

# Traffic Safety Basic Facts 2011

## The Elderly (Aged >64)

Due to their greater frailty, the elderly are more likely to be seriously injured in any given accident than younger people. In 2009, 6.976 elderly people were killed in road traffic accidents in the 22 Member States for which CARE are available, as shown in [Table 1](#) (CARE data for IE and SE were unavailable at the time of the query). This constitutes 21,7% of fatalities of all ages in 2009. [Table 1](#) presents the annual data by country from 2000, with the totals for the 19 countries with CARE data available for most of the decade. This total is presented in [Figure 4](#); it fell by 23% between 2000 and 2009.

In 2009<sup>1</sup>, almost 7.000 elderly people died in road traffic accidents in 22 European countries.

The number of elderly people who died in the EU-19 countries fell by almost one quarter between 2000 and 2009.

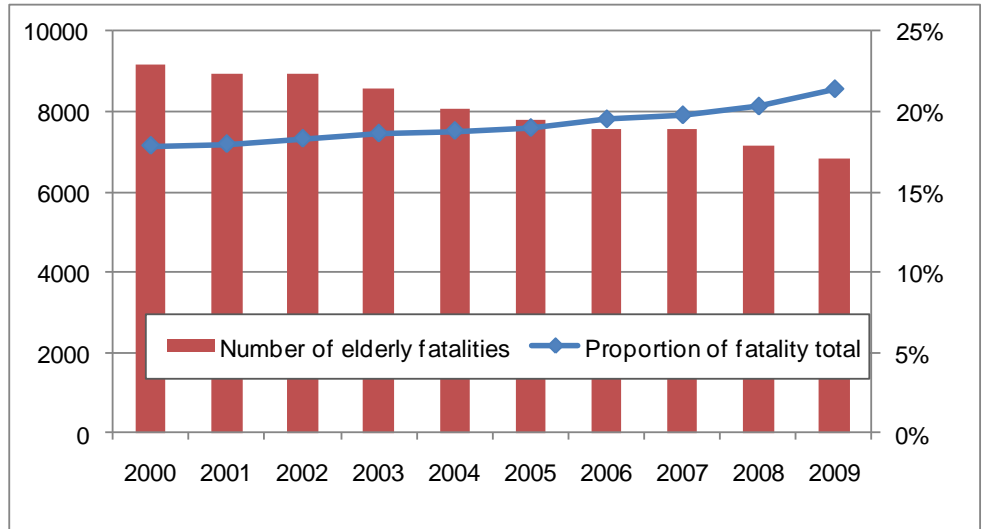
Table 1: Number of elderly fatalities by country, 2000-2009<sup>1</sup>

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
BE	238	264	210	240	201	186	193	170	149	163
CZ	243	241	211	231	247	202	173	201	186	167
DK	134	102	103	99	80	70	72	95	97	61
DE	1.311	1.283	1.236	1.329	1.201	1.162	1.154	1.153	1.066	1.104
IE	44	47	60	53	61	56	66	58	47	-
EL	428	385	340	322	317	322	327	330	329	275
ES	849	867	835	817	746	719	671	604	544	507
FR	1.370	1.393	1.361	1.120	962	1.014	921	896	823	796
IT	1.437	1.369	1.461	1.379	1.293	1.199	1.220	1.105	1.099	1.111
LU	10	7	5	6	14	8	3	7	4	9
NL	235	222	213	221	199	188	209	181	174	187
AT	190	186	211	197	177	151	156	145	172	159
PL	-	910	976	885	965	931	888	945	962	810
PT	342	320	304	304	230	222	215	225	197	205
RO	406	417	458	417	483	491	504	617	570	593
SI	56	46	47	53	49	41	33	51	34	39
FI	106	96	99	96	97	91	71	79	93	69
SE	154	147	139	118	139	104	95	105	102	-
UK	679	652	655	658	589	616	572	575	499	432
EU-19	9.142	8.955	8.924	8.546	8.050	7.773	7.543	7.542	7.148	6.836
Yearly reduction		2,0%	0,3%	4,2%	5,8%	3,4%	3,0%	0,0%	5,2%	4,4%
EE	-	-	-	-	-	21	32	41	29	18
HU	-	-	-	232	214	206	216	209	179	166
LV	-	-	-	-	-	-	61	73	55	49
MT	-	-	-	-	-	3	1	3	2	5
SK	-	-	-	-	-	77	95	97	72	51

Source: CARE Database / EC  
Date of query: November 2011

<sup>1</sup> The country abbreviations and definition of EU level are shown on Page 17. Where a value is missing for an EU-19 country in a particular year, its contribution to the EU-19 total is estimated as the previous or next known value.

