



IARD TRENDS **REPORT**

Progress in Reducing Road Injury Mortality 2010–2024

Global Burden of Disease (GBD) Study

May 2026

About IARD

The International Alliance for Responsible Drinking (IARD) is a not-for-profit organization dedicated to reducing harmful drinking. We are supported by the leading global beer, wine, and spirits producers, who have come together to be part of the solution in combating the harmful use of alcohol. To achieve this, we work with public sector, civil society, and private sector stakeholders. We work in support of the whole-of-society approach endorsed by the multilateral strategies to tackle the harmful use of alcohol.

IARD actively supports multilateral strategies and goals to reduce harmful drinking, including the targets in the World Health Organization's (WHO) Global Alcohol Action Plan 2022–2030 and United Nations' Sustainable Development Goals (SDG) 3.5 and 17.16.



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Foreword

Reducing drink driving is a shared global priority and an area in which action and enforcement can clearly save lives.

This year will see the next UN High-Level Meeting on Road Safety in July 2026. As the UN Decade of Action for Road Safety 2021–2030 has passed its midpoint, this will be the most significant opportunity to shape decisive action by governments, with support from private sector partners and civil society, to accelerate the implementation of measures that work.

This report shows that progress is possible. Drawing on data from the Global Burden of Disease 2024 study, it finds that alcohol-attributable road injury mortality has fallen considerably since 2010, and faster than overall road injury mortality. That progress should give confidence that sustained action works – but we are clear that much work remains. Indeed, the data should also sharpen our focus on what is needed next: stronger implementation, enforcement, and partnership.

For the leading beer, wine, and spirits producers that make up IARD's membership, action on drink driving is a matter of shared responsibility, consistent with the United Nations' whole-of-society approach. We believe that effectively preventing drink driving involves a combination of national legislation and enforcement, public awareness, innovation, and partnerships across governments, law enforcement, health systems, civil society, the private sector, communities, and the third sector.

At IARD and among our members, our support for the whole-of-society approach to tackling harmful use of alcohol is reflected in concrete action. In 2021, IARD members made a public commitment to include warnings against drinking and driving on product labels worldwide. At national level, IARD members have for decades supported many programs to raise awareness and bolster enforcement of drink driving laws.

The whole-of-society approach is not simply a principle; it is how lasting progress is achieved. Through partnership, evidence-based action, and shared accountability, we can support governments and communities in accelerating progress toward the 2030 road safety goals and reducing the harm caused by drink driving.



Julian Braithwaite

IARD President / CEO



Executive summary



- » **Clear evidence of progress:** Data from the GBD study show a substantial decline in alcohol-attributable road injury mortality since 2010, outpacing the reduction in overall road injury mortality.
- » **A serious and uneven challenge remains:** Despite this progress, drink driving remains a preventable cause of deaths and injuries, with persistent gaps in some regions and country income levels.
- » **Norms and behavior are misaligned:** Social norms are strongly against drink driving and other risky driving behaviors, yet self-reported risky behavior persists.
- » **What works to close the gaps:** Whole-of-society, government-led action—anchored in strong legislation and supported by effective enforcement, public awareness, technology, and responsible partnerships—is the best approach to sustain gains and accelerate progress where it lags.
- » **Responsible private-sector engagement:** IARD and its members have consistently applied this comprehensive approach to support and build on governments' road safety efforts.

United Nations indicators

The Global Plan for the Decade of Action for Road Safety 2021–2030 includes a target to “halve the number of road traffic injuries and fatalities related to drivers using alcohol, and/or achieve a reduction in those related to other psychoactive substances” by 2030. The World Health Organization (WHO) produces estimates on the total and alcohol-attributable road injury deaths and will, according to the Global Plan, produce baseline (2021), midterm (2025), and end-term (2030) estimates for evaluation of progress against the target.

At the time of preparing this report, data on alcohol-attributed road injury mortality are only available for 2019 from the UN system. The World Health Organization (WHO)'s *Global status report on road safety 2023* stated that a more current global figure on alcohol-attributable road injury mortality “Cannot be calculated yet” (Table A2.1) [1].

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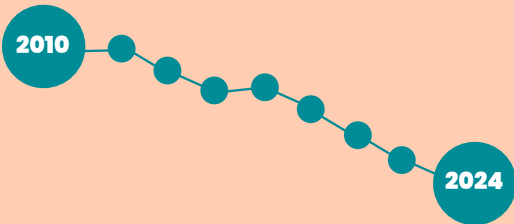
not all countries have this data, and the reported fatality data from different countries are not necessarily comparable, as different definitions and timeframes have been used”

WHO, Global status report on road safety 2023

Methodology

Data sources

GBD estimates facilitate comparison of trends across countries.



This report uses data produced by the Institute of Health Metrics and Evaluation’s Global Burden of Disease (GBD) 2024 study [2] as one source of data to assess trends relevant to the UN target of reducing drink driving deaths by half. The GBD study brings together thousands of researchers to create robust estimates of the burden of hundreds of causes of death and ill health, continually expanded and refined since 1990.

WHO and GBD estimates for 2019 are dissimilar, reflecting variations in input data sources and risk models. The WHO estimates attribute a larger share of road injury mortality to alcohol [3] than the GBD study [4, 5] (see Table 1). For this reason, the figures should not be read as directly comparable estimates of the same measure, but as outputs from different methodologies. These two data sets may offer somewhat different but complementary ways of understanding trends in road injuries and their underlying drivers.

