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Road Safety Inequity and Inequality – Why is this major public health issue overlooked in comparison to other health and safety issues

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Introduction

Despite the recent yearly increases in road trauma since 2020, despite the social and economic cost to those people directly impacted, and despite the multi-faceted impact of road crashes on the community, preventive action and road trauma support remains underfunded and relatively unsupported in Australia.

This is especially obvious when benchmarking road safety funding to other public health or social issues.

Road safety is often seen as purely an infrastructure matter, and potentially this is where the biggest disconnect occurs, both at a political and a community level.

The aim of this paper is to undertake a narrative review to identify perceptions, key themes, concepts, and trends that currently allow inequalities in road safety.

This report compares prevention and support funding for three major areas of public harm in Australia: road trauma, domestic and family violence, and drowning.

The discussion is based on the central argument that road trauma causes significant death, injury, disability, family disruption and economic cost, yet it is often not framed or funded with the same urgency as other national health and social harm priorities.

Road trauma should be treated as a major preventable public health and social harm issue, not simply an infrastructure issue. It should receive the same levels of support and funding as other major health and wellbeing issues.

While Australia has national strategies for road safety, domestic and family violence, and drowning prevention, the level and visibility of funding for road trauma prevention and post-crash support appears less coordinated and less prominent than funding directed toward domestic violence and drowning.

It must be stressed that it is not the intention of the author to diminish the scale or impact and social costs of the other areas investigated in this paper. Any issue that causes death, injury and social impact is critical to address and support.

What it is aiming to identify is why road trauma is not funded and recognised in proportion to its impact and scale of preventable harm and long-term social cost?

Identifying Road Safety Inequity and Inequality

Road trauma remains one of Australia's most persistent and preventable causes of death, serious injury and long-term disability.

Each year, road crashes affect not only those killed or injured, but also families, workplaces, emergency services, health systems and communities. Despite this, road trauma is often discussed as a transport or enforcement issue rather than as a major public health and social harm issue.

This report compares prevention and support funding for road trauma with funding directed toward domestic and family violence and drowning in Australia.

It argues that while all these issues warrant serious investment, road trauma prevention and support appear to receive less visible, less coordinated and potentially less proportionate funding than the scale of harm suggests.

In 2022, The Australian National University outlined its report titled, the Social Cost of Road Crashes Report for the Bureau of Infrastructure and Transport Research Economics. The report provides the most up to date summary of the financial costs of road crashes in Australia.

Key Report Statistics

- There were an estimated 965,700 annual road crashes between 2016 and 2020 involving approximately 1.7 million vehicles, an increase of 48 per cent compared with the estimated 653,900 crashes involving approximately 1.2 million vehicles in 2006.
- 1,187 people died on average per annum as a result of road crashes between the years 2016-2020, a 26 per cent reduction from 1,602 people in 2006.
- An estimated 38,800 people injured in road crashes were admitted to hospital, 24 per cent up from 31,204 in 2006.
- It was estimated that there were an additional 96,000 people treated for road crash injuries in 2020 who were not admitted to hospital, a 56 per cent reduction compared to 216,500 in 2006.
- It is estimated that 3,819 people suffered a disability as a result of road crashes in 2020, down 17 per cent from an estimated 4,619 in 2006.

- Estimated social losses were approximately $2.9 million per fatality, losses for a hospitalised injury were approximately $241,100 per injury (including disability-related costs), and losses for non-hospitalised injury were approximately $26,000 per injury.
- Estimated lifetime losses from a person suffering a profound or severe impairment following a severe road injury were $4.1 million and losses due to a severe injury with moderate impairment were $1.1 million.
- Costs that significantly increased compared to 2006 (in 2020 dollars) were: repair costs (+$4.8 billion) and medical related costs (+$1.1 billion).
- The estimated average cost of a fatal crash was $3.2 million between the years 2016-2020. The average cost of a hospitalised injury crash was approximately $261,000 and the cost of a non-hospitalised injury crash was approximately $30,400. The cost of a property damage-only crash was $13,800.

What is clear, is that whilst fatalities have come down in the period reviewed, crashes and injuries have increased significantly. What is also clear is the social and economic cost of road crashes.

Purpose of the Report

This report will compare prevention and support funding for other major areas of public harm in Australia: road trauma, domestic and family violence, and drowning. Its central argument is that road trauma causes significant death, injury, disability, family disruption and economic cost, yet it is often not framed or funded with the same urgency as other national health and social harm priorities.

Identifying the scale of the imbalance is challenging because it is difficult to find information that is in direct comparison between sectors. However, the report aims to provide some insights into the level of action and funding provided to the area of prevention and care for road trauma, domestic and family violence, and drowning victims.

Therefore, as a base line, the first step in this review was to look at the most current data on these main issues. To that end, the report has taken data looking at the 2024 to 2025 timeline. The key statistics for the three focus areas in this report are as follows:

Road Trauma

In 2024 there were 1,300 road crash deaths in Australia. This is 42 (or 3.3%) more deaths than in 2023. Since an observed low in 2020, fatalities have been increasing by approximately 4% per year.

The rate of annual deaths per 100,000 population declined over the five years to 2020 (4.28) but since then the rate has increased by 3% per year, reaching 4.78 in 2024.

Data for hospitalised injuries is presently available to 2022. There are 30 times as many hospitalised injuries as fatalities. The per capita rate is also 30 times higher, and for 2022, the rate was 137.7. Over the six years to 2022, the trend showed a reduction of 2.5% per year, in contrast to the increasing trend in fatalities.
https://datahub.roadsafety.gov.au/reporting/annual-trauma

Domestic Violence

The key data findings on domestic violence in 2024–25 include:

Domestic Homicides: In 2024–25, it is understood that 96 people were killed because of domestic violence. 46 people were killed by an intimate partner, and 52 were killed by another family member.

Offender Increase: Police recorded 97,800 Family and Domestic Violence (FDV) offenders, an 8% increase from 2023–24.

Victimization Rates: On average, one woman was killed every 11 days and one man every 26 days by an intimate partner in 2024–25.

https://www.aihw.gov.au/family-domestic-and-sexual-violence/responses-and-outcomes/domestic-homicide

Drowning

In 2024 -25, 357 people fatally drown in Australia.

According to the National Drowning Reports by Royal Life Saving Australia and Surf Life Saving Australia, this represented a 27% increase on the base line average and the highest figure since records began.

The ten-year average is 281 people per year.

The annual report flagged a “rapid decline” in swimming skills, suggesting families were struggling to afford private swimming lessons and schools were unable to provide the same level of instruction they once did.

It indicated swimming skills could potentially be “at their lowest point since the widespread adoption of school-based programs in the 1970s”.

https://sls.com.au/national-drowning-report-2025/

These initial findings reveal a number of interesting insights.

1. **Road trauma is the largest fatality issue of the three**

   Road crashes caused 1,300 deaths in 2024, compared with 357 drowning deaths in 2024–25 and around 96 domestic violence-related deaths in 2024–25.

This means road trauma deaths are approximately 3.6 times higher than drowning deaths and more than 13 times higher than domestic violence homicides.

2. All three issues are worsening or showing concerning trends

Road deaths have increased by about 4% per year since 2020.

Domestic and family violence offending increased by 8% from 2023–24.

Drowning deaths reached the highest figure since records began, sitting 27% above the ten-year average.

3. Road trauma has a much larger injury burden

Road trauma is not only a fatality issue. Hospitalised injuries occur at around 30 times the number of deaths.

This creates a much broader health, disability, family, workforce and economic burden than fatality data alone suggests.

4. The fatality trend for road trauma is moving in the wrong direction

Australia achieved a low point in road deaths in 2020, but that progress has since reversed with yearly increases since that time.

The death rate per 100,000 people has also risen from 4.28 in 2020 to 4.78 in 2024, suggesting the increase is not simply due to population growth.

5. Drowning data highlights a prevention-system failure

The drowning figures point to a decline in swimming ability, affordability of lessons and school-based instruction.

This is a key insight because it shows drowning is generally framed as a preventable public health and education issue, not simply as individual behaviour.

6. Domestic violence is strongly framed as a national social harm issue

The domestic violence data includes homicide, offender numbers and gendered victimisation patterns.

This broader framing may explain why it appears to attract strong policy attention, national planning and funding as well as public concern.

7. Road trauma may be under-framed compared with its scale

Despite having the highest death toll and a very large injury burden, road trauma is often treated as a transport, policing or infrastructure issue.

The data supports the argument that road trauma should also be framed as a major preventable public health and social harm issue.

8. The comparison strengthens the funding inequality

The figures do not suggest that domestic violence or drowning are overfunded or over-recognised. Rather, they suggest that road trauma may be under-recognised relative to its scale of harm, especially when serious injury, disability and long-term social cost are included.

Road trauma causes a substantially higher number of deaths than both drowning and domestic violence, while also producing a much larger burden of serious injury and long-term disability. Yet unlike domestic violence and drowning, road trauma is still commonly framed largely as a transport or infrastructure issue rather than as a major preventable public health and social harm priority.

Comparison of Government Support: Domestic Violence, Drowning and Road Trauma

When domestic and family violence and drowning prevention are considered together, they show how governments can frame preventable harm as a national priority and support that framing with clear, dedicated funding streams.

Domestic and family violence is described by the Australian Government as a national crisis, with more than $3.4 billion committed to women's safety and the National Plan to End Violence Against Women and Children 2022–2032, including $253.4 million over five years for 1800RESPECT.

Drowning prevention is also supported through a named national program, with approximately $34.9 million to $36 million over two years provided through the Water and Snow Safety Program to organisations such as Royal Life Saving Society Australia and Surf Life Saving Australia.

These funding examples are significant because they are visible, purpose-specific and connected to recognised national prevention and support systems.

Domestic violence funding includes crisis, counselling, referral, prevention and recovery responses. Drowning funding supports education, prevention and intervention measures aimed at reducing deaths and injuries in aquatic environments.

In both cases, the Commonwealth funding is relatively easy to identify and is linked to national organisations, national plans or national safety programs.

Road trauma is different. Australia has a National Road Safety Strategy and substantial Commonwealth investment in road infrastructure safety, including targeted road safety programs, the Black Spot Program, Roads to Recovery, the Safer Local Roads and

Infrastructure Program, road safety education grants and improvements to national road safety data.

However, much of this investment is framed as transport infrastructure, road maintenance, local roads, safer systems or data improvement rather than as direct victim support, trauma recovery, family support or national public health prevention.

This distinction is important and highlights a philosophical difference in how these issues are addressed.

Road safety funding may be substantial in infrastructure terms, but it is less visible as a social harm response. There does not appear to be an equivalent nationally recognised road trauma support service, comparable in public profile to 1800RESPECT, nor a clearly branded road trauma prevention partnership comparable to the Water and Snow Safety Program. This creates a gap between the scale of road trauma and the way it is publicly framed and supported.

The comparison does not suggest that domestic violence or drowning receive too much attention or funding. Both are serious preventable harms that warrant sustained national investment.

Rather, the comparison highlights that road trauma, despite causing 1,300 deaths in 2024 and many more hospitalised injuries, does not appear to receive the same level of public-health framing, national crisis language, dedicated post-crash support funding or clearly identifiable prevention partnership.

A fair interpretation is that road trauma is funded, but not always framed or supported in proportion to its broader human impact. Road infrastructure investment is essential, but it does not fully address the long-term consequences of road crashes for victims, families, workplaces, emergency responders and communities.

If road trauma is to be treated consistently with other major preventable harms, Australia needs a more visible national prevention and support framework that includes both safer road systems and stronger post-crash support.

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Founder and Chair
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