cyclists (5%) and drivers (5%).

Gen. Katumba said the carnage on Uganda’s roads is worrying because of its negative impact on individual families and on the economy. He said the government is determined to reduce the deaths on the roads. Wamala said if motorists reduced the speed at which they will be driving by just 5%, this would reduce fatalities on the roads by 30%.

“If someone else is speeding, don’t follow them so that we can protect ourselves. Let us make that speed limit work,” he said.

Katumba said speeding is one of the contributing factors accounting for 36% of all fatalities in Uganda. He explained that speeding makes driving more dangerous because it increases the likelihood that a driver will lose control of the vehicle. It also increases stopping distances.

“It reduces a vehicle’s ability to brake,” he said, “And also increases the risks to pedestrians and cyclists outside the vehicle.”

Speaking about the motorists’ favourite topic of Ugandan roads being too narrow, Gen. Katumba said this should make the motorists even more cautious while driving.

“If the roads are narrow why do we continue driving recklessly?” he said, “We should not find excuses for causing road crashes because excuses don’t bring back road crash victims.”

Waiswa Bageya, the Transport Ministry’s Permanent Secretary said the unfortunate part in Uganda’s road carnage is that many of the crashes are predictable and can be avoided.

He said the causes of these road traffic crashes are usually behavioral; including over speeding, drunk driving, lack of consideration for other road users, driving while on phone, wrongful overtaking, poor mechanical condition of vehicles, and lack of driving skills. He said inadequate road infrastructure contributes a small extent.

There are many other reasons for the rising trend of road accidents; rapid urbanization, poor safety standards, lack of enforcement, people driving distracted or fatigued while others drive under the influence of drugs or alcohol. Failure to wear seat-belts or helmets is another factor.

But, this is not a Ugandan problem only. The World Health Organization (WHO) Global
Status Report on Road Safety 2018 shows the problem is getting worse; especially in Sub-Saharan Africa.

Deaths from road traffic crashes have increased to 1.35 million a year worldwide. That’s nearly 3,700 people dying on the world’s roads every day. Tens of millions more are injured or disabled every year, the WHO report noted. Many more suffer life-altering injuries with long-lasting effects. These losses take a huge toll on families and communities.

**New regulations coming**

On Dec.08, Alex Ruhunda, the MP for Fort Portal Central Division moved a motion in Parliament for a resolution urging the government to strengthen efforts for promoting road safety in Uganda.

Ruhunda said the government must increase funding for road safety programmes and activities; especially the Department of Traffic and Road Safety of the Ministry of Works and Transport and the Directorate of Traffic Police. He wants these two departments to get more human resource and modern equipment.

He also wants the Ministry of Works and Transport to consider reducing the speed limit for urban areas, especially the highly-built-up areas and school zones from 50km/hr to 30km/hr. The ministry should also reduce the blood alcohol content from the current 0.08mg/100ml to 0.05mg/100ml for the general drivers, and 0.02mg/100ml for young and novice drivers and commercial drivers.

Going forward, Katumba said his Ministry is committed to implementing policies and interventions to improve road safety in the country. He noted that the Ministry is in the final stages of acceding to the United Nations legal instruments on road safety as well as implementing and promoting their provisions into safety regulations. Acceding to the UN legal instruments will ensure that legislation and standards for road design and construction, vehicles, and road use are consistent with global safe system principles.

Katumba added that his Ministry in collaboration with other stakeholders including those from civil society is also in the final stages of developing the National Road Safety Action Plan to align with the Global Plan.

He said the Ministry will work towards establishing regional, national and sub-national road safety committees, with multi-sectoral partnerships to deliver the scale of efforts required to achieve the target of halting road carnage by 50% at least by 2025.

“My Ministry is in the process of formulating new regulations and also reviewing the existing regulations to fully operationalize the Traffic and Road Safety Act, 1998 (Amendment) Act, 2020,” he said.
What causes a road crash?

What you need to know:

According to preliminary findings recently published in a story by this newspaper, the bus driver, who was speeding on a slope, lost control after overtaking a trailer while rounding a bend.

Road crashes such as this one are killing and maiming thousands of Ugandans. (Photo courtesy of Alex Ashaba/Daily Monitor)

By Roland Derick Nasasira

Government’s decision to ground 90 buses belonging to Link Bus Company follows a series of road crashes. On May 4, 20 people were confirmed dead after a Link bus overturned several times at Ssebitoli on Fort Portal-Kyenjojo Road in western Uganda. According to the traffic directorate spokesperson Faridah Nampiima, these included 13 adults and seven juveniles.

According to preliminary findings recently published in a story by this newspaper, the bus driver, who was speeding on a slope, lost
control after overtaking a trailer while rounding a bend.

On the same day, six people were confirmed dead, and others seriously injured in a three-car crash on Mbale-Tirinyi highway. The crash occurred at Mailo tano, approximately four kilometres from Mbale City as a Kampala bound commuter taxi overtook another and collided with a Toyota Raum. Traffic police attributed the crash to reckless driving and failure to observe traffic guidelines.

**Human error**

Nampiima says human error accounts for the biggest percentage of road crashes. This includes disrespect of road signage, drink-driving, phone or distracted driving, driving dangerous mechanical condition vehicles (DMCs), driving when fatigued, reckless driving and incompetent drivers.

According to the Uganda Police Force website, from April 24 to May 2, a total of 9,679 traffic offenders were arrested at various check points in the country. These included 1,709 for reckless driving, 2,089 for dangerous mechanical condition vehicles, 837 for invalid driving license, 446 for speeding, 760 for not wearing seatbelts, 760 riding motorcycles without a crash helmet, 606 for carrying more than one passenger on the motorcycle and 144 others.

Road crashes are rarely caused by a single factor, which makes road safety a shared responsibility. Jemima Nalumansi, the initiative coordinator for Kampala at the Bloomberg Philanthropies Initiative for Global Road Safety, says speeding leads to reduced reaction time and, therefore, reduced opportunity to avoid a crash.

“When speeding, there will be less or no time to react to potential hazards. There will not only be loss of friction between tyres and the road but also loss of stability when negotiating bends and braking. It will also cause other road users to misjudge gaps,” Nalumansi explains.

A June 21, 2021 World Health Organisation fact sheet on road traffic injuries states that an increase in average speed is directly related both to the likelihood of a crash occurring and to the severity of the consequences of the crash.

“Every one percent increase in mean speed produces a four percent increase in the fatal crash risk and a three percent increase in serious crash risk. The death risk for pedestrians hit by car fronts rises rapidly to 4.5 times from 50km/h to 65km/h. In car to car side impacts, the fatality risk for car occupants is 85 percent at 65km/h,” the fact sheet partly reads.

**Road sign theft**

The aim of using road signs is to guide drivers on how to use the road safely. It also helps warn road users/drivers of impending danger on the road. Unfortunately, increased theft of these signs makes it hard for motorists, especially those unfamiliar with a certain road to identify sections that have, for example, road humps or sharp corners.

According to section 48 of the Uganda National Roads Authority (UNRA) Regulations 2017, once found guilty of stealing road signs, when arraigned before court, you will either be imprisoned for two to seven years or pay a fine between 200-400 currency points, which is approximately Shs4m to Shs7m or serve both punishments, on top of reinstating the stolen sign posts.

**DMCs**

Dangerous mechanical condition (DMCs) vehicles, Nampiima explains, include vehicles that run out of fuel in the middle of the road,
those with defunct indicators, brakes and headlights, treadles tyres and worn out wipers that cannot clear the windscreen when it is raining, among others.

**Road design**
Norman Byamukama, a road safety engineer at UNRA, says road curves are designed to be negotiated at certain speeds and that each road has its prescribed design speed. If you negotiate a corner above the prescribed speed, which is always marked on a road sign, you risk causing a crash.

“Some road sections have metallic guardrails. If you make a mistake, your vehicle is protected from overturning. However, these guardrails are sometimes knocked down, which indicates that one was driving above the recommended speed,” Byamukama says.

**Road width**
Byamukama clarifies that standard road width is based on the road’s design class. For instance, the width of national roads that connect districts and international borders is 3.5 metres for the outgoing and oncoming lanes while there are some that measure three metres on either lanes. One should also consider natural factors such as rain and fog or anything that affects proper road visibility.

**Possible solutions**
Nampiima says a system electronically monitored by traffic police, Ministry of Works and Transport and Uganda Driving License Systems (UDLS) should be put in place to monitor whoever qualifies to operate a vehicle. “When one joins driving school, all agencies should be aware of this. After leaving driving school with a certificate, one should be tested at the inspectorate of vehicle where the system is able to capture the days you spent learning to drive. This in the end qualifies you for a professional driving license at UDLS,” Nampiima says, adding that if someone is arraigned before court for being a habitual traffic offender, court should cancel their driving license, which will motivate other drivers to maintain discipline on the road,” Nampiima adds.

**Emergency response**
According to Nampiima, there should also be a standard emergency response unit to road crashes, with at least two ambulances on every major highway. If attended to on time, she says, many people will be given a chance at surviving the injuries sustained during a crash.

**Statistics**
According to the Uganda Police website, from February 28 to March 6, police registered 414 crashes. Of these, 75 accidents were fatal, 226 were serious and 113 were minor. There were 404 crash victims, out of which 89 people died and 315 sustained injuries.