Table 1: Share of road injury deaths attributed to alcohol

WHO region	WHO (2019)	GBD (2019)	GBD (2024)
Africa	24%	2.6%	2.6%
Americas	34%	5.7%	5.7%
Eastern Mediterranean	2%	0.2%	0.2%
Europe	35%	6.0%	5.8%
South-East Asia	22%	2.0%	2.0%
Western Pacific	25%	4.1%	3.9%
World	23%	3.1%	3.0%

WHO estimates of overall road injury mortality rates for 2019 are higher than national authorities’ (sometimes 10 times higher or more) [1, 3, 6]. GBD estimates also often exceed the rates recorded by national authorities in raw input data [4, 7].

Scope

In this report, we present the GBD study overall age-standardized road injury mortality rate and the rate attributed to the GBD’s high alcohol use risk factor for global, region, country income level, and country units. See Appendix A.

We also include findings of the Vias Institute’s E-Survey of Road Users’ Attitudes from 39 countries on self-reported risky driving behaviors, including driving over the legal blood alcohol concentration (BAC) limit, and on respondents’ perceptions on the social acceptability of those behaviors in their community. See Appendix B.

Global trends

Overall declines in road injury mortality (GBD)

Encouraging progress has been made in reducing the impact of drink driving.



Road injury mortality from all risk factors **declined**

13%



Alcohol-attributable road injury mortality **declined**

28%

However, progress was uneven across country income levels and time periods:

Figure 1: Change in age-standardized road injury mortality rates 2010 to 2024, *all risk factors* and *alcohol-attributable*; GBD Study

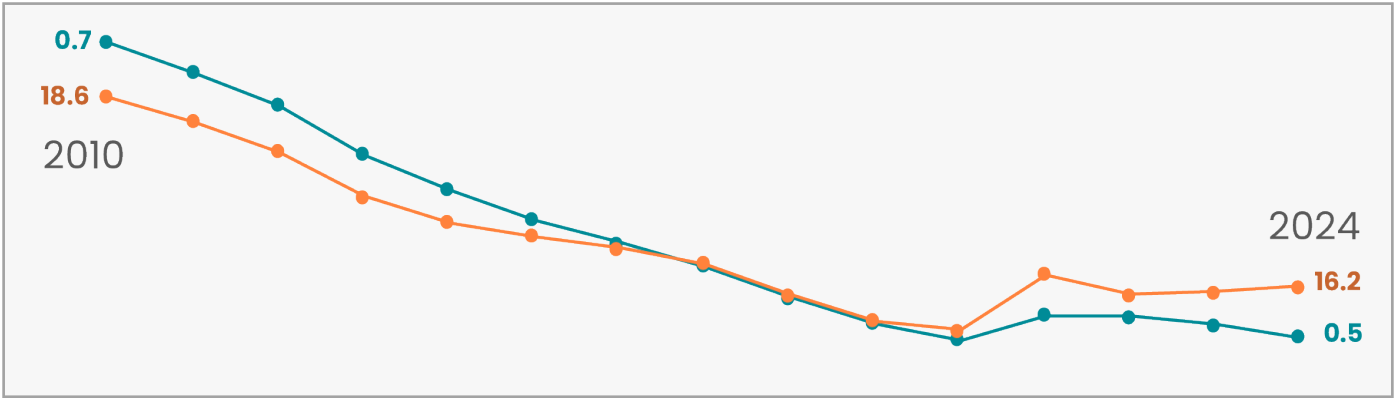


Table 2: Change in age-standardized alcohol-attributed road injury mortality, by country income level, GBD Study

Grouping	2010–2024 Percent change	2024 Mortality rate per 100,000
High income	–30%	0.5
Upper-middle income	–41%	0.5
Lower-middle income	–12%	0.4
Low income	26%	1.0
Global	–28%	0.5

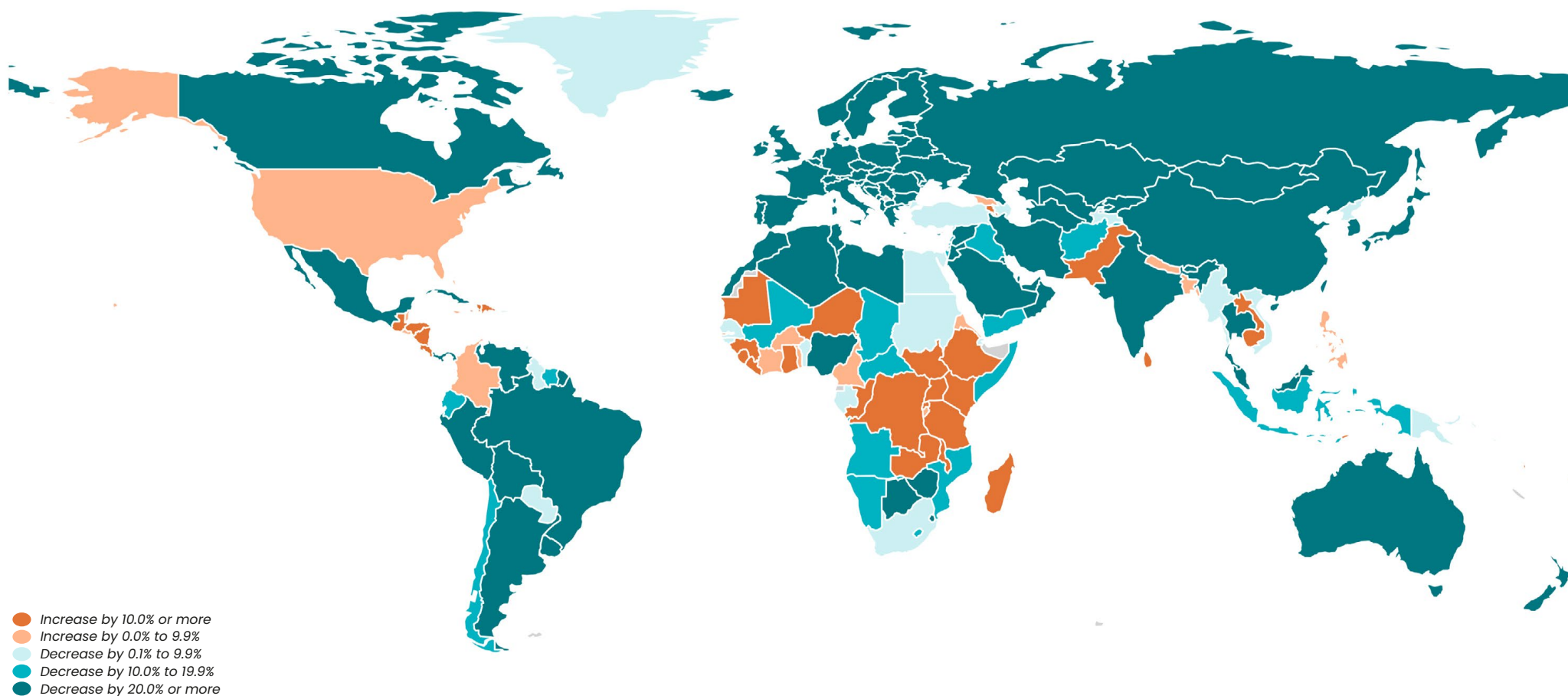
National trends 2010–2024 (GBD)