Figure 1: Number of elderly fatalities and share of fatality total in EU-19, 2000-2009<sup>1</sup>

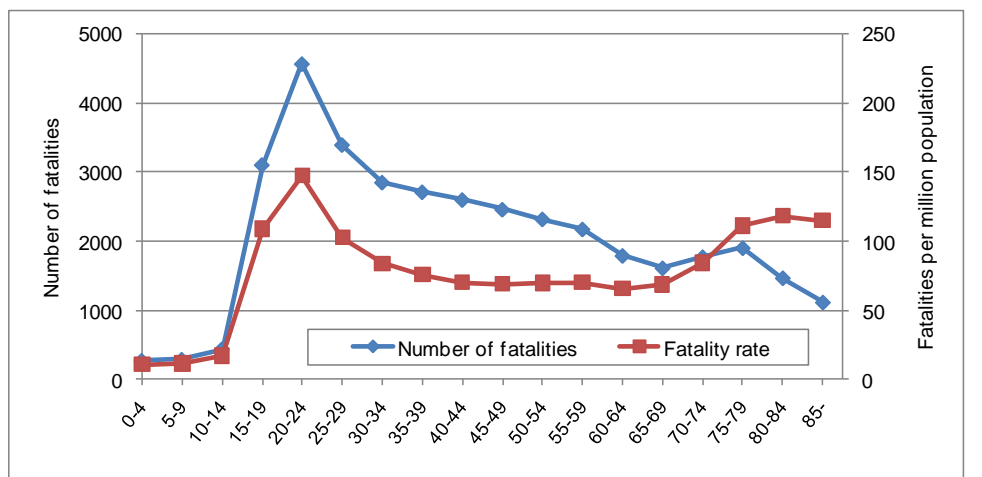


Source: CARE Database / EC  
Date of query: November 2011

Although the number of elderly fatalities has decreased over the last decade, the total has fallen faster and the proportion of all fatalities who were elderly has tended to rise.

Figure 2 puts these figures for the elderly in a broader context. It shows the number of fatalities in 2009 in the EU-24 countries in 5-year age groups. The population of these age groups varies, so the figure also shows the number of fatalities per million population. The elderly suffered fewer fatalities than the younger adult groups, but their fatality rates were amongst the highest.

Figure 2: Number of fatalities and fatality rate in EU-24 by age group, 2009



2008 fatality data used for IE and SE

Source: CARE Database / EC  
Date of query: November 2011  
Source of population data: EUROSTAT

By 2009, more than one fifth of road traffic fatalities were aged 65 or older.

The rate of road traffic fatalities per million population begins to rise about the age of 65.

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In most European countries, the elderly are at greater risk of being killed in a road accident than the overall population. Middle-aged people (age 45-64) are at a lower risk of being killed than the elderly.

**Table 2** compares the fatality rates of elderly people and middle-aged people (45-64 years) with the fatality rate of the whole population. The ratios of elderly to middle-aged and of elderly to all fatalities clearly show that the risk of being killed in an accident is higher for the elderly than for the middle-aged and that the elderly have an above-average fatality risk in most of the EU-24 countries.

**Table 2: Fatalities per million population for the middle-aged and elderly, by country, 2009**

	Fatality rate			Comparisons	
	Middle-aged (45-64)	Elderly (65+)	All ages	Elderly Middle-aged	Elderly All ages
BE	74	89	88	1.20	1.01
CZ	83	107	86	1.29	1.25
DK	43	70	55	1.61	1.27
DE	43	66	51	1.54	1.31
EE	58	78	73	1.34	1.07
IE	34	96	63	2.79	1.52
EL	103	131	129	1.27	1.01
ES	56	66	59	1.19	1.12
FR	56	76	68	1.38	1.12
IT	60	92	70	1.53	1.31
LV	121	125	112	1.04	1.12
LU	104	131	97	1.26	1.35
HU	88	100	82	1.13	1.22
MT	25	86	36	3.40	2.37
NL	28	76	39	2.71	1.94
AT	67	110	76	1.63	1.45
PL	124	157	120	1.27	1.31
PT	76	108	79	1.42	1.37
RO	145	186	130	1.28	1.43
SI	85	117	84	1.37	1.39
SK	72	78	71	1.08	1.10
FI	39	77	52	2.01	1.48
SE	41	62	43	1.50	1.45
UK	32	43	38	1.34	1.14
EU-24	63	85	69	1.36	1.23