The portal also states that from April 24 2022 to April 30 2022, police registered 387 crashes, out of which 60 were fatal, 213 were serious and 114 were minor. There were 341 crash victims, out of which 67 died and 274 sustained injuries. A total of 119 crashes occurred on May 1 2022 and May 2 2022 and out of these, 21 crashes were fatal, 62 were serious and 36 were minor.
Newly built road claims 37 lives in five months

What you need to know:

The latest accident occurred last Thursday morning when a Kampala-bound taxi, a Toyota Hiace locally known as Drone, overturned several times, killing five people, including three from one family.

The Fort Portal-Kyegegwa road is becoming a death trap only two years after being constructed, with a record 37 deaths in a space of five months.

The deaths have been occurring at various black spots on the 103km road.

The latest accident occurred last Thursday morning when a Kampala-bound taxi, a Toyota Hiace locally known as Drone, overturned several times, killing five people, including three from one family.

According to Rwenzori West regional police spokesperson Vincent Twesige, the accident occurred at Kyasitiri Village between Kyegegwa and Kyenjojo at around 9am. It happened after a tyre of the taxi burst.

The deceased were identified as Hebert Byamukama, 46, and Consolata Katusabe, 47, both residents of Kyaduri, Kyenjojo District; and another one only identified as Agondeze. Two others, both male adults, could not immediately be identified.
Dr Martin Yehta, the in-charge of Kyeggegwa General Hospital, said they are treating two accident victims.

A witness, Mr Seth Ayinembabazi, attributed the accident to speeding.

“The tyre burst as the taxi was slopping at a high speed and the driver lost control. It overturned several times from the uphill up to this place,” Ms Ayinembabazi said.

One of the survivors, Mr James Waibale, also explained the cause of the accident.

“The driver was speeding. The taxi ended up rolling. Actually I lost consciousness after the loud bang from the bursting tyre. From then I found myself being carried. I am feeling immense pain,” Mr Waibale narrated.

Several residents said most motorists on the road drive recklessly given the smooth road.

The district councillor for Kakabara Sub-county, Mr Ernest Magezi, asked drivers of passenger service vehicles to exercise caution. “Some drivers speed, disregarding the lives of their passengers. Some drive while speaking on phone and in case of any threat, he can easily cause an accident,” he said.

This grisly accident came nearly four weeks after a Link Bus overturned at Sekitoli, a few kilometres from Fort Port City on the same Fort Portal-Kampala highway, killing 20 people on spot. Three others died from hospital.

It becomes the fourth fatal accident on the 103-kilometre stretch since last November in which 37 lives have been lost and left scores injured.

Last November, another accident near Kibuye Trading Centre in Kyeggegwa (Kyeggegwa-Mubende road) claimed five lives.

In January, a head-on collision at Kiregesa Village, three kilometres from Kyenjojo Town, left four dead.

The deadly road
The road is newly tarmacked and was commissioned in 2020. Passengers get to see sweeping lawns and landscaped vistas while moving on the road that has an extension of 53 kilometres to Kyeggegwa Town.

The road snakes into the lush greenery and cultivated fields of tea estates in Kyenjojo and Kabarole districts. Part of Kibale National Park also comes into one’s view.

The road’s windings—specifically the steep descents—always seem to tempt drivers into overstepping on the gas pedal. The stretch after Kaswa Trading Centre up to Ssebitoli where the Link Bus accident claimed 20 lives has a hairpin corner and steep slope.

Junior Works and Transport minister Musa Ecweru said mid this month that the investigation into the accident at Ssebitoli would not be “a simple one.”

The increased cases of fatal road crashes along the road continually leave health facilities in the area coming apart at the seams. As seen this past week, most of them are not equipped with enough supplies and personnel to handle a deluge of accident victims. They also don’t have enough ambulances to evacuate victims from the scene.

From Fort Portal to Kyeggegwa District, one can count three main health facilities. These include Kyenjojo and Kyeggegwa hospitals, as well as Fort Portal Regional Referral Hospital. Mr Bruce Rwampunda, the former hospital administrator at Kyenjojo Hospital, says the facility lacks a casualty ward.

Police statistics
The recent police crime report on traffic and road safety for 2021 shows that 3,757 people died in road accidents between January and December 2021, compared to 3,269 in 2020. The same report shows that 9,070 people were critically injured in road accidents in 2021 compared to 5,803 in 2020. In 2021, 17,443 road accidents were recorded compared to 12,249 registered in 2020.
UN calls for 30 km/hr speed limit in Kampala

At more than 140 kilometers per hour mph, a road crash is potentially inevitable. At such speed, pretty much everything is possible.

A report authored by the United Nations (UN) found that Uganda loses about 10 people per day in road crashes mainly caused by high speeds, the most in the East African region.

Speeding accounts for 36 per cent of all fatalities in Uganda, according to the Police Annual Traffic report 2020. Speed is a major factor in over 50 per cent of road crashes in Africa. To slim down the road accidents, UN recommends a speed limit of 30 kilometers per hour on Kampala streets down from the current 50 kilometers per hour.

Jemima Nalumansi, the Kampala coordinator of Bloomberg Philanthropies Initiative for Global Road Safety (BIGRS), said during a recent training workshop organized by the African Centre for Media Excellence (ACME), that developed cities like Brussels and countries like Spain and France have already committed to the 30km/hr speed limit. She called for a shift in "every community and neighborhood worldwide."

BIGRS is a multi-country programme that aims to reduce road crash fatalities and injuries.
“Speeding and drink driving are the major risk factors of road crashes globally, according to Michael Bloomberg Philanthropies Initiative for Global Road Safety (BIGRS). Other factors are poor helmet use and non-use of seat belts. However, the School of Public Health, Makerere University is researching on the use mobile phone while driving as a risk factor since many people in Africa and Europe are driving while using phones,” she said.

The just ended UN Global Road Safety Week ran under the theme, “Streets for Life #Love30” and aimed to limit the speed on streets. It also aimed to reduce accidents, noise and pollution in cities and urban centers.

According to the World Health Organization (WHO), one person dies in a road traffic crash every 24 seconds and the most affected are children, young adults and pedestrians. About one-third of deaths can be traced to excessive speed. WHO believes that every kilometer per hour over the speed limit increases the risk of a fatal crash by 4-5 per cent.

Uganda loses about Shs 5 trillion ($ 1.2 bn) to road crashes annually, according to Uganda Bureau of Statistics (UBOS), Statistical Abstract 2017/18. The loss represents about 5 per cent of the country’s Gross Domestic Product (GDP). UBOS said the highly productive population aged between 18 and 44 years is the most affected, which piles a huge burden on the nation’s development both socially and economically.

**Police**

According to the Police Annual Crime Report 2020, over 3,269 crashes were fatal, a by 4.1 per cent drop from the 3,407 in 2019. About 3,663 people died in road crashes in 2020, while 3, 880 died in 2019. The report says about 8,370 were injured in 2020.

The report also found that most fatalities were of pedestrians (34 per cent), motorcyclists (31 percent) and passengers (25 per cent).

**Ministry of Works**

According to James Katunguka, the senior road safety officer at the ministry of Works and Transport, “It’s a shared responsibility amongst everyone, including designers, builders, enforcers, policymakers, observers and road users. All parts of the road system must be strengthened in combination to multiply the protective effects and if one part fails, the others will still protect people.”

Katunguka said that according to Section 52 (3) of the Roads Act, 2019, a person who fails to comply with a speed limit set under subsection (1) commits an offence and is liable on conviction to a fine not exceeding one hundred sixty-eight currency points (about Shs 3.4m) or imprisonment not exceeding seven years, or both.

He advised drivers and passengers to always wear seat belts and helmets. Katunguka said helmets aim to reduce the risk of serious head and brain injuries. Correct use of helmets also reduces the risk of death by almost 40 per cent and head injuries by 70 per cent.

**Low speed**

Low speed streets save lives and are the heart of any community. Therefore a 30 km/hr speed limit makes streets healthy and serves to make our roads safer for children, pedestrians, the elderly and people with physical challenges who are more vulnerable while crossing the roads.

**WHO report**

According to the Global status report on road safety 2018, signed by Dr Tedros Adhanom Ghebreyesu, the Director-General WHO, road
traffic crashes are not “accidents.” Crashes are completely preventable while accidents are not.

The report says the number of traffic crashes globally remains unacceptably high with an increase of about 1.4 million people dying each year. That’s nearly 3,700 people dying on the world’s roads every day.

“Tens of millions more are injured or disabled every year in traffic crashes, people who suffer life-altering injuries with long lasting effects. These losses take a huge toll on families and communities. The cost of emergency response, health care and human grief is immense,” Adhanom says in the report.

He said one of the most heart-breaking statistics in this report is that road traffic injury is the leading cause of death for people aged between 5 and 29 years. No child should die or be seriously injured while they walk, cycle or play, he said.

“We must return our streets to our children. They have a right to feel safe on them. In the Sustainable Development Goals, world leaders have committed to halve the number of deaths from road crashes by 2020. This report shows that three years on, far too little progress has been made towards this goal,” he adds.