In many countries alcohol-attributable road injury mortality has decreased considerably since 2010: across Europe, Australasia, and parts of North America, South America, Northern and Southern Africa, and Asia.

However, in parts of Africa, Central America and the Caribbean, and Asia alcohol-attributable road injury mortality has increased.

Partnerships between industry, NGOs, academics, and community groups can raise awareness of the dangers of drink driving, increase recognition of government legislation, and enable better enforcement.

Figure 2: Change in age-standardized alcohol-attributable road injury mortality rates 2010 to 2024, GBD Study. See Appendix A

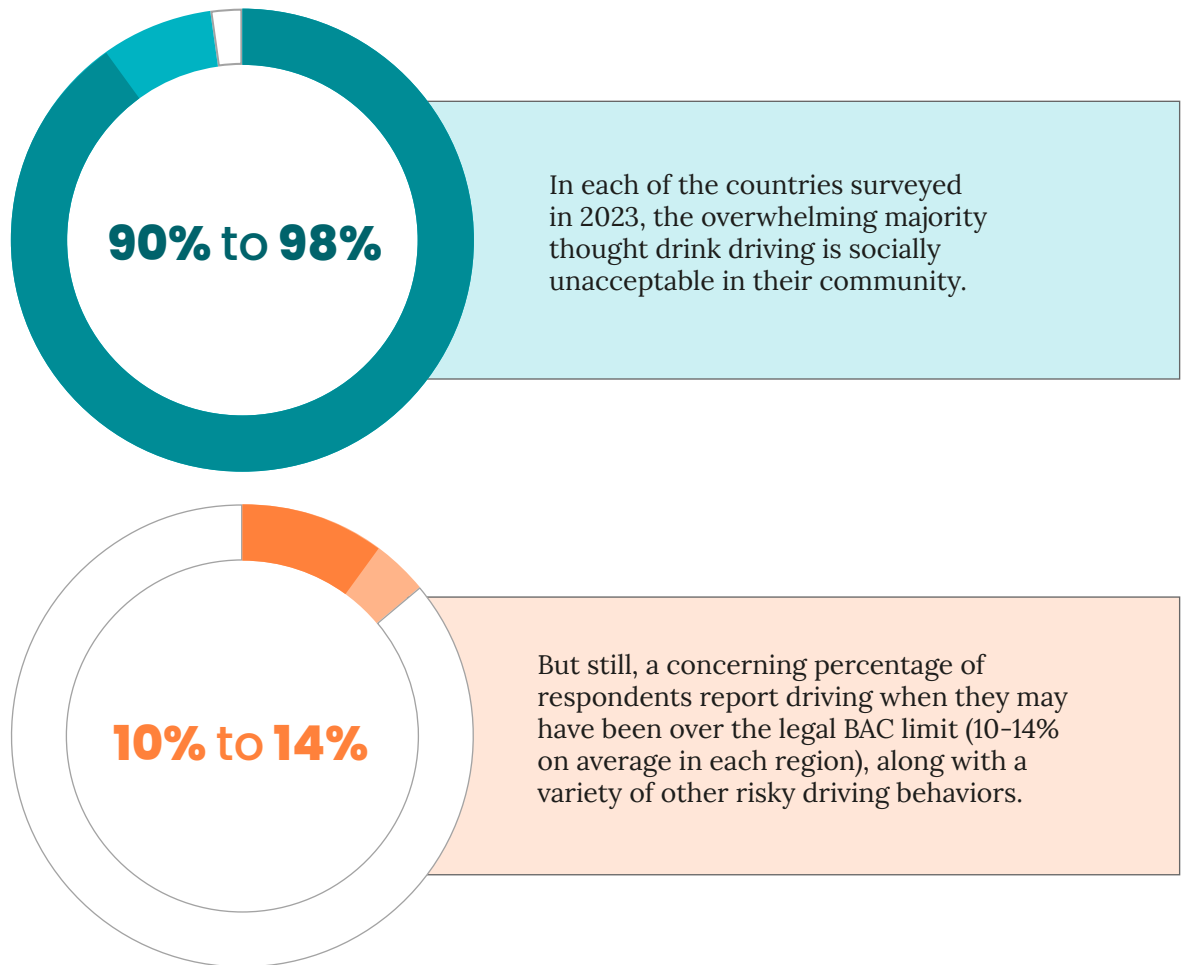


Social norms and self-reported behavior

Across regions in the 39 countries surveyed in 2023, the percentage who report each risky driving behavior is higher than the percentage who see that behaviors as socially acceptable.