2008 fatality data used for IE and SE

Source: CARE Database / EC

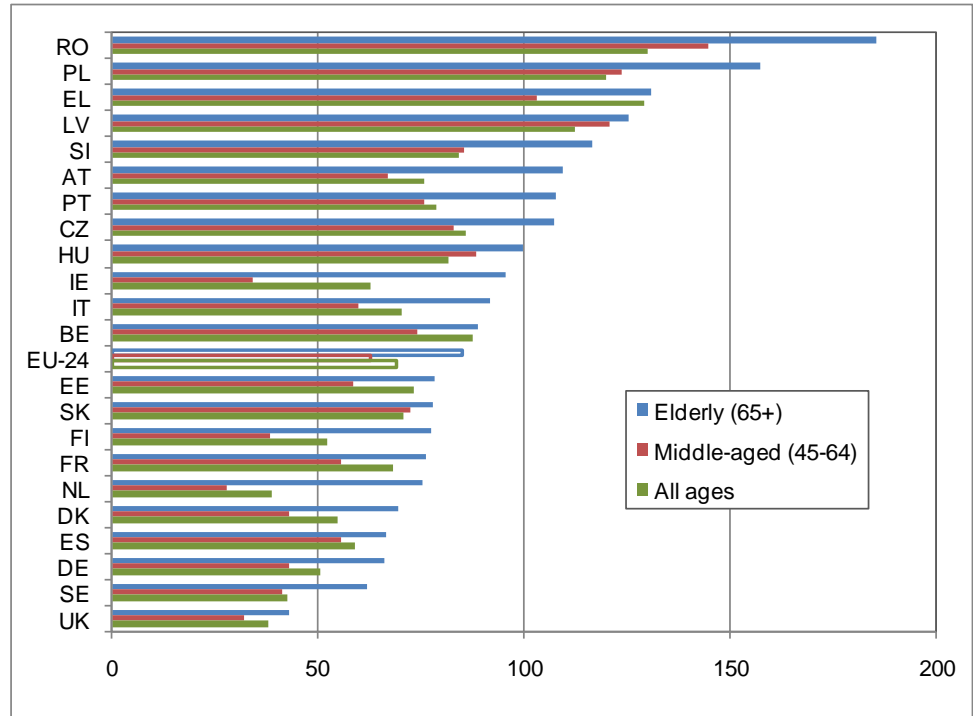
Date of query: November 2011

Source of population data: EUROSTAT

Romania and Poland have the highest overall fatality rates, and they also have the highest rates for the elderly. The three sets of fatality rates are illustrated in **Figure 3**, with countries being sorted by the overall fatality rate for the elderly (Luxembourg and Malta are excluded because of the low number of fatalities).

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Figure 3: Fatalities per million population, 2009



2008 fatality data used for IE and SE

Source: CARE Database / EC  
Date of query: November 2011  
Source of population data: EUROSTAT

### Age and gender

Table 3 gives more details of the age groups and of the gender distribution of elderly fatalities, using three age ranges. Almost two thirds (62%) of elderly fatalities are men.

Table 3: Number of elderly fatalities by age group, gender and country, 2009

	Proportion by age			Proportion by gender		Total
	65-74	75-84	85+	male	female	
BE	44%	40%	16%	63%	37%	163
CZ	46%	41%	13%	58%	42%	167
DK	36%	39%	25%	54%	46%	61
DE	45%	41%	15%	59%	41%	1.104
EE	61%	33%	6%	56%	44%	18
IE	43%	48%	9%	59%	41%	46
EL	44%	48%	7%	73%	27%	275
ES	46%	40%	14%	65%	35%	507
FR	36%	44%	20%	57%	43%	796
IT	43%	44%	14%	69%	31%	1.111
LV	43%	24%	33%	71%	29%	49
LU	44%	56%	0%	44%	56%	9
HU	54%	33%	13%	61%	39%	166
MT	100%	0%	0%	80%	20%	5
NL	34%	47%	20%	64%	36%	187
AT	44%	41%	15%	65%	35%	159
PL	46%	44%	10%	58%	42%	810
PT	48%	45%	7%	72%	28%	205
RO	51%	42%	8%	63%	37%	593
SI	36%	54%	10%	62%	38%	39
SK	51%	33%	16%	53%	47%	51
FI	35%	43%	22%	68%	32%	69
SE	40%	41%	19%	61%	39%	102
UK	34%	41%	26%	55%	45%	432
EU-24	43%	42%	14%	62%	38%	7.124

2008 fatality data used for IE and SE

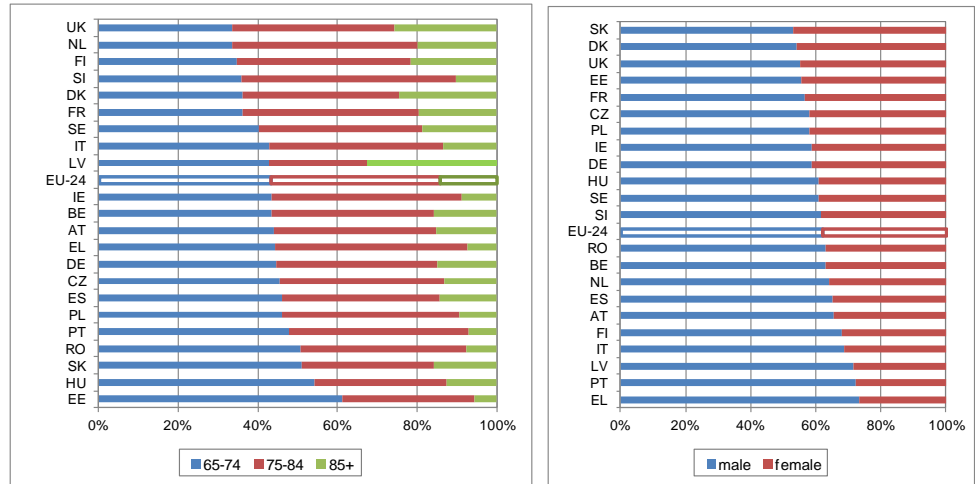
Source: CARE Database / EC  
Date of query: November 2011

Almost two thirds of the elderly people killed in road accidents are men.