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Behind surge in road crashes on Uganda’s highways

Police records 2000 road accidents and over 250 dead in three months

In a shocking wave of road crash events, a Spanish photojournalist, a Swedish diplomat and a young lady looking forward to her wedding have all perished on Uganda’s roads in recent days, raising more concern about the safety of the country’s highways.

On March 07, Sadurni Carrasco Sumaya, a Kampala-based Spanish freelance journalist and a young lady looking forward to her wedding have all perished on Uganda’s roads in recent days, raising more concern about the safety of the country’s highways.

On March 07, Sadurni Carrasco Sumaya, a Kampala-based Spanish freelance journalist died alongside her Ugandan driver, Thomas Mugisha, in a road crash incident in the central Ugandan district of Kiryandongo along the Kampala-Gulu Highway. Police said Carrasco and her driver died on the spot after their car collided head-on with a Fuso truck.

On March 13, as the week was winding up, the mood within the diplomatic community in Kampala turned somber as news came in announcing the sudden death of Swedish diplomat, Urlika Lindberg Ljabasaukas and a Ugandan national, who perished in a grisly road crash at Magamaga in Mayuge District along the Jinja-Iganga-Tororo Highway in eastern Uganda.

Police said the two died on the spot when their vehicle collided with a truck. According to the report, Ljabasaukas’ driver was attempting to overtake another vehicle but on noticing an oncoming heavy duty truck, a Fuso, her driver swerved off the road.
“The Pajero (the car carrying the diplomat) was trying to overtake and swerved off the road to dodge an oncoming Fuso heading to Iganga so they collided head-on,” said Diana Nandaula, the Busoga East Police spokesperson.

A day earlier, on March 12, three young women including one who was just a week away from her wedding perished in another road crash along the Entebbe Expressway that left their car mangled. Reports said the bride-to-be and her friends were returning from a “bridal shower” when their car crashed along the brand new expressway.

There was no let off on the highways as police recorded another road crash in the early morning hours of March 14. This time, two people were killed on the spot and 20 passengers were critically injured following a head-on collision involving a bus belonging to the Baby Coach Company and a truck in Luweero District along the Kampala-Gulu highway.

A survivor of the crash who was a passenger on the bus commuting from the northwestern Uganda city of Arua heading to Kampala said the truck driver had lost control and rammed into the bus.

‘Roads are killing more young men’

Police say, since the beginning of this year, they have registered over 2,000 road crash incidents, killing at least 250 while thousands have escaped with life-altering injuries nationwide.

According to the Road Safety Performance Review Report for Uganda which was published by the United Nations Economic Commission for Africa in 2018, at least ten people die on Uganda’s roads every day.

In December, last year, the Deputy Director, Traffic and Road Safety in the Uganda Police, Assistant Superintendent of Police, Phillip Acaye, told participants during the launch of the annual Road Safety Week that over the last five years, at least 3,500 people have died on Ugandan roads every year, while close to 10,000 have narrowly escaped with severe injuries.

Even in 2020—a year which saw the economy shut down for at least four months to contain the COVID-19 pandemic—3,633 people were killed in road crashes in Uganda. That figure saw an increase from the one posted in 2018 and 2019 when at least 3,194 and 3,407 people respectively were killed in road crashes, according to police data.

Police reports show that in each of the last five years, young men have been the most affected. For instance in 2020, 80% (2,945) of people who died in road crashes were men. More worryingly, 75% of those killed on the roads were under 45 years old.

People who perished in road crashes and were below 18 years were 628 (382 male and 246 female), those aged 18-24 were 536 (470 male and 66 male), those aged 25-34 were 921 (803 male and 118 female) while those aged 35-44 were 664 (570 male and 94 female).

Meanwhile those who died and were above 55 years old were 351. Still, the majority were men (257) compared with 94 female. Acaye said the majority of people dying on Uganda’s roads are young people many of whom are school-going kids and young adults beginning life.

“They are young, up and about while those above 75 years are not so much on the road,” he said. With regards to the category of road users who perished, Ugandan roads were more
unforgiving to pedestrians (34%) followed by motorcyclists (5%) and drivers (5%).

Going by the number of road crashes and deaths so far registered, this year is likely to be harsher to road users unless measures are taken to ensure strict observance of traffic rules and vehicle maintenance.

**Narrow roads narrative**

Motorists insist the country’s roads are too narrow while police blames human errors. But as arguments fly back and forth, the spate of deaths on Uganda’s roads is impacting individuals, families and even the economy.

Experts say the causes of road traffic crashes are usually behavioural; including speeding, drunk driving, lack of consideration for other road users, driving while speaking on phone, wrongful overtaking, poor mechanical condition of vehicles and lack of driving skills.

Other factors for the rising trends of road crashes in the country include; rapid urbanization, poor safety standards, lack of enforcement and people driving distracted or fatigued. But also, inadequate road infrastructure has been identified as having the least contribution to road accidents.

James Katunguka, the senior road safety officer in the Ministry of Works and Transport told journalists undergoing road safety reporting last December that Ugandan roads are actually not narrow. He said the roads are actually built based on standard design.

Allan Ssempebwa, the Spokesperson of the Uganda National Roads Authority (UNRA) also told The Independent on March 17 that contrary to the notion peddled by motorists, Ugandan highways are actually “built to standard.” He dismissed the claim that the roads are narrow.

“All we just have to do is tame our habits while on the road,” he said, adding that speeding remains a big challenge on Uganda’s roads. Ssempebwa said even when the road markings are in place to offer guidance; motorists tend to disregard them, as others deliberately drive recklessly.

“They do so with no regard for road signage and other road users. There is clear signage showing the speed limit is 20km/hr as you join the toll road but someone disregards this and drives at 80km/hour,” he said.

However, back in 2016, Allen Kagina, the executive director of UNRA admitted that the Bombo-Kafu road (Kampala-Gulu highway) was narrow because they did renovation basing on old designs due to lack of funds.

Kagina, who was responding to a petition by the Regional Lorry Drivers and Transporters Association and the Uganda Bus Allied Association, said that indeed some narrow roads were causing road crashes especially on highways.

**Road crash investigations lacking**

However, Sam Bambaza, the executive director of Hope for Victims of Traffic Accidents (HOVITA), a non-profit organization dedicated to preventing road deaths and injuries in Uganda told The Independent on March 16 that one of the emerging challenges when it comes to curbing road carnage in the country is a lack of thorough investigations into the crashes.

“We never get to know the cause of the road crashes. We, for instance, don’t know if these crashes are as a result of road design, tyres, fatigue, or user behaviour? Was the driver on the phone before the road crash?”

Bambaza says police reports cannot help the current situation as they (police) are always
interested in the criminal aspect of road crashes. He says an independent agency, and not the police, is needed to investigate road crash events on Uganda’s roads.

“If, for instance, it is found that poor road design is behind road crashes along a particular highway, then UNRA would be asked to fix the issue,” he said. “As long as we don’t do thorough investigations, road crashes are not about to stop happening on our roads.”

“(In the case of buses or coaches) they are designed to drive on dedicated lanes for hundreds of kilometres without any sudden interruption but what happens is that the drivers are dealing with bodabodas, cyclists and pedestrians yet the buses cannot brake easily.”

“They end up crashing,” he said.

Dr. Godfrey Mwesige, a traffic engineering and road safety expert who also lectures in the Department of Construction Economics and Management at Makerere University’s College of Engineering, Design, Art and Technology said in 2018 that many of the road crashes on Uganda’s highways can be attributed to poor road design.

Using data collected on road crashes along the Northeastern Road Corridor—a 340km stretch that begins on the Uganda-Kenya border at Malaba in eastern Uganda, meandering northeastwards through Tororo, Mbale, Soroti up to Kamdini Corner, Dr. Mwesige and his team found a high frequency of accidents involving motor cycles at or close to trading centres, especially on the Tororo-Mbale-Soroti sections.

Mwesige said his team had identified 98 black spots, 28 of them in trading centres along the corridor—meaning that for a stretch of 340km, there is a black spot for every 3.5km. He said one of the challenges road designers are facing in Uganda is the ever mushrooming illegal private property near the highways.

“We have sections where schools are built in a high speed section of the highways yet the schools have no perimeter fences and school children just run into the roads eventually getting knocked.”

Mwesige said dealing with safety design on Ugandan roads is similar to what doctors do to fight disease outbreaks; identifying patterns and fixing the anomalies.

“Currently anything being done on safety is based on guesswork,” he said, “There is need for UNRA to develop a proper accident data collection and storage mechanism as part safety appraisal of the designs and maintenance.”

Reduce speed limit

Perhaps, in an attempt to look for a long lasting solution to the senseless deaths on Uganda’s roads, Alex Ruhunda, the MP for Fort Portal Central Division in western Uganda, moved a motion in Parliament in December, last year, urging the government to strengthen efforts for promoting road safety countrywide.

Ruhunda suggested that the government increases funding for road safety programmes and activities especially the Department of Traffic and Road Safety in the Ministry of Works and Transport and the Directorate of Traffic Police.

He said these two departments should also get more human resources and modern equipment as well as consider reducing the speed limit for urban areas, especially the highly built-up areas and school zones from 50km/hr to 30km/hr.

Ruhunda also suggested a reduction in blood alcohol content from the current 0.08mg/100ml
to 0.05mg/100ml for the general drivers and 0.02mg/100ml for young and novice drivers and commercial drivers.

Similarly, the Road Safety Advocacy Coalition Uganda (ROSACU) recently recommended that the Minister of Works and Transport “urgently enact speed regulations under the Roads Act, 2019.”

“The Coalition suggests the government considers putting in place interim policy solutions as the road safety stakeholders await the completion of the updated speed limit regulations,” the non-profit organisation noted in its brief.

Indeed, the Minister of Works and Transport, Gen. Edward Katumba Wamala, has in the past agreed that a 5% reduction in speed by motorists would reduce fatalities on the roads by 30%.

Wamala said speeding makes driving more dangerous because it increases the likelihood that a driver will lose control of the vehicle. He said speeding not only reduces a vehicle’s ability to brake, a situation which endangers the lives of motor vehicle occupants, cyclists and the pedestrians.

Seat Belts save lives

UBC Radio story by Sarah Mawere

Accessible via this link: https://on.soundcloud.com/oejrM
J udith Kampire woke up to a bright morning and headed for work with her husband, Abdallah Mukaas, on a motorcycle (bodaboda). They did not make it. "My husband was trying to avoid a head-on collision with a bicycle cyclist. He tried to save a life, but almost ended up,“ Kampire says.

Kampire and Mukaas fell on the tarmac at Busega on the Kampala-Masaka road. This is where she had a nasty encounter with a fuel tanker. Kampire got trapped in the rear tyres of the 40-tonne fuel trailer.

That was on December 3, 2018. "I felt the humongous tyres of the moving truck crushing my right leg,” she told Saturday Vision in an interview recently. "I was in pain, but thankful to God that I was still alive.”

Kampire’s husband was lying helplessly on the road, with his leg badly injured. Kampire, a mother of two, is also a former sales manager at one of the insurance companies in Kampala. Four months before the accident, she had given birth, under a caesarean section.

“We lost everything we had, including three plots of land. So far, we have spent over sh70bn on medication. At Mengo Hospital, I had six surgeries and each cost sh1.5m.”

One week after the accident, Kampire was refered to CORSU Rehabilitation Hospital on Entebbe Road, for further treatment. “At CORSU, we spent approximately sh7m. Though I had hoped for plastic surgery, doctors instead opted for amputation. The operation was sh500,000. Initially, it was below the knee. However, when my condition worsened, I had to go for another cut above the knee,” Kampire said.

She explains how loss of the limb is a lifetime challenge, coupled with chronic pain and trauma. The physical and emotional adjustment to losing a limb is a gradual process.

“Due to trauma and stigma, many amputees need rehabilitation to cope with the new perspective of life,” Kampire explained.

Before you jump on a motor cycle to run an errand, Kampire advised you to remember that treatment after a serious crash, and the cost of the artificial limbs after amputation is expensive.

“With support from my family and friends, I bought an artificial limb at sh1.5m. Since I am an upper thigh amputee, I needed another sh500,000 for the belt for the artificial limb,” Kampire said.

DIABETES

Besides Kampire’s ordeal, some amputations are as a result of more than road crashes.

Rachel Muhir, a former laboratory assistant at King’s College, Budu, said she lost half of her leg due to diabetes. “I started feeling pain on my toes in April 2020. When the first big toe on my feet became black, little did I know that I was diabetic,” Muhir said.

Then, the foot started coming out. In 2020, she went to Mulago Hospital for diagnosis. Because his condition was worsening, the doctors referred her to Kikuddu for amputation.

"At first, I was afraid because I would not imagine life without a leg," Muhir said. "But when the pain became unbearable, I accepted." Muhir, a mother of two and a resident of Budu, in Wakiso district, said.

After amputation, Muhir, who is married to Fred Muhir, noted that, though the pain had reduced, the cost of treatment for diabetes also became an economic burden. It included treatment, dressing and medication on the wound.

She spent three months at Kikuddu Hospital. With support from family, friends, relatives and members of St Steven’s Church Budu, Muhir has so far spent about sh1bn on treatment and transport. She said the family and church members raised sh4bn. After amputation, she had to go to Mulago daily, for exercises on how to use the artificial leg.

COST OF ARTIFICIAL LIMBS

The founder of Amputee Self-Help Network Uganda, Charlotte Kangume, said prices of artificial limbs depend on the site, height and where one buys it from. In some places, prosthetic legs cost sh13.5m.

Kangume said she bought hers at sh13.5m. "Repair of an artificial leg is expensive. Recently, I broke the knee part, and spent sh487,000 on spares." To be able to amputees overcome stigma, Kangume explained the need for social support and acceptance.

According to the deputy senior orthopaedic technologist at Mulago Hospital, Rashid Kumba, the prices of artificial limbs depend on the level of amputation.

“Our prices are subsidised, compared to the charges in private facilities. Since most people involved in road crashes are vulnerable Ugandans, at Mulago, artificial limbs don’t go beyond sh13m,” Kumba said.

He said an artificial limb above the knee costs sh1.4m, for below the knee, it is sh800,000, and in the upper limbs (hands), it costs about sh3.5m.

The manager of the orthopaedic workshop at Mulago, James Kiggundu, noted that they lack materials required for making prosthetic legs. At regional referral hospitals, orthopaedic workshops have inadequate supplies.

In a study conducted by the board of orthopaedic department at CORSU, Dr Pius Muhimba and the orthopaedic surgeon at Mulago National Referral Hospital, Dr Alex Bananira, to assess the indications for amputation and the changes in trends for indications of amputations over 10 years, Mulago trauma accounted for the highest number of amputations.

Baringa said from July 2021 to March this year, all the 60 amputations conducted were linked to road accidents. Besides road crashes, Baringa said, there are also increasing numbers of amputations resulting from diabetes over the years.

According to the study, majority of the amputations were in the lower limbs and that five of the patients had multiple limb amputations. "The femoral (above the knee) amputations were the most commonly performed procedure (56-69%) while elbow disarticulations were the least performed (0.9%).”

ROAD SAFETY CAMPAIGNS

On the issues of road safety campaigns, the executive director of Hope for Victims of Traffic Accidents, Sam Bangira, said although the road safety campaigns focus on awareness, Uganda needs to conduct a national yearlong road safety campaign. Due to lack of coordination, Bangira said for most cases, where they have budgeted recently, they have not seen any driver being prosecuted because of poor crash investigations.

PREVENTING ROAD CRASHES

To reduce road carnage, the spokesman of the Directorate of Traffic and Road Safety, Faisal Namwamba, said road safety begins with the road user.

Don’t only look at cars, look at children crossing the road, pedestrians using the road, bicycle riders, motorcyclists and road vendors.

Additionally, Namwamba said: “Don’t use the road reserve for parking vehicles. Leave the road reserve open so that in case of an accident, a person has an escape route. We can fight carnage together because it is a joint duty of all road users.”

To be able to penalise reckless drivers who commit offences on the road, Namwamba said they have beefed up their deployment on the highways, mobilised manpower and also armed speed guns to curb speeding.

This story was supported by the Media Council for Excellence, through training on road safety.
How Motor Third Party Insurance fails accident victims

By Zurah Nakabugo

Hildah Twongire 40, a resident of Jinja town, is among many Ugandans who are bitter with the old Motor Third Party (MTP) Insurance Act.

The Act, which was enacted in 1989, currently compensates a maximum of only Shs 1m after road crash damages, even if the victim spends over Shs 50m on her treatment. To make it worse, the Act can reduce the amount of compensation from Shs 1m to Shs 100,000 if the victims were many in the vehicle.

A UN report says that Uganda loses about 10 people per day in road crashes, mainly due to speeding, and the death toll is the highest in East Africa. However, many victims are not compensated under the MTP insurance act.
due to the slow pace in processing claims. Twongire, who was involved in an accident in October 2019, on her way to Mbarara to buy matooke, is currently using an artificial limb after losing her right arm.

“I lost a lot of blood and I paid about Shs 1m for an operation at Masaka regional referral hospital, where my arm was amputated,” she says.

Twongire was referred to Mulago hospital, Kampala for further treatment, and later to Kiruddu hospital. She says she has spent more than Shs 15m on treatment for three months.

“In total, I spent over Shs 15m on the treatment within three months only. I used all the capital I had for my business. I got loans and friends also contributed to save my life. They cut part of my thigh and grafted the wound to cure fast,” she says.

Twongire says doctors at Kiruddu later connected her to Hope for Victims of Traffic Accidents (HOVITA) and Uganda Insurers’ Association (UIA) to assist her in claiming for compensation and seeking for an artificial arm.

“I started the compensation process by getting medical reports and bills, police reports and others. After several months of claiming in vain for police report, I had to part with about Shs 2m to police to get it,” she said.

“However, I got shocked with the compensation of only Shs 1m against a total bill of about Shs 15 million I had spent on treatment,” she added.

Ibrahim Hussein Webaale, 62, a driver with YY coaches, also got an accident in Lira district.

“I broke my thigh. I spent over Shs 10m on treatment and spent two years without working. The truck I was driving had comprehensive insurance but I failed to be compensated due to unclear reasons,” he says.

(IRA)
Sampa Nakhaima, the communications officer, at Insurance Regulatory Authority of Uganda, says most drivers don’t get workers’ compensation because they are employed without a contract and, therefore, have no legal backing.

“Workers’ compensation is paid to the insurance company by the employers and applies where there is a valid and running formal contract,” he says.

“Also, taxi and bus drivers are not compensated under MTP insurance, since they are treated as the first party, not qualifying for it. Drivers and conductors are compensated under motor comprehensive insurance,” Nakhaima adds.

“Most victims are not compensated because they don’t know the right procedures of lodging compensation claims and others use fake insurance stickers,” he says.

Insurance companies compensate claims that are fully supported by required documents and if one document is missing, they don’t pay.

“Compensation also delays due to delays with letters of administration, investigations on fraud medical receipts to avoid inflated bills and family conflicts to choose the right person to receive payments,” Badru Bengo, the life and pensions manager at Uganda Insurers’ Association, says.

Nakhaima says parliament is reviewing the Motor Third Party Insurance Act and they are proposing to increase the amount from Shs 1m to a figure that meets the current living standards.
“They are also proposing to amend the policy, to cover not only the third party but even the first party, which covers the driver, conductor and the rider,” he says.

Dr Michael Muhumuza, the senior consultant, Neurosurgeon, Mulago hospital, says, the current maximum Motor Third Party insurance compensation of Shs 1m is too little.

“Most road crash victims with brain damages need to be operated and the minor brain surgery costs about Shs 10m, while the serious one costs about Shs 30m,” he says.

He adds: “Every week, we receive 35 to 70 road crash patients at the neurosurgeon ward, and all these patients have brain damage related cases that need expensive operations,” he said.

**Orthopaedic Implants**

According to Dr Norbert Orwotho, the clinical head, directorate of Surgery, Mulago hospital, insurance companies have kept silent about compensation processes. That is why few people get compensated yet road crashes increase daily. He appealed to insurance companies to pay hospital bills for road crash victims since many victims are ignorant about claims.

Ibrahim Kayondo, the secretary of the Uganda Bus Drivers’ Association, says due to ignorance and difficulties in claiming for insurance compensations, many victims prefer getting loans to treat themselves.

He explained that most bus owners only pay for comprehensive insurance, which is about Shs 75m annually for each bus but avoid paying worker’s compensation worth Shs 840,000 annually to cover drivers.

“Most victims can’t afford the cost of hiring lawyers for civil compensation since they spend a lot of money on treatment, and this fails them on compensation claims,” he says.

Dr Abdul Byakatonda, a Workers’ MP, calls for worker’s compensation policy review like worker-man’s compensation, where some of the workers are permanently disabled and others lose lives.

Bengo of the Uganda Insurers’ Association said last year, insurance companies collected a total of Shs 160bn from motor vehicles and they paid Shs 60bn for both MTP and comprehensive insurance as compensation claims.

He says since many people lost trust in insurance companies, they have started an awareness campaign that says “if people don’t come to us claiming for compensation, let us go to them.”

According to the annual crime police report 2021, a total of 3,757 people died in crashes last year while 18,305 people were injured. The report shows an increase of 42 per cent in the number of crashes occurred in 2021, to 17,443 from 12,249 in 2020.

The increase in crashes was attributed to over speeding, drunk driving, and phone use while driving. Sam Bambanza, the executive director HOVITA, says last month, they helped Twongire to get an artificial limb worth Shs 6m. They also helped her to be compensated with Shs 1m.

Dr Olive Kobusingye, the director, Trauma, Injuries and Disability programme at the Makerere University School of Public Health, says the poor planning of the transport sector is the major cause of crashes.

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Amputee Self-Help Network-Uganda

Every day 10 people on average die in road traffic crashes in Uganda, which is the highest in East Africa, according to police and the United Nations Economic Commission for Africa’s Road Safety Performance Review report for Uganda published in 2018. The World Health Organisation puts the annual fatalities to over 10,000 people. Thousands more are left with life-changing injuries, some become destitute. Many of those involved in the crashes are young people whose lives and dreams are suddenly cut short. Kangume recounted her story to a group of undergoing road safety journalist training.

Kangume, 28, is the co-founder of Amputee Self-Help Network-Uganda; an organisation that helps road crash victims to cope with the aftermath. She co-founded it in 2019 with Alex Munyambabazi, an amputee. They met in hospital where Kangume also had her leg amputated.

Most amputees in Uganda are because of road crashes, bodaboda and car crashes.

“It is so unfortunate that simple things are making us lose a leg or a life,” Kangume says.

She remembers the night of January 26, 2018 like it just happened yesterday. “We were coming from a graduation party and were dropping a friend to her house. We were drunk,” Kangume says.

Her friend’s neighbourhood had a narrow road which was flanked by a storm water channel. So as the driver tried to manoeuvre and turn around the car after Kangume’s friend had reached her home, one of the car’s tyres got stuck in the trench. That marked the genesis of Kangume’s troubles.
Even when they were all drunk and tired, they tried to push the car out of the trench with little success. Kangume soon gave up the task and decided to lean against a wall fence—metres away from the scene.

Soon, a man from the neighbourhood came around to help. He got into the driver’s seat and tried to steer the car out of the trench but suddenly accelerated and the car jerked forward and crashed Kangume’s lower body damaging her left leg.

“My friends were all intoxicated and only one of them was sober and could help me go to hospital to receive first aid,” she says.

At first it was thought she would be treated and go back home.

“They had just put plates in the knee because they thought I had just got a simple fracture. Life was moving on well and I was even being oriented to walk on crutches,” she says.

But then the injured leg started turning black. The doctor had not noticed immediately that a vein in the back calf area of the leg had been damaged. She was told she had suffered internal bleeding which also caused gangrene.

The medics said they were going to try all they could but could not promise that Kangume would not lose her leg. She was eventually told her leg would be amputated.

“When the doctors told me I was going to lose my leg, it was devastation, not only for me but also for my family,” she says.

She says, at first, everyone was against the medical advice.

“I was heartbroken. I did not know how life was going to be for me after the leg is amputated. I am a very social being; I love working; I love going places and adventure. I always want to stand out and I want to be a different girl. So when they told me that, I first prayed.”

“I want to be honest, I had the faith that God would make a last minute change in the theatre because my friends were always in hospital praying with me. I told God that I know I have been a crazy girl but if it is not for me, do it for these people that trust you to make a difference in my life.”

The miracle Kangume expected never came. So she prepared for the surgery. “I told my mother that I wanted to do research about the life of an amputee more so for a girl like me. I also told my friends to get contacts of any amputee they met on the streets of Kampala.”

She says she wanted to talk to anyone so she could get an idea of what she was getting into. She also did the internet research and saw that the amputees were actually going on with their lives.

“I realised that the world has changed so rapidly. She discovered “cool prosthetic limbs” that one could live their lives normally.”

So, off to the theatre, she went. Sadly, her trauma almost began instantly. First, there was a power outage during the operation. She saw doctors panicking.

“They were using ventilator lights and portable equipment to carry on with the surgery. It is so amazing that the operation was successful,” she says, “It is by God’s grace that I did not lose both legs or get paralyzed from the waist downwards.”

But Kangume would face up to more reality after the surgery.

**Life’s changes**

“It soon hit me that I was leaving theatre without a leg. I was so angry at everybody and anything. I was telling the medics to scratch my leg but the leg was no longer there. They all thought I was going cuckoos.”
“At that moment, I just wanted to see my mother because I felt she was the only one who could understand me and be there with me,” she says. “The beauty of it all is that I had great support and a few friends.”

“But I also lost friends in that whole time. I have friends that blocked me immediately they knew I was losing my leg. Even the friend we were dropping after the graduation party blocked me everywhere.”

Kangume worried about her livelihood. She was among the family’s bread earners but she now thought she would be out of a job. She says she was working as an administrator and bursar at a nursery school in Kampala.

“I was not sure I would still have the job because my job entails a lot of movements. I was worried my boss would not retain me. But then, my boss came around and told me anytime you are ready, you can come and work.”

“I prayed and thanked Jesus because I knew I had a job that can cater for my needs because this whole situation is not cheap when you don’t have money.” So she embarked on her road to rehabilitation.

The first week was so traumatic. I had to learn how to walk since most hospitals in Uganda don’t have such rehabilitation programmes.

“I was lucky that I got some education from the hospital where I got the surgery but even with that education I kept falling over. Every fall was traumatic because when you fall, you forget that you don’t have the natural leg and you fall on the wounded leg.”

“Every time I fell, everyone home would first freeze because they did not know what to do. So I would stay where I have fallen until a doctor in the neighbourhood arrives to give me a painkiller. The pain was so excruciating.”

She says she spent an entire week not wanting to talk to anyone or go out anywhere. “I could wake up one morning and feel frustrated about everything. You are frustrated that you have to get crutches and go to the bathroom.”

“To be honest, I was mentally damaged and emotional trauma is part of me.” “I am scared every time I see the road side trenches. That explains why I rarely use boda bodas. Whenever I use one, it is scary because they are so fast and when I am driving, I try to keep away from the trenches as much as possible.”

Over the last three years since the accident, Kangume says she has adjusted quickly. She says she began evaluating her life and wanted to start afresh. So she started by ending her relationship with her boyfriend.

“I broke-up with him because I did not want him to be with me out of pity. I wanted to start afresh, meet someone when I was already in this new situation so they see what they are getting into,” she says, “I initiated the break-up. He still wants us to be together but I don’t feel it.” She also says she gave up drinking.

Kangume says she is now more invested in her non-profit—the Amputee Self-Help Network-Uganda. She recalls how she met the co-founder, Munyambabazi, just before she left hospital.

“When we met, I told him we really need to do something about the situation of amputees in Uganda. Fortunately, he had harboured the same idea and so things happened.”

At Amputee Self-Help Network-Uganda, they believe depression, which often affects amputees, pushes many into alcohol and drug use.

“When I had just left hospital I was drinking a lot because it could help ease the pain of losing a leg,” Kangume recalls.
Kangume says she knows so many people who are still struggling with the new reality of being an amputee.

“I know someone who has not left their bedroom for one and half years,” she says and blames that on the way society reacts to amputees.

“You have people asking you lots of questions,” she says, “It’s a lot of emotional trauma because you are also asking yourself a lot of questions.”

She says some questions are too intrusive: Are you married? Do you have children? Sometimes the hurt comes from within your family and mentions a patient who recently lost his leg and his family; including his own children, suddenly became disrespectful towards him.

“Family is supposed to be supportive but most family members and friends think you are now useless and you are going to be a burden to them yet sometimes all we want is to talk to someone,” she says, “The best way to help people like us is giving us a listening ear; stand with us through it all because a lot is happening.”

Kangume says the Amputee Self-Help Network-Uganda currently supports about 100 people.

“We have a WhatsApp group which now has about 70 people who have smart phones. But I am sure there are many more out there without smart phones. We are still looking for ways of reaching out to them.”

“I particularly want to encourage girls and women to go on with their lives. I tell them that yes, they have lost a body part but they are still beautiful; I tell them that they still have it all and they should be body-positive and confident, and nothing should put them down.”

She believes many others have been inspired to live their lives positively because they have seen members of Self-Help Network-Uganda move around with exposed prosthetic limbs.

She says exposing her prosthetic leg has its pluses.

“It is also an opportunity to tell people that yes, I am an amputee but I am doing all this. I am a baker and I am advocating for different things and I am also a part time lawyer.

“This condition cannot stop me from doing anything I want. I love motorsport and when we entered the motorsport competition last year, people did not think we could drive but we beat so many teams and finished sixth. That should show people that there is nothing we cannot do.”

She says she is particularly surprised at the way employers in the corporate world treat people with disabilities. “People in the corporate world don’t think we can make it or we are as fast as the able-bodied colleagues but we are so intelligent and we have a lot to give the companies out there, only if they could give us a chance.”

In response, the Amputee Self-Help Network-Uganda has come out with several projects that are catering for home skilling including bakery skills, art and crafts, electrical works, and woodwork.

“We feel if you can’t get a formal job, it is better you acquire practical skills that you can use and to bring in money, as long as you are creative.”

Road safety ambassador

Sadly, road crashes remain a big part of her life. Recently, she says, her brother was involved in a crash.

“The whole car got all smashed but because he had a seat belt he got out all fine,” she says, “That was a good thing for our family because
we could have easily lost someone in the family.”

Kangume who has become a road safety ambassador of sorts says it’s dangerous that Ugandans do not wear seat belts because she knows seat belts save lives. She also advocates for responsible driving, including not driving under the influence of alcohol. She has no kind words for people who drive cars with government-registered plates.

“They drive so carelessly with no regard for other road users,” she says.

Going forward, Kangume says she wants to become “a big mentor” of young girls and boys around the world.

“I want these boys and girls to look at me and say ‘I want to be strong and positive like her.’ I want them to be brave and positive like me and know that they can achieve anything they put their minds to. That will give me joy.”

She also hopes to grow her organisation into a big rehabilitation centre taking care of amputees. “We want to offer the psychosocial therapy that people of my kind badly need. Out there is not easy when you are dealing with disability.”

She says Kampala’s transport system is quite challenging but so are other public spaces. She says she does not use taxis because she finds most of the operators mean. She recalls an incident when a friend convinced her to ride a taxi with him and it went badly.

“Even before I could hop into the taxi, the driver bluntly told me that his taxi can’t carry disabled people.

“That was so emotionally torturing for someone like me because I never set out to be lame. People forget that this is something that can happen to anyone anytime.”

Kangume says she knows that God gave her a second chance to life to change the world in any way she can and she takes her Christian beliefs seriously.

“I know I have been through a lot and most people would think I don’t like God but actually I love that ‘gentleman,’” she says, “I know that even when I was stubborn, he stood by me and he is the very reason I am alive.”
Why funding is vital in promoting road safety

Much as there has been effort by the Kampala Capital City Authority (KCCA) to fix roads within the city and its suburbs, many remain unsafe for road users. For instance, the Bukoto-Kisaasi Road that is approximately three kilometres from the Bukoto to Kisaasi roundabout, is narrow and can only accommodate two lanes.

During rush hour, a third lane is created by reckless motorists, which makes the road unsafe, especially for pedestrians who have to negotiate between cars and open drains on either side of the road. Covering the drains with raised concrete slabs would provide a space for pedestrians (a

What you need to know:

Without secure and stable funding, it is hard to sustain the policies required to achieve lasting reductions in casualty levels.

Roland Derrick Nasasira
road user category that is vulnerable to road crash deaths) to walk.

Ideally, a standard zebra crossing should not to be at the same level as the road. It should protrude some inches above the road surface, with speed controlling rumble strips built before approaching the zebra crossing. Unfortunately, most crossings in Kampala and on most highways are just painted. When it rains, the paint is washed away, making the crossings non-existent. School zones such as Lugogo bypass with Kololo Secondary School and City High School, among others, have no gazetted and protected walkways for students who are left at the mercy of speeding motorists and motorcyclists.

Also, Jinja Road junction at Kitgum House is a traffic conflict spot, where, quite often, motorcyclists are knocked by motorists. In addition to traffic lights and traffic officers at the spot, a junction box, similar to that at Parliament Avenue, Kira Road traffic lights and Bukoto traffic lights could come in handy and help control traffic flow and prevent crashes. Because of poor funding, there is no road maintenance, especially putting up of road markings and sign posts, all of which affect proper road usage.

While receiving the global plan for the second United Nations Decade of Action for Road Safety 2021-2030 on October 28, 2021 at the ministry headquarters in Kampala, the minister for Works and Transport, Gen Edward Katumba Wamala, noted with concern the fact that road safety is considered a consumptive expenditure during the budgeting process.

“As long as road safety money is treated as consumptive, we shall lose more people. If it means looking for ways of sourcing for funding and support for the road safety campaign, let us do that because it is something we must do,” Katumba said.

Katumba’s outcry comes at a time when his ministry’s road safety activities were allocated a meagre Shs2 billion for the new financial year, yet he says mass media campaigns alone, a component of road safety, requires Shs5 billion.

The required funding

For the government to significantly reduce the number of road crashes, Katumba says, it requires between Shs10 billion to Shs30 billion per financial year. This would address issues of road safety management such as periodic and mandatory vehicle inspection, mass media campaigns such as caravans across all regions, public awareness among all categories of road users, post-crash responses and printing of road safety materials such as the Traffic and Road Safety Act, the Roads Act and the Highway Code in different local languages. This would help the ministry to reach out to the public and through such campaigns encourage a road safety mindset change, among other cross cutting issues.

“Through repeated sensitisation, we need to remind drivers of their responsibilities and consequences of their actions on the road. We need to send messages that may be scary but keep people alive so that a driver knows that if they are driving to Masaka, for example, they must be aware of the black spots and drive cautiously,” Katumba explains.

“We scramble within the available meagre budget. Sometimes we solicit for small funds and then apply it where it is necessary. If you need Shs30 billion for a financial year and you only get Shs600m and this is spent in one day, then you are left with nothing. For example, to run a road safety caravan from Kampala to Mbarara City (including playing road safety
messages and other sensitisation campaigns) will not cost less than Shs300m,” he adds.

The burden
According to the Uganda Bureau of Statistics (UBOS) 2017/2018 statistical abstract, Uganda loses approximately $1.2 billion, which is approximately Shs5 trillion due to road crashes annually, representing five percent of the country’s Gross Domestic Product.

“To avert this loss, the government needs to invest in road safety. The biggest percentage of public and private transportation of people and cargo is by road. It is also key for attracting investors in all sectors. If it is not reliable and is a risk for investment, then investors will be deterred from investing,” says Peter Tibigambwa, the chief executive officer, Safe Way Right Way Uganda.

From a road construction perspective, 85 percent of the government’s budget is allocated to road network development and 15 percent goes into overheads and administrative issues. Katumba is worried that road safety does not feature anywhere. This, to him, means doing things the same way and expecting different results yet improved roads and road crashes go hand-in-hand.

The more roads constructed, the more crashes likely to be registered because improved roads attract speed, which is one of the main risk factors. Worse still is that the money collected from issuing of express penalty scheme tickets goes to police as a whole, yet it should specifically be directed to the traffic directorate to address road safety challenges.

According to a source within the Ministry of Works and Transport who prefers anonymity, the funding for road safety is released quarterly. Even then, it is sometimes a drop in the ocean to what is budgeted for. The source also reveals that for the last 15 years, the ministry has not had a budget for road safety.

“There are times a road crash happens and there is no money to travel to the scene to write a crash scene report to inform stakeholders about the next course of action. It is how bad the situation is,” the source says.

The number of people Uganda loses per day increased from 10 to 12 per day from January to May 2022, according to previous Uganda traffic police monthly reports. Katumba says most of the road crashes, for instance the recent one on Kyenjoyo-Fort Portal Road involving a Link bus that claimed 22 lives, and the one on Nakalama-Tirinyi-Mbale road could have been prevented with sensitisation messages through mass media campaigns and public sensitisation about road safety.

Statistics
According to the 2021 Uganda Police annual crime report, there was a 42 percent increase in the number of crashes from 12,249 in 2020 to 17,443 in 2021. During the period, 3,757 crashes were fatal, and 4,616 were minor.

There were 18,305 casualties from crashes in 2021, a reduction of 11 percent. Persons killed reduced by six percent while persons seriously injured reduced by 13 percent and those that sustained minor injuries reduced by 17 percent.
In addition to the 750 people killed in the two hours of 1800 to 2000 hrs every year, at least another 1,000 are left with dreadful injuries for which they have to incur expenses for the rest of their life. For instance, Sonia Kyoshaba whose schoolmates had to raise over 23 million shillings for her emergency treatment now has to spend 10,000 everyday on toilet disposal using colostomy bags.

Sonia Kyoshaba was an active university student of Hotel Management who took a Boda Boda intending to reach her hostel in time to beat an assignment deadline when a reckless driver knocked her and she lost consciousness. When she woke up in hospital, she had lost her limb up to the hip and could no longer defecate, condemned to a lifetime of using special bags connected to her intestine that cost her 10,000 everyday.
Yet Kyoshaba is among the lucky 1,000 victims who survive death and nursed permanent injuries got on the country's roads from 6.00pm to 8pm. Another 750 victims are killed on the roads in the same period.

According to traffic and road safety statistics for the past three years, this number could be even more since some crash victims die after leaving the hospital, and their cause of death not recorded accurately.

For instance, 3,689 people died in road crashes in 2018 but 781 died between 6 pm and 8 pm which was 21 percent of the death toll.

In 2019, out of 3,880 who suffered accidents, 790 died between 6pm and 8pm. The situation was not any better in 2020 as 805 out of 3,663 victims lost their lives on the road between 6 pm and 8pm which was a 22 percent raise.

Sonia Kyoshaba, was pursuing Hotel Management at Kyambogo University, lost the whole of her right limb last year the cause was speeding by an oncoming car, which was overtaking recklessly. Kyoshaba had the accident in Kisaasi, Nakawa division of Kampala.

"I saw two vehicles coming from the opposite direction and the second one overtook. That is the last thing I saw and it knocked us down," recalls the young lady, who is still terrible pain. "I was taken to Mulago hospital where I was amputated and I lost the whole right limb from the pelvis.

Jimmy Sserunkuma, a teacher, attributes the high numbers of evening crashes to absence of traffic officers on roads. Sserunkuma, says he rarely finds traffic officers on roads between 7pm and 9pm.

"I often drive in the evening hours but I don’t see traffic officers on road even at busy road junctions. For example, I come from Goma Division of Mukono Municipality, but you find no police officers at junctions like Kyaliwajjala, Namugongo or Kira. These junctions are always very busy up to around 10pm," Sserunkuma said.
Rogers Kawuma Nsereko, the Kampala metropolitan traffic police commander, says it would be unfair to blame police officers for the huge numbers of road fatalities between 6pm and 8pm. Nsereko believes there is recklessness of drivers, pedestrians and motorcyclists around that time yet there is a lot of activities as people are driving back home and doing last minutes shopping.

“You should know that our traffic officers are also human beings,” Nsereko says. “Once the jam has reduced, it also time for our officers to fall out. Stopping accidents is not majorly ours. You as a driver or pedestrian it is your responsibility to ensure you are not knocked. It would be unfair to blame traffic police for accidents. We cannot be everywhere every time to ensure your safety.”

Nsereko adds that Kampala Metropolitan needs over 1,100 traffic personnel compared to huge numbers of vehicles, motorcycles and pedestrians. But the area only has about 700 meaning there is deficit of more than 400 personnel.

Sam Bambaza, the executive director Hope for Victims of Traffic Accidents -HOVITA, believes the ever increasing road fatalities and injuries are as a result of neglected post-crash investigations.

Bambaza, says there is need to have a chain of responsibility where a road crash is probed from the driver, manager of the transport company in cases of buses, to the owners and the regulator.

“What you need to know is that all these crashes are not investigated,” Bambaza says. “The moment you don’t investigate; you are treating something you don’t know. Police tend to focus on the criminality other than investigating to solve the problem so that such kind of crash doesn’t occur.”

Bambaza adds: “We don’t have chain responsibility policy. Chain of responsibility means that not only the driver has the control of transport means and should not be the only one held responsible. The owner might not be servicing the car, not buying spare parts. The regulator should be held responsible. Why would a driver who has crashed one bus be allowed to driver another for example?”

Away from the more than 700 people who die in road crashes between 6pm and 8pm every year, at least 1,000 survive with dreadful injuries. Such injuries leave many people incurring expenses for the rest of their life, like Kyoshaba with her schoolmates spent over 23 million shillings in medical expenses and is currently living with a colostomy on one side of her belly, costing her 10,000 Shillings every day.
Namuyiga is on a mission
to champion road safety in Kampala

What you need to know:

Irene Namuyiga says most
road designs prioritise vehicles
over pedestrians and cyclists,
which poses a challenge
to road safety. She wants
road designers to focus on
walking and cycling as modes
of transportation. She also
believes that no matter how
beautiful the infrastructure is,
if people are still comfortable
parking on walkways and
getting away with many traffic	offences, progress in the public
transport will remain a myth.

By Roland Derrick Nasasira

When Irene Namuyiga is not in the
field looking out for black spots
on the road, or high pedestrian
volume areas that need zebra crossings,
she is busy developing and reviewing
concepts to support the public
transport sector to enhance road safety
interventions in Kampala Capital City
Authority (KCCA).

This has been her kind of work since
2017 and earned her a place at the table
as the only female road safety engineer
at KCCA. A civil engineer by profession,
Namuyiga joined KCCA in 2012 as a
road technician. Her first duty station was at Nakawa Division and she had to make time for her Bachelor’s degree in roads engineering at Kyambogo University.

When she graduated, she was appointed acting roads officer in Kawempe Division, in 2014. Two years later, she was taken to Rubaga Division to serve the same role.

**Early start**

“At Rubaga, KCCA was running sensitisation campaign for the Namirembe road non-motorised transport corridor. This was my first time to take part in a road safety initiative aimed at walking and cycling. It is here that I developed interest in road safety,” Namuyiga recounts.

“At Rubaga, KCCA was running sensitisation campaign for the Namirembe road non-motorised transport corridor. This was my first time to take part in a road safety initiative aimed at walking and cycling. It is here that I developed interest in road safety,” Namuyiga recounts.

In 2017, an opportunity to travel to Japan to train in urban public transport, majoring in road safety came calling. The training, introduced Namuyiga to transport planning, public transport, road safety and how they both intertwine. “When I returned to Uganda, my supervisor then asked me to join the transport planning department at Rubaga Division. I decided to focus on road safety,” she says. Namuyiga enrolled for a Master’s of Science in Transport Planning and Engineering at Edinburgh University in 2019. The same year, she was officially moved to the road safety department.

Namuyiga’s roles as a road safety engineer involve assessment of the city road network to check for road crash black spots, develop counter measures, assessing crossing points, pedestrian walkways, and assessment of different high pedestrian areas.

She uses data from the traffic police directorate to assess high risk areas and propose interventions. When funds are available, she procures a contractor to implement the interventions.

“If it is a black spot, I determine whether it is human behaviour, infrastructure or otherwise. Most road users do not like speed bumps and rumble strips but the authority installs them in areas where motorists are reckless and need to slow down. This is what my fieldwork entails,” she adds.

**The cost**

Namuyiga says responsible authorities need to focus on measures to reduce fatalities or the injuries that happen to road users. “Fractures, amputated limbs and spine damage are permanent injuries to victims. They cause brain damage to victims. The survivors or witnesses who see people die, live with the mental trauma of road crashes. It is an expensive venture to be involved in a crash directly or indirectly,” Namuyiga explains.

**Career highlights**

Increased crossing points within Kampala City, spearheading policies and regulations to improve road safety such as the junction boxes, also known as yellow boxes such as the one at Parliament Avenue and Kiira Road police station are some of the successes Namuyiga has registered. KCCA has a road safety strategic plan from which it developed an action plan. It has also established collaborations between different stakeholders, something that Namuyiga says has earned KCCA visibility in terms of road safety.
“I can call someone at the Ministry of Works and Transport or Uganda National Roads Authority or any other organisation working around road safety and they will respond. We have started external collaborations to undertake different activities such as cycling and road safety related events,” she says.

Turning point

During her civil engineering and building course at Kyambogo University, she was the only female in her class. When her masonry works lecturer tasked her to carry 10 eight inch blocks, her male coursemate offered to help. But this didn’t go down well with her lecturer.

“Let her carry them herself. It is always going to be hard. No one will keep doing it for her,” Namuyiga recalls.

“This was the defining moment of my career as a woman. You must carry your load and weight,” Namuyiga says.

Some of the countries she has been to for work and leisure include Kenya, Rwanda, Sweden, Japan, Turkey, US and China, where walking and cycling are a lifestyle. She has benchmarked mass transit buses and the metro system, which integrate into the bus system. She hopes some of these interventions are adopted in Kampala.

Namuyiga wants Ugandans to change the driving behaviour and make the roads safe for other users. PHOTO/courtesy

Reducing crashes

Namuyiga believes reducing road accidents in Kampala requires increased enforcement. “Road users get away with so many traffic offences. It should be punitive for someone to cause an accident. Authorities should make it very expensive for people to drive past red traffic light, driving or parking on walkways and causing collisions,” she says.

“Traffic police numbers are currently small. They need to be beefed up and given the necessary tools because the city is big. We also need to reintroduce road safety studies in all curricula at all school levels to promote road safety,” she adds.

Setbacks

Namuyiga says most road designs prioritise vehicles over pedestrians and cyclists, something she says poses a perennial challenge to road safety. She wants road designers to focus on walking and cycling as modes of transportation. “The mindset of road users has to change. No matter how beautiful the infrastructure is, if people are still comfortable parking on walkways and getting away with many traffic offences, we shall never progress in the public transport,” Namuyiga argues.

She explains the transition from the 14-seater mini buses to mass transit will significantly improve road safety. This means there will be less vehicles because people will leave their private vehicles at home and use public transport.

Counting losses

According to Namuyiga, one major cause of road accidents in Kampala City and suburbs is speeding. Previously, the maximum driving speed in urban areas was 50km/hour.

This was, however, reduced to 30km/hr, as per the amended Traffic and Road Safety Act 1998 (Amendment) Act 2020. It is believed that when knocked by a vehicle driven at 30km/hr, there are high chances of surviving with injuries compared to 50km/hr.
She highlights inconsiderate use of roads. The previous annual police crime reports indicates that pedestrians, motorcyclists and their passengers are the largest victims of road crashes. The 2021 Uganda Police Annual Crime Report says there was a 42 percent increase in the number of crashes from 12,249 in 2020 to 17,443 in 2021. More than 3,000 crashes were fatal, and 4,616 survived with minor injuries.

The reports says on average, Uganda loses approximately 10 people per day due to road crashes.

“Whether you are a motorist, motorcyclist or pedestrian, be careful and patient whenever you use the road. Patience creates room for safety of your life and other road users. Plan and start your journey early to avoid unnecessary speeding, she advises.

Excitement among certain categories of road users, especially young motorists between 25 and 35 and disregard for traffic regulatory frameworks such as traffic lights and speed limits also cause accidents.

About road safety
Road safety is a section in transport planning engineering, an area of civil engineering that focuses not only on road development and how people can move efficiently on these roads with safety.

“I detested traffic jam and the time delays that come with it. This sparked my interest in road safety. Losing two hours in travel time in the morning and another two or more in the evening is something I am not comfortable with,” she says.

Namuyiga says contrary to her initial belief that construction of more roads would be the game changer, her experience has shown that the more roads KCCA constructed the more traffic jams increased.

She joined KCCA 10 years ago as a roads technician. Prior to that, she had worked with Build Masters as a site engineer, a works inspector for the maintenance of Nakivubo and other auxiliary channels.
Her typical day is characterised by field works, meeting several internal and external stakeholders, analysing the city network, identifying feasible measures, planning and procuring contractors to implement infrastructural measures.

**Role at KCCA**

She assesses the safety of several roads in the city, safety to vulnerable road users, pedestrians, crossing facilities of roads, plan new crossing facilities at desired lines, designs road safety improvements, ensuring all work is carried out to construction specifications and traffic safety standards as well as overseeing road safety during road projects.

She also review road safety audit reports, prepares treatment matrices for the road safety hazards identified and prioritises implementation and prepares estimates, procures for and supervise road safety infrastructural initiatives around the city.

As part of the City action plan, KCCA plans to engage Ministry of Education and Sports to incorporate road safety education into the schools and tertiary institutions to foster behavioural change alongside safer infrastructure.

**Behavioural change is key**

While KCCA receives funding under which several roads in the city will be rehabilitated, Namuyiga says this will not solve the traffic mess if motorists do not change driving behaviour and acknowledge other road users. “Prioritising vulnerable road users such as persons with disabilities, children, expectant mothers, pedestrians, cyclists and motorcyclists while we enjoy our roads as car owners is important,” she adds.

According to Namuyiga, the first ever Kampala Capital City Road Safety Strategy 2021-2030 was launched last year under the Bloomberg Philanthropies Project. It introduces the Safe systems approach in working towards the global objective of halving the road fatalities and road related injuries by 2030. It highlights the gaps in infrastructure and funding as well as the need to increase efforts towards change in road user behaviour, among others.

During her diploma course, she was the only girl out of 44 students and at bachelor’s level, she was among the five girls out of more than 60 students. Namuyiga says exposing the girl-child to the civil engineering or other science courses and mentorship cannot be overemphasised.

**Safe streets for children to cycle**

The civil engineer plans to promote road safety among her peers (engineers) considering that their role in designing and implementing safer roads, designing and manufacturing safer vehicles, junction improvement as engineers is critical.

“We need streets safe enough for children to cycle to schools. I plan to initiate and make a contribution to sustainable and environmental friendly mobility initiatives,” she says. In Uganda, transportation related activities are estimated to contribute 24 percent towards air pollution.

Besides engineering and road safety, she enjoys nature walks, jogging while listening to podcasts, cycling and swimming. “I treasure friendships, meaningful conversations and family time,” she says.

Dr Maggie Kigozi, Sylvia Nagginda, Maria Kiwanuka, Allen Kagina, Justice Julia Ssebutinde, Mitchelle Obama, The late Queen Elizabeth are some of Namuyiga’s role models.
Thoughts of 3 reporters who participated in ACME training on covering road safety

Ronald Musoke (The Independent)

How the training on road safety affected your journalism.

I had done some road safety reporting before. However, the ACME programme made me appreciate issues surrounding road safety based on national legal and institutional framework and the global, continental, and regional aspects. I can confidently say that I am a much better journalist now.

Aspects of the training you found exciting.

I particularly liked two things from the training. The first was the engagement we had with the key players involved in road safety — senior officials of the Ministry of Works and Transport, Kampala Capital City Authority, traffic police, civil society and even victims of road crashes. This helped us to understand that issues of road safety were in our midst and were real. These people also became our good sources. The second aspect was the practical part. We got out of the training room and went on the streets of Kampala to see the practical aspects of poor road design and use. We also saw KCCA’s new initiatives of making some roads around the city user-friendly, especially providing walkways for pedestrians. We were also able to appreciate the traffic challenges around particular road junctions.

Continuing to cover road safety when the project has ended.

I shall surely continue reporting on road safety even after the project ends.

Four aspects of road safety that are under-covered in Ugandan media.

The economic burden of road safety on road crash survivors and families; indiscipline and impunity on the roads; and vandalism of traffic signage.
How training on road safety affected your journalism.

I acquired both skills and knowledge which I used in my work, and I won both local and international awards in road safety reporting. I made contact with different road safety experts. I have used the skills acquired in road safety reporting to do other stories. I am now the reference point in the newsroom on road safety issues.

Aspects of the training you found exciting.
I enjoyed the background information on road safety contained in documents such as the 2030 Action Plan, WHO and UN reports and Uganda Police reports. I was also touched by the health and economic burden of road crashes on individuals, families, and the country. The research reports and statistical data given to us during training helped me a lot in my reporting skills.

Continuing to cover road safety when the project has ended.
I shall continue writing stories on road safety to save people’s lives.

Four aspects of road safety that are under-covered in Ugandan media.
Post-crash care; road safety funding; safe systems approach; and the quality of drivers on Ugandan roads.

How training in road safety affected your journalism.

The ACME road safety training enlightened my understanding of road safety beyond just reporting about road crashes that happen but capture a wider scope of it. It helped me look deeper. The training also introduced us to a range of useful sources.

Aspects of the training you found exciting.
I liked the use of data and figures as an element of reporting. Statistics bring life to a story, and they help authorities design appropriate responses and interventions.

Continuing to cover road safety when the project has ended.
I shall continue reporting on road safety even after the closure of the project.

Four aspects of road safety that are under-covered in Ugandan media.
First, motor third party insurance compensation cover which is still very little compared to huge costs of treatment for injured persons. Second, the need for mass transit to reduce traffic congestion and road crashes in Kampala. Third, the poor road network in the city. Fourth, the lack of emergency hospitals along highways where crashes occur most.

ZURAH NAKABUGO (The Observer)