Figure 3: Risky driving behaviors—social acceptability and self-reported behavior in the past month. ESRA III [8]. Regions represented as in the source.





Source: Vias Institute (2025). E-Survey of Road users' Attitudes: ESRA 1–2–3 dashboard, ESRA 2025 report [8] See Appendix B

These findings indicate that shifting social norms is not sufficient, on its own, to improve road safety.

A whole-of-society approach is needed to reinforce robust legislation requiring safer driving behaviors and support its ongoing enforcement and implementation of technologies that are demonstrated to improve road safety.

“

Men more often perceive that they can control the car after drinking alcohol, while speeding or using a mobile phone. Overall, in all the regions, younger age categories systematically report higher risky attitudes and higher perception that they can control the car under the influence of alcohol, while speeding or using the mobile phone than older age categories.” – Vias Institute, Global road safety insights report 2025

What do experts recommend to reduce drink driving?

Improving road safety has been a goal for the United Nations since the establishment of the first working group on the prevention of road crashes in 1950 [8], which became the UN's Global Forum for Road Traffic Safety in 2017.

“

advancing and enforcing drink-driving countermeasures is also a critical and potentially life-saving intervention.” – WHO, Global status report on alcohol and health and substance use treatment 2024

Today, the [Global Plan](#) for the [Decade of Action for Road Safety 2021–2030](#) recommends that governments “establish blood alcohol concentration (BAC) limits to prevent impaired driving (drink- and drug-driving) with specific provisions for novice and professional drivers”. In support of this strategy, United Nations High-Level Meetings on Global Road Safety have been organized in New York in 2022 and 2026.

Strengthening legislation

Government legislation is the foundation of effective efforts to combat drink driving. When governments lay out comprehensive road-safety and drink driving legislation, they provide a clear basis for intervention and enforcement, set behavioral standards for drivers, and raise public awareness of responsible driving behaviors

[9]. The Global Plan for the Decade of Action for Road Safety 2021–2030 specifically recommends setting drink driving laws and resourcing their enforcement to reduce alcohol-related crashes and injuries. According to the Plan, comprehensive legislation should include a specified BAC limit, which enables enforcement actions.

Despite progress in this area, WHO most recently reported that, out of the 170 countries covered, only 47 had laws and effective enforcement in place to prevent drink driving [1] (see also [IARD Policy Table: Blood alcohol concentration limits](#)).

Enhancing enforcement

Contributions from other stakeholders can enhance the effectiveness of comprehensive government legislation and help reduce drink driving harms.

As the WHO notes: “Drink driving legislation that is evidence-driven, context relevant, consistently enforced and well understood by enforcement officials and the public has been effective in saving lives in many jurisdictions.” [1].



Only **47** out of **170** countries had laws and effective enforcement in place to prevent drink driving

Alcohol ignition interlocks, also known as alcolocks, are an evidence-based intervention that has been shown to reduce repeat offending among drink drivers [10, 11]. Current alcolocks measure BAC; the driver must blow into the device to start the vehicle. If the driver has a BAC over the legal limit, they will not be able to start their vehicle. The device may also require repeated breath tests to check if the driver has remained below the BAC limit during the trip. Research is ongoing on the feasibility of outfitting cars with passive detection systems based on breath or driver behavior [12].

Alcolock programs enhance the ability of governments, police, insurance and transportation companies, and others to enforce laws on drink driving, by using technology to monitor a driver's BAC in real time.

“

“About one out of five of the car drivers was checked by the police for driving under the influence of alcohol in the past 12 months in all regions.” – Vias Institute, Global road safety insights report 2025

Raising public awareness

A crucial part of prevention is ensuring that the public is aware of road safety risks and strategies to mitigate them. The 2020 UN Resolution Improving global road safety calls on member states “to take measures to promote road safety knowledge and awareness among the population through education, training and publicity campaigns, especially among youth, and to propagate good road safety practices in the community” [9].

Industry can help promote responsible driving and shift behavioral norms by:

- » raising public awareness of harmful drinking behaviors
- » campaigning against drink driving
- » promoting more understanding about the BAC limit and the penalties associated with exceeding it
- » supporting road-safety law enforcement

Whole-of-society collaboration

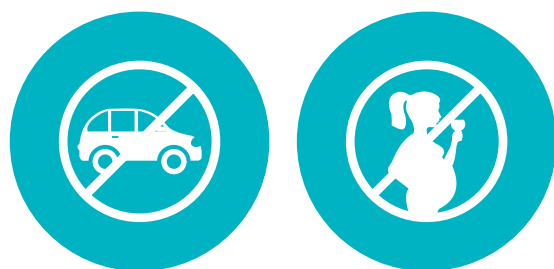
The industry can contribute through multistakeholder partnerships – for example, providing equipment, training, and technical expertise – and IARD members are engaging in successful programs in many countries [13]. As part of the Beer, Wine and Spirits Producers' Commitments established in 2012, IARD's member companies have put in place drink driving initiatives around the world, in partnership with governments, civil society, and communities. This work includes building capacity; training with police, road safety practitioners, and volunteers; and evaluating and sharing global best practices through a series of pilot programs.

Actions by IARD and its members to reduce drink driving

The Global Plan for the Decade of Action for Road Safety 2021–2030 calls for the private sector to “address and mitigate actions that negatively impact road safety, including ... the promotion of high consumption of alcohol or other products that can contribute to impaired driving”. IARD members have for decades supported efforts to reduce drink driving across regions and continue to do so since 2021.

Global commitment on labelling

In 2021, the CEO Chair and Vice Chair of IARD, with IARD’s CEO, made a public commitment to include warnings against drinking and driving on all IARD Members’ product labels, including their alcohol-free extensions, worldwide. Additionally, as part of ongoing marketing cycles, consumers will find warnings against underage drinking and drinking during pregnancy alongside information about alcohol and health, and products’ energy and alcohol content.



Actions across the globe

In Europe...

Prévention & Modération (France – Take a Breath)

In France, in 2025, Prévention & Modération deployed its Take a Breath campaign of breathalyzer kiosks across 20 cities over a seven-month period, with the support of the Eureka network. Rolled out in bars, the campaign aimed to promote responsible drinking by encouraging people to test themselves. Installed in 47 nightlife venues, it generated more than 55,000 tests. According to user feedback, up to 70% of users stated that the test influenced their consumption behavior.



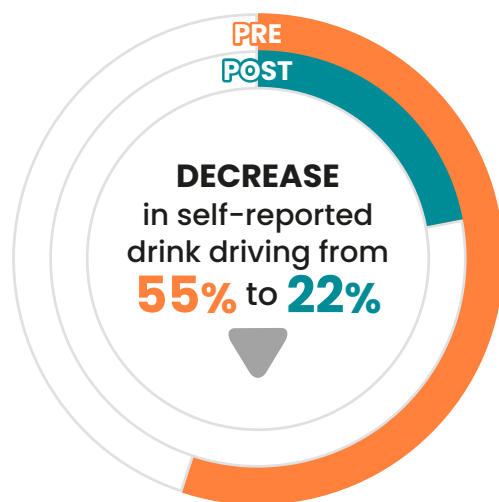
up to **70%** of users stated that the test influenced their consumption behavior

In Asia ...

IARD (Cambodia – Supporting BAC enforcement and awareness)

In 2016, IARD partnered with the Cambodian Red Cross (CRC) and industry and government bodies to hold capability-building workshops in eight cities and provinces that reached nearly 900 traffic police, youths, and volunteers. During the program, 36,000 students and vulnerable road users participated in drink driving awareness campaigns, and 2,800 drivers and factory workers attended educational performances that warned against drink driving and promoted responsible road behavior. A post-program evaluation [13] found that

- » 36% of respondents were aware of the BAC limit for drivers, compared to 25% in the baseline study;
- » the proportion of respondents who agreed that drivers should not drink alcohol increased from a preintervention level of 8% to 34%;
- » while 55% of pre-intervention study respondents reported that they had driven while intoxicated within the previous six months, only 22% reported so at the final assessment.



“

“I am really proud of this project. Both the technical and financial support are extremely important for Cambodia.” – Cambodian Red Cross Secretary General, Pum Chantinie





Over
2.1M
people
completed
WSOTR
training
modules

Diageo (India – Wrong Side of the Road)

Wrong Side of the Road (WSOTR) was developed and launched globally in 2021 in partnership with United Nations Institute for Training and Research (UNITAR). It is designed to increase awareness of the risks and consequences of drink driving through immersive, evidence-based learning. In India, Diageo has run WSOTR since 2022 in partnership with state authorities and 83 regional transport offices across the country to integrate mandatory, tech-enabled training modules in licensing requirements. Over 2.1 million people have completed its simulations and behavioral assessments.

Asahi, Kirin, and Suntory (Japan – Absolutely No Drunk Driving)

In Japan, in 2017, logistics companies affiliated with the Asahi, Kirin, Sapporo, and Suntory groups launched the Absolutely No Drunk Driving campaign to address drink driving in the logistics industry. The joint effort focused on creating and distributing educational materials and resources. In line with the initiative, in 2025 Asahi Logi Co. supported responsible drinking by distributing alcohol-free beverages and delivered drink driving prevention education to 10,723 people. In 2025, Kirin Group Logistics Corp. conducted annual outreach activities directly with 381 transportation partner companies to review the implementation of pre-driving alcohol testing and operational management systems, and underline its strict zero-tolerance policy toward drink driving. In addition, it holds Drink Driving Eradication Weeks four times a year, distributing educational materials to raise awareness among individual drivers.

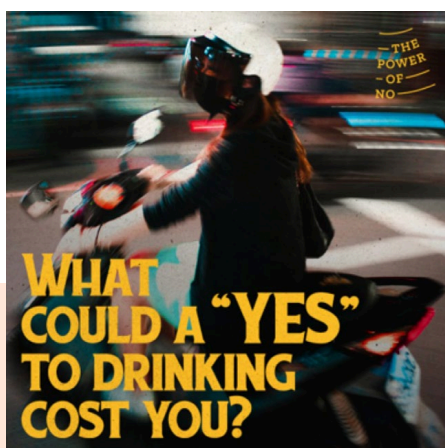
Carlsberg (Kazakhstan – Reaction simulators)

In Kazakhstan in 2023, Carlsberg ran a public campaign to tackle drink driving, enabling participants to experience alcohol's effects on reaction time, coordination and driving performance. Partnering with a local driving school and festival organizers, it offered reaction simulator tests at two sponsored festivals, totaling 5,000 interactions at the FourE and 7,000 interactions at the Esquire Picnic event.



APISWA (Southeast Asia – Power of No)

APISWA members include IARD members Bacardi, Brown Forman, Diageo, Moët Hennessy, Pernod Ricard, Suntory Global Spirits, and William Grant & Sons.



From 2022 to 2026, the Asia Pacific International Spirits and Wines Alliance (APISWA) partnered with about 20 regional road safety stakeholders – including the Fédération Internationale de l'Automobile (FIA) Asia-Pacific and Automobile Association of Vietnam – to deliver the Power of No campaign across Southeast Asia. Aimed at shifting social norms around drink driving among young adults, the initiative combined digital outreach, private-public partnerships, and on-the-ground activations, reaching over 40 million people. See [Power of No evaluation report](#)

In the Americas ...

Molson Coors (North America – Free Rides Program)

Molson Coors' Free Rides program has been helping people celebrate responsibly for decades, providing more than 9 million safe rides. In partnership with public transit systems in cities across the United States since 1988, – and reintroduced in Canada in 2024, – the initiative offers free transportation on New Year's Eve and other major celebrations, such as sporting events and holidays. This ongoing commitment ensures that those celebrating have a safe and convenient travel option.



IARD (Dominican Republic – Supporting BAC enforcement and awareness)

In 2015, IARD convened government agencies, academics, and local and regional producers to discuss road safety. These engagements yielded a collaboration agreement in 2016 between the Ministry of Health and Social Welfare (MISPAS) and local trade associations – Representatives of Liquor Importers and Distributors (RIVLAS), the Dominican Association of Rum Producers (ADOPRON), and the Dominican Association of Beer Producers (ADOFACE), – to design a program to support awareness and enforcement of drink driving laws.



- » In 2018–2019, the National Institute of Traffic and Land Transportation (INTRANT) and UNITAR, with support from Diageo, held capacity-building workshops for enforcement authorities and provided equipment to enforce BAC limits.
- » Also in 2019, IARD supported INTRANT and the General Directorate of Transit and Land Transportation Safety (DIGESETT) to launch Take it Seriously: If You Drink, Don't Drive – an awareness campaign across university campuses.
- » In 2024, INTRANT and DIGESETT continued to implement the enforcement capacity-building program.

“

the implementation of breathalyzers seeks to prevent traffic accidents, in order to save lives.” – Milton Morrison, Executive Director of INTRANT



Pernod Ricard (Dominican Republic – Autosobriety)

In the Dominican Republic, from 2021–2026, Pernod Ricard has run a campaign called Autosobriety, in partnership with UNITAR and the INTRANT. It educates drivers on risks of drink driving, legal frameworks, safer practices, and promotes informed choices. Implementation included train-the-trainer sessions and digital materials including virtual reality, to demonstrate alcohol's impact on driving. The campaign has reached over 5,000 people and 30 national institutions, including through 2000 training sessions.

In Africa ...

IARD (Namibia – Supporting BAC enforcement and awareness)

In 2015, IARD and its local members partnered with police, local authority traffic departments, the Roads Authority, and the National Road Safety Council to support rollout of additional BAC checkpoints. Private-sector partners provided funding to purchase and calibrate breath-testing devices and to evaluate the program. Between August 1, 2017, and January 31, 2018, traffic officers tested over 153,000 drivers and found that 1% tested positive for alcohol consumption [14].



Heineken (Rwanda – Don't Drink and Drive)

Since 2013, Heineken has partnered with the Rwanda National Police (RNP) to run the Don't Drink and Drive campaign as part of RNP's Gerayo Amahoro road safety initiative. The campaign uses high-visibility interventions, including billboards, media broadcasts, and mobile outreach, to raise awareness and support enforcement efforts, achieving nationwide reach across urban and rural populations.

AB InBev (South Africa – Alcohol Evidence Centers)

AB InBev has partnered with the road authorities in South Africa to improve the enforcement of drink driving in the country. For that purpose, AB InBev provides law enforcement with mobile units that can be used in roadblocks to test suspects and capture data, which will be used to process their arrests and prosecutions. Since 2021, the company has donated 28 units and directly enabled 59,791 drink driving arrests in South Africa. Partners such as the Johannesburg Metro Police (JMPD) have indicated that the initiative has made an impact in terms of deterring drink driving.

“

SAB Sharp exemplifies how collaborative efforts can lead to impactful and sustainable solutions, setting a new benchmark for responsible behavior in our communities.” – JMPD Superintendent, Mike Botolo

Appendix A

GBD data

The GBD study uses vital registration data from national authorities and police reports from published studies and national agencies to estimate road injury deaths. These input data are modeled with covariates including population density, temperature, strictness of blood alcohol concentration limits, strictness of speed limits, and proportion of the population aged 15 to 30 to generate comparable estimates across years, locations, age groups, and sexes.

Alcohol-attribution is based on the probability of a road injury death being due to impaired driving as estimated by the U.S. National Highway Traffic Safety Administration (NHTSA)’s Fatality Analysis Reporting System (FARS) [4, 7].

Table A1: Age-standardized alcohol-attributable road injury mortality rates 2010 and 2024, GBD Study

Country	2010	2024	Change (%)
Afghanistan	0.0	0.0	-19%
Albania	0.4	0.2	-35%
Algeria	0.1	0.1	-35%
Andorra	0.9	0.9	-7%
Angola	4.2	3.5	-16%
Antigua and Barbuda	0.1	0.2	102%
Argentina	1.1	0.7	-36%
Armenia	0.2	0.3	46%
Australia	0.6	0.4	-37%
Austria	0.6	0.4	-38%
Azerbaijan	0.3	0.2	-10%
Bahrain	0.3	0.2	-31%
Bangladesh	0.0	0.0	4%
Barbados	0.4	0.3	-24%
Belarus	1.4	0.6	-55%
Belgium	0.8	0.4	-53%
Belize	1.2	1.3	8%
Benin	0.8	0.7	-10%
Bhutan	0.3	0.2	-28%
Bolivia	1.2	0.9	-20%
Bosnia and Herzegovina	0.3	0.2	-40%

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Table A1: Age-standardized alcohol-attributable road injury mortality rates 2010 and 2024, GBD Study (continued)

Country	2010	2024	Change (%)
Botswana	1.2	0.9	-24%
Brazil	1.4	1.0	-27%
Brunei	0.1	0.0	-46%
Bulgaria	0.8	0.5	-40%
Burkina Faso	0.3	0.4	7%
Burundi	1.5	1.6	0%
Cambodia	0.8	1.2	55%
Cameroon	1.3	1.3	3%
Canada	0.5	0.3	-32%
Cape Verde	0.5	0.4	-25%
Central African Republic	2.4	2.0	-15%
Chad	0.8	0.6	-19%
Chile	0.8	0.7	-13%
China	0.9	0.4	-58%
Colombia	0.7	0.7	8%
Comoros	0.0	0.0	98%
Congo	2.3	2.8	23%
Costa Rica	0.7	0.9	26%
Cote d'Ivoire	0.4	0.4	0%
Croatia	0.6	0.5	-23%
Cuba	0.4	0.3	-22%
Cyprus	0.7	0.5	-27%
Czech Republic	0.8	0.5	-37%
Democratic Republic of the Congo	1.7	2.4	36%
Denmark	0.4	0.2	-57%
Djibouti	0.2	0.2	-8%
Dominica	0.9	0.8	-6%
Dominican Republic	1.6	2.1	29%
Ecuador	1.5	1.2	-19%
Egypt	0.0	0.0	-5%
El Salvador	0.8	0.8	2%

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Table A1: Age-standardized alcohol-attributable road injury mortality rates 2010 and 2024, GBD Study (continued)

Country	2010	2024	Change (%)
Equatorial Guinea	3.7	3.8	3%
Eritrea	0.7	0.7	0%
Estonia	0.8	0.3	–60%
Ethiopia	0.9	1.2	25%
Federated States of Micronesia	0.1	0.1	–21%
Fiji	0.3	0.3	0%
Finland	0.4	0.2	–45%
France	0.7	0.4	–45%
Gabon	1.7	1.5	–10%
Georgia	1.0	1.0	1%
Germany	0.5	0.3	–47%
Ghana	0.5	0.8	42%
Greece	1.0	0.6	–41%
Grenada	0.4	0.3	–24%
Guatemala	0.5	0.7	46%
Guinea	0.1	0.1	50%
Guinea-Bissau	0.5	0.5	–5%
Guyana	0.8	0.7	–9%
Haiti	1.8	2.4	32%
Honduras	0.6	0.8	36%
Hungary	0.6	0.5	–29%
Iceland	0.3	0.2	–28%
India	0.4	0.3	–21%
Indonesia	0.0	0.0	–19%
Iran	0.1	0.0	–72%
Iraq	0.0	0.0	–10%
Ireland	0.4	0.2	–66%
Israel	0.2	0.2	–16%
Italy	0.6	0.4	–32%
Jamaica	0.2	0.2	5%
Japan	0.3	0.1	–55%

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Table A1: Age-standardized alcohol-attributable road injury mortality rates 2010 and 2024, GBD Study (continued)

Country	2010	2024	Change (%)
Jordan	0.0	0.0	-39%
Kazakhstan	1.1	0.8	-29%
Kenya	0.7	0.8	12%
Kiribati	0.2	0.2	-8%
Kuwait	0.0	0.0	-55%
Kyrgyzstan	0.8	0.4	-41%
Laos	1.2	1.4	16%
Latvia	0.9	0.7	-20%
Lebanon	0.2	0.2	-18%
Lesotho	2.6	2.2	-15%
Liberia	0.7	1.0	36%
Libya	0.0	0.0	-32%
Lithuania	1.2	0.5	-56%
Luxembourg	0.6	0.4	-36%
Macedonia	0.4	0.3	-26%
Madagascar	1.3	1.8	40%
Malawi	0.7	1.1	53%
Malaysia	0.2	0.1	-38%
Maldives	0.0	0.0	277%
Mali	0.1	0.1	-11%
Malta	0.2	0.1	-41%
Marshall Islands	0.5	0.5	-4%
Mauritania	0.0	0.0	17%
Mauritius	0.7	0.5	-31%
Mexico	0.9	0.7	-27%
Moldova	0.9	0.5	-45%
Monaco	0.5	0.4	-19%
Mongolia	1.4	0.9	-34%
Montenegro	0.6	0.4	-34%
Morocco	0.1	0.1	-27%
Mozambique	0.5	0.4	-15%

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Table A1: Age-standardized alcohol-attributable road injury mortality rates 2010 and 2024, GBD Study (continued)

Country	2010	2024	Change (%)
Myanmar	0.4	0.3	-7%
Namibia	3.2	2.7	-16%
Nauru	2.9	2.6	-13%
Nepal	0.2	0.2	6%
Netherlands	0.3	0.2	-29%
New Zealand	0.7	0.5	-26%
Nicaragua	0.5	0.7	35%
Niger	0.0	0.0	13%
Nigeria	0.5	0.4	-21%
North Korea	0.9	0.8	-5%
Norway	0.3	0.2	-49%
Oman	0.4	0.2	-61%
Pakistan	0.0	0.0	17%
Palau	0.5	0.5	-9%
Palestine	0.0	0.0	-44%
Panama	0.9	0.5	-39%
Papua New Guinea	0.2	0.2	-3%
Paraguay	2.0	1.9	-3%
Peru	0.8	0.5	-41%
Philippines	0.7	0.7	9%
Poland	0.9	0.4	-50%
Portugal	0.8	0.6	-30%
Qatar	0.6	0.2	-61%
Romania	0.9	0.7	-28%
Russian Federation	1.6	0.8	-48%
Rwanda	1.6	2.0	27%
Saint Kitts and Nevis	0.5	0.4	-16%
Saint Lucia	0.9	0.7	-24%
Saint Vincent and the Grenadines	0.6	0.3	-47%
Samoa	0.3	0.3	-13%
San Marino	0.8	0.7	-9%

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Table A1: Age-standardized alcohol-attributable road injury mortality rates 2010 and 2024, GBD Study (continued)

Country	2010	2024	Change (%)
Sao Tome and Principe	2.2	1.7	-23%
Saudi Arabia	0.1	0.1	-24%
Senegal	0.1	0.1	-6%
Serbia	0.5	0.3	-35%
Seychelles	0.9	0.9	-6%
Sierra Leone	0.3	0.5	33%
Singapore	0.2	0.1	-35%
Slovakia	0.7	0.4	-38%
Slovenia	0.4	0.2	-46%
Solomon Islands	0.2	0.2	-1%
Somalia	0.0	0.0	-13%
South Africa	2.8	2.5	-8%
South Korea	0.8	0.4	-47%
South Sudan	1.2	1.4	17%
Spain	0.5	0.3	-34%
Sri Lanka	0.4	0.5	22%
Sudan	0.0	0.0	-3%
Suriname	1.1	0.9	-12%
Swaziland	2.8	1.8	-36%
Sweden	0.3	0.2	-37%
Switzerland	0.3	0.1	-55%
Syria	0.1	0.0	-77%
Taiwan	0.4	0.3	-31%
Tajikistan	0.0	0.0	-2%
Tanzania	0.4	0.5	17%
Thailand	2.2	1.8	-20%
The Bahamas	1.0	1.1	6%
The Gambia	0.0	0.0	62%
Timor-Leste	0.2	0.3	27%
Togo	1.1	1.1	2%
Tonga	0.3	0.3	-6%

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Table A1: Age-standardized alcohol-attributable road injury mortality rates 2010 and 2024, GBD Study (continued)

Country	2010	2024	Change (%)
Trinidad and Tobago	0.6	0.6	–6%
Tunisia	0.2	0.1	–28%
Turkey	0.1	0.1	–5%
Turkmenistan	0.1	0.1	–38%
Tuvalu	1.4	1.2	–17%
Uganda	1.3	2.1	58%
Ukraine	1.1	0.7	–35%
United Arab Emirates	1.4	0.3	–76%
United Kingdom	0.4	0.2	–41%
United States	0.8	0.8	4%
Uruguay	1.1	0.7	–36%
Uzbekistan	0.5	0.3	–33%
Vanuatu	0.1	0.2	48%
Venezuela	1.5	0.7	–55%
Vietnam	1.2	1.1	–6%
Yemen	0.0	0.0	–15%
Zambia	1.2	1.4	16%
Zimbabwe	1.6	1.0	–37%

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Appendix B

ESRA III data

The E-Survey of Road users’ Attitudes (ESRA) is a joint initiative of road safety institutes, research centers, public services, and private sponsors from all over the world, coordinated by Vias Institute. It aims to collect comparable data every three years on road safety culture. Fieldwork is underway for the fourth wave of ESRA in 2026.

Self-declared drink driving: In the past 30 days, how often did you as a car driver drive when you have been over the legal limit for drinking and driving? (%)

Acceptability: Where you live, how acceptable would most other people say it is for a car driver to drive when he/she may be over the legal limit for drinking and driving? (% who responded 4 or 5 on a scale of ‘1 unacceptable’ to ‘5 acceptable’)

Table B1: ESRA III country results
Countries and regions represented as in [ESRA 2025 report](#)

Country	Self-declared drink driving	Acceptability
Europe		
Austria	13	9
Belgium	19	5
Bosnia and Herzegovina	10	5
Czech Republic	7	2
Denmark	11	4
Finland	6	2
France	16	5
Germany	10	4
Greece	13	6
Ireland	8	4
Italy	13	6
Latvia	5	4
Luxembourg	24	10
Netherlands	12	3
Poland	4	5
Portugal	13	3
Serbia	10	3
Slovenia	15	4
Spain	17	3
Sweden	7	4

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Table B1: *ESRA III country results (continued)*

Country	Self-declared drink driving	Acceptability
Switzerland	17	5
United Kingdom	8	6
Americas		
Brazil	15	4
Canada	11	4
Chile	15	3
Colombia	13	2
Mexico	21	7
Panama	16	3
Peru	15	4
United States	12	6
Asia and Oceania		
Armenia	3	2
Australia	8	3
Israel	8	3
Japan	4	2
Kazakhstan	5	4
Kyrgyzstan	1	2
Thailand	23	8
Turkiye	9	3
Uzbekistan	16	4

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