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Women make up a higher proportion of fatalities among the elderly (38%) than within the whole population (24%). ~~Figure 4~~ ~~Figure 4~~ illustrates the results from ~~Table 3~~ ~~Table 3~~ (Luxembourg and Malta are excluded because the low number of fatalities may mean that proportions are misleading). The highest proportions of female elderly fatalities occur in Slovakia (47%) and Denmark (46%). The highest proportions of elderly fatalities aged 65-74 occur in Estonia (61%) and Hungary (57%).

Figure 4: Proportion of elderly fatalities by age group, gender and country, 2009



2008 fatality data used for IE and SE

Source: CARE Database / EC  
Date of query: November 2011

~~Table 4~~ ~~Table 4~~ calculates the rate of fatalities per million population for the three age groups in ~~Table 3~~ ~~Table 3~~. The 75-84 age group has the highest fatality rate, averaged over the EU-23, while the 65-74 group has the lowest. These differences are probably influenced by the tendency for personal mobility to reduce with increasing age, and for frailty to increase. The table also shows that in most countries the fatality rate of elderly men is over twice the rate of elderly women.

The proportion of elderly people killed in road accidents who are at least 85 years old is highest in Latvia and the UK.

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Table 4: Fatality rates of the elderly by age group, gender and country, 2009

	Fatality rate by age			Fatality rate by gender		All elderly
	65-74	75-84	85+	Male	Female	
BE	78	94	117	134	56	89
CZ	87	125	161	157	75	107
DK	45	87	138	86	57	70
DE	51	85	95	92	48	66
EE	86	74	51	132	52	78
IE	72	137	73	123	70	94
EL	109	164	116	218	62	131
ES	62	70	76	102	40	66
FR	58	88	105	105	56	76
IT	76	112	99	151	49	92
LV	93	89	535	274	53	125
LU	110	197	0	138	125	131
HU	98	97	119	168	61	100
NL	47	104	130	112	48	76
AT	89	132	139	174	64	110
PL	134	189	172	243	106	157
PT	98	135	70	189	51	108
RO	161	220	218	287	116	186
SI	75	177	137	184	74	117
SK	70	75	147	111	59	78
FI	51	95	145	129	42	77
SE	48	76	78	85	44	62
UK	28	51	82	54	34	43
EU-23	69	102	105	127	55	85

2008 fatality data used for IE and SE

Source: CARE Database / EC

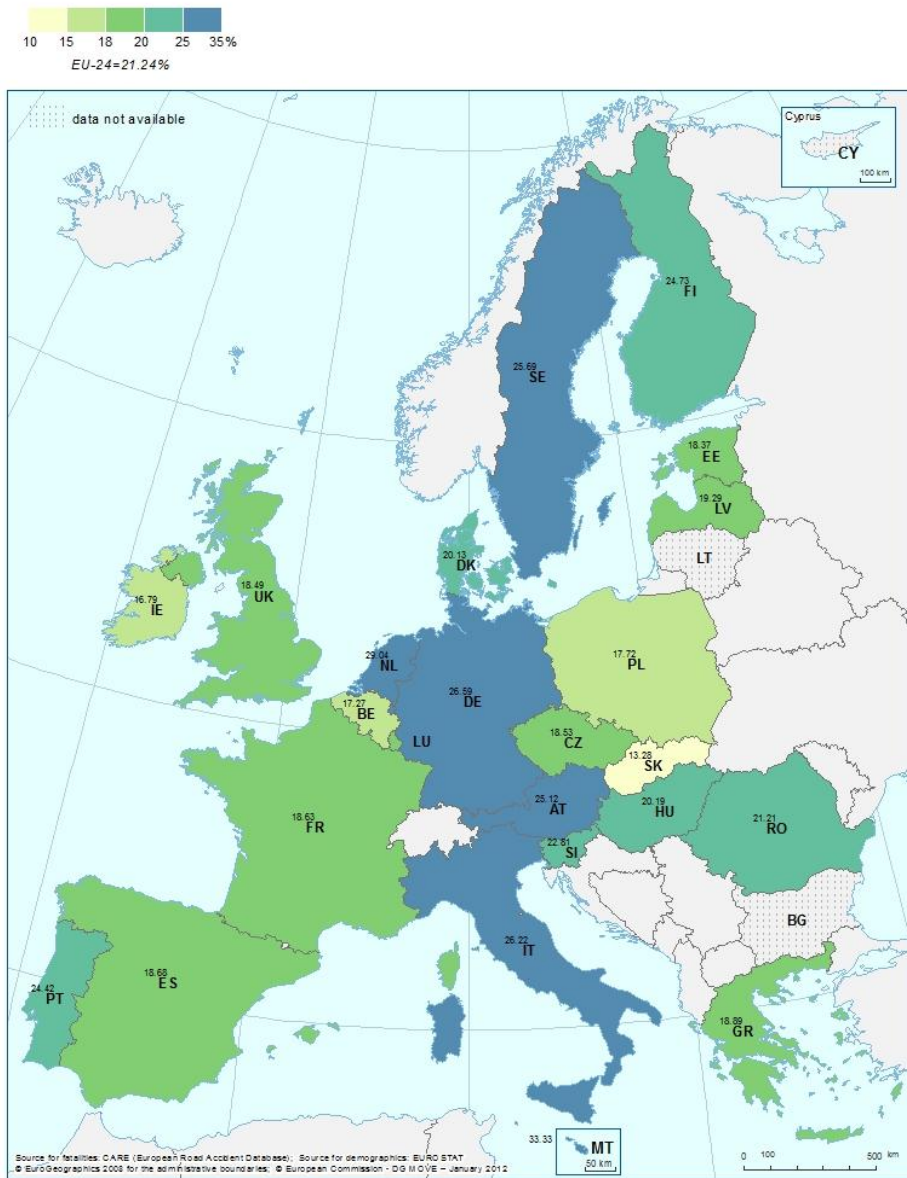
Date of query: November 2011

Averaged over Europe, the fatality rate for elderly men is more than twice the rate for elderly women.

Map 1 shows the proportion of fatalities that were elderly (at least 65 years old) by country in 2009. Among the larger countries, this ranged between 18% in Poland and the United Kingdom to 29% in the Netherlands.

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Map 1: Proportion of fatalities that were elderly by country, 2009



The proportion of fatalities that were elderly varies between countries between one sixth and almost one third.

### Road user type

Table 5 shows the numbers of elderly fatalities by road user type. The percentages reflect the reduced mobility options and the higher frailty of elderly persons. 41% of elderly fatalities were pedestrians in the EU-23 countries. Among the larger countries, the percentage of elderly fatalities who were pedestrians is greatest in Romania (67%) and least in the Netherlands (13%). Conversely, the proportion of elderly fatalities who were car drivers ranged between 5% in Romania and 49% in Sweden. The results are illustrated in Figure 5 (sorted by the share of pedestrian fatalities, and excluding Luxembourg).

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Table 5: Number of elderly fatalities by road user type, 2009

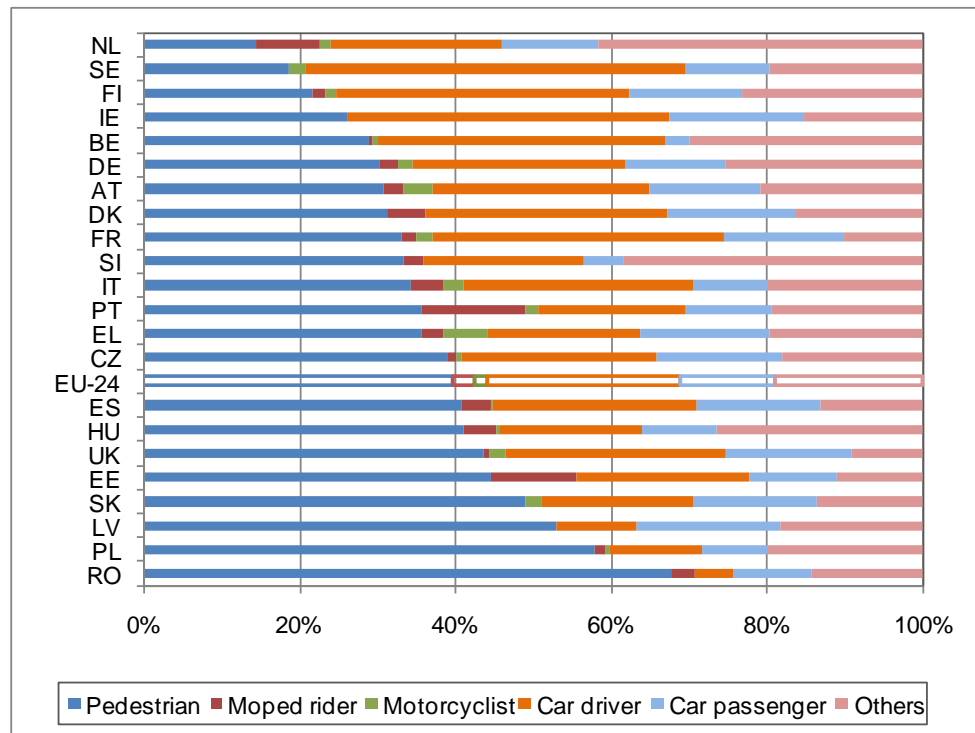
	Pedestrian	Moped rider	Motorcyclist	Car driver	Car passenger	Others	Total
BE	29%	1%	1%	37%	3%	30%	163
CZ	39%	1%	1%	25%	16%	18%	167
DK	31%	5%	0%	31%	16%	16%	61
DE	30%	2%	2%	27%	13%	25%	1.104
EE	44%	11%	0%	22%	11%	11%	18
IE	26%	0%	0%	41%	17%	15%	46
EL	36%	3%	5%	20%	17%	20%	275
ES	41%	4%	0%	26%	16%	13%	507
FR	33%	2%	2%	37%	15%	10%	796
IT	34%	4%	3%	29%	10%	20%	1.111
LV	53%	0%	0%	10%	18%	18%	49
LU	56%	0%	0%	33%	11%	0%	9
HU	41%	4%	1%	18%	10%	27%	166
NL	40%	0%	0%	40%	20%	0%	5
MT	14%	8%	2%	22%	12%	42%	187
AT	31%	3%	4%	28%	14%	21%	159
PL	58%	2%	0%	12%	8%	20%	810
PT	36%	13%	2%	19%	11%	19%	205
RO	68%	3%	0%	5%	10%	14%	593
SI	33%	3%	0%	21%	5%	38%	39
SK	49%	0%	2%	20%	16%	14%	51
FI	22%	1%	1%	38%	14%	23%	69
SE	19%	0%	2%	49%	11%	20%	102
UK	44%	1%	2%	28%	16%	9%	432
EU-24	40%	3%	2%	25%	12%	19%	7.124

2008 fatality data used for IE and SE

Source: CARE Database / EC  
Date of query: November 2011

Across Europe, two fifths of elderly fatalities were pedestrians and one quarter were car drivers.

Figure 5: Distribution of elderly fatalities by road user type, 2009



2008 fatality data used for IE and SE

Source: CARE Database / EC  
Date of query: November 2011

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About two fifths of pedestrian fatalities were elderly, compared with one sixth of car occupants.

Table 6 ~~Table 6~~ now shows the corresponding proportions of fatalities who were elderly so, for example, 47 of the 101 pedestrian fatalities in Belgium were elderly and  $47/101=47\%$ . Cases with less than 50 fatalities are excluded from Table 6 ~~Table 6~~ because percentages of relatively small totals may be misleading.

Table 6: Proportion of fatalities that are elderly, by road user type and country, 2009

	Pedestrian	Moped rider	Motorcyclist	Car occupant	Others	Total
BE	47%		1%	14%	23%	17%
CZ	37%		1%	14%	22%	19%
DK	37%			18%		20%
DE	57%	24%	3%	21%	40%	27%
EE				11%		18%
IE				17%		17%
EL	49%		4%	15%	38%	19%
ES	44%	12%	0%	17%	17%	19%
FR	53%	5%	2%	19%	20%	19%
IT	57%	22%	3%	24%	42%	26%
LV	32%			12%		19%
LU						
HU	37%		1%	12%	29%	20%
MT						
NL	43%		4%	22%	44%	29%
AT	49%		7%	21%	37%	25%
PL	32%	19%	1%	8%	29%	18%
PT	49%	47%	3%	20%	18%	24%
RO	40%	14%	1%	8%	20%	21%
SI				17%	26%	23%
SK	22%			10%	13%	13%
FI				22%		25%
SE			4%	26%	36%	26%
UK	36%		2%	17%	20%	18%
EU-23	42%	17%	2%	17%	29%	21%

Percentages only for cells with at least 50 fatalities of all ages. 2008 fatality data used for IE and SE

Source: CARE Database / EC  
Date of query: November 2011

### Type of road

Table 7 ~~Table 7~~ and Figure 6 ~~Figure 6~~ show the distribution of elderly fatalities by type of road, and compare it with the distribution for the middle-aged (countries with more than a quarter of cases “unknown” are excluded from the figure). By comparison with the middle-aged fatalities, there are fewer elderly fatalities on motorways and on rural roads, but more on urban roads. This is probably a result of the relatively high proportion of elderly fatalities who are pedestrians (most pedestrian fatalities occur on urban roads). The national distributions vary greatly between the member states.

Table 7: Distribution of middle-aged and elderly fatalities by road type and country, 2009

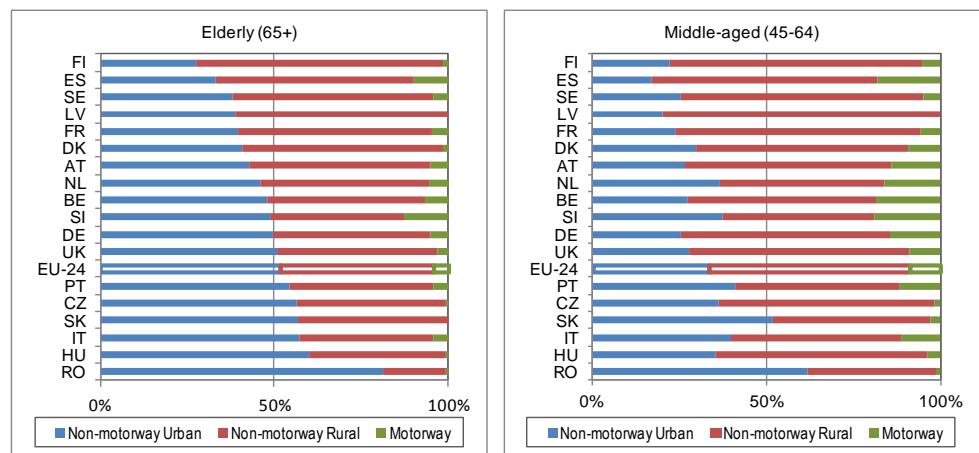
	Elderly (65+)				Middle-aged (45-64)			
	Motorway	Non-motorway		Total	Motorway	Non-motorway		Total
		Rural	Urban			Rural	Urban	
BE	6%	43%	45%	163	17%	52%	26%	212
CZ	1%	43%	56%	167	2%	62%	36%	237
DK	2%	57%	41%	61	9%	61%	30%	64
DE	5%	45%	50%	1.104	14%	60%	25%	963
EE	0%	0%	0%	18	0%	0%	0%	20
IE	2%	0%	0%	47	0%	0%	0%	34
EL	6%	10%	1%	275	8%	18%	3%	300
ES	10%	57%	33%	507	18%	65%	17%	627
FR	5%	56%	40%	796	6%	71%	24%	899
IT	4%	39%	57%	1.111	11%	49%	40%	944
LV	0%	61%	39%	49	0%	80%	20%	70
LU	44%	0%	44%	9	62%	0%	31%	13
HU	1%	39%	60%	166	4%	61%	36%	236
NL	5%	47%	45%	187	16%	46%	36%	127
AT	5%	52%	43%	159	14%	59%	27%	147
PL	1%	30%	40%	810	1%	51%	31%	1.280
PT	4%	41%	54%	205	12%	48%	41%	206
RO	1%	18%	81%	593	1%	37%	62%	766
SI	13%	38%	49%	39	19%	44%	38%	48
SK	0%	43%	57%	51	3%	45%	51%	103
FI	1%	71%	28%	69	5%	73%	22%	59
SE	4%	54%	35%	102	5%	70%	25%	99
UK	3%	40%	44%	432	8%	56%	25%	502
EU-24	4%	40%	47%	7.125	8%	54%	31%	7.959

%s do not sum to 100 in countries where road type is unknown for some fatalities. 2008 fatality data used for IE and SE

Source: CARE Database / EC Date of query: November 2011

Compared with the middle-aged, relatively many elderly were killed on urban roads, and relatively few on rural roads and motorways.

Figure 6: Distribution of middle-aged and elderly fatalities by road type, 2009



2008 fatality data used for SE

Source: CARE Database / EC Date of query: November 2011

### Day of week and time of day

Table 8 shows the distribution of elderly fatalities by time of day, dividing the day into eight 3-hour periods (DE is excluded as hour is unknown for all fatalities). More than 80% of all elderly fatalities occur between 8am and 8pm. While the number of elderly fatalities decreases after 8pm in many countries, it stays high during evening

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hours in southern countries (Greece and Spain), as well as Ireland.

Table 8: Proportion of elderly fatalities by time of day and country, 2009

	00:00-03:59	04:00-07:59	08:00-11:59	12:00-15:59	16:00-19:59	20:00-23:59	Total
BE	4%	4%	31%	28%	25%	10%	163
CZ	1%	13%	27%	31%	19%	10%	166
DK	2%	3%	34%	28%	26%	7%	61
EE	0%	6%	33%	17%	33%	11%	18
IE	4%	0%	19%	40%	19%	17%	47
EL	4%	8%	21%	27%	26%	14%	275
ES	2%	4%	24%	26%	30%	14%	507
FR	2%	4%	29%	28%	32%	6%	796
IT	2%	5%	32%	20%	31%	9%	1.103
LV	2%	4%	22%	16%	29%	27%	49
LU	11%	0%	0%	33%	33%	22%	9
HU	1%	17%	30%	22%	21%	10%	166
MT	0%	20%	40%	0%	0%	40%	5
NL	1%	2%	18%	44%	30%	6%	186
AT	2%	4%	24%	34%	30%	6%	159
PL	1%	11%	25%	19%	34%	10%	810
PT	3%	8%	24%	23%	33%	8%	205
RO	1%	10%	23%	21%	31%	14%	593
SI	5%	15%	13%	26%	36%	5%	39
SK	0%	10%	26%	14%	40%	10%	50
FI	0%	3%	28%	41%	26%	3%	69
SE	3%	3%	21%	46%	25%	3%	102
UK	2%	3%	27%	33%	24%	10%	432
EU-23	2%	6%	27%	25%	30%	10%	6.010

Excludes small number of fatalities in CZ, IT and LV with hour unknown. DE is excluded as hour is unknown for all fatalities.

Source: CARE Database / EC  
Date of query: November 2011

Table 9 presents the corresponding analysis by day of week.

Table 9: Proportion of elderly fatalities by day of week and country, 2009

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total
BE	10%	15%	14%	15%	14%	13%	19%	163
CZ	17%	14%	17%	16%	14%	13%	10%	167
DK	13%	18%	20%	15%	13%	8%	13%	61
DE	17%	16%	16%	15%	15%	12%	9%	1.104
EE	17%	11%	6%	33%	6%	22%	6%	18
IE	19%	21%	4%	17%	15%	9%	15%	47
EL	15%	13%	17%	11%	12%	15%	17%	275
ES	13%	14%	15%	16%	16%	14%	13%	507
FR	15%	16%	15%	15%	14%	14%	13%	796
IT	15%	13%	17%	15%	17%	13%	9%	1.111
LV	12%	6%	10%	14%	18%	20%	18%	49
LU	11%	22%	11%	0%	33%	0%	22%	9
HU	15%	8%	19%	19%	19%	9%	11%	166
MT	0%	0%	20%	0%	40%	40%	0%	5
NL	19%	12%	16%	14%	16%	15%	9%	187
AT	14%	16%	14%	14%	17%	11%	14%	159
PL	14%	16%	17%	13%	18%	13%	10%	810
PT	13%	16%	12%	16%	17%	14%	12%	205
RO	15%	11%	15%	14%	16%	14%	15%	593
SI	8%	13%	18%	23%	10%	10%	18%	39
SK	20%	4%	25%	14%	14%	12%	12%	51
FI	16%	17%	19%	10%	22%	9%	7%	69
SE	14%	14%	24%	19%	13%	12%	6%	102
UK	16%	17%	13%	16%	15%	14%	10%	432
EU-23	15%	14%	16%	15%	16%	13%	11%	7.120

Source: CARE Database / EC  
Date of query: November 2011

More than 80% of all elderly fatalities occur between 8am and 8pm.

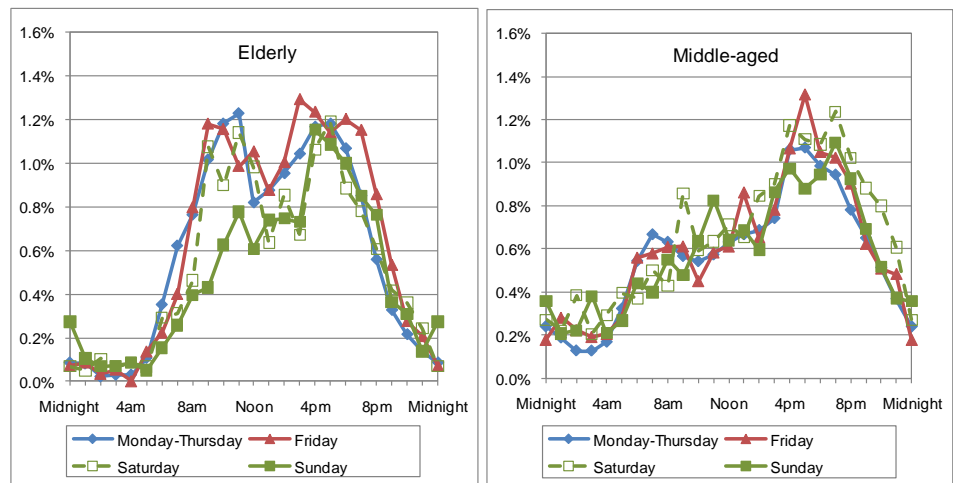
The greatest number of elderly fatalities occurs on Fridays, and the lowest on Sundays.

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**Figure 7** ~~Figure 7~~ investigates whether the EU-22 distribution of fatalities by time of day varies with day of week for the elderly and for the middle-aged. The weekday distributions (Monday-Thursday) are similar, so have been combined in the figure. There are 168 hours per week, so on average 0,60% of fatalities occur in each hour through the week.

There are clear differences between middle-aged and elderly fatality distributions and limited but significant differences by day of week. Relatively few elderly people are killed in road accidents at night. The middle-aged distributions have clear daily peaks in the late afternoon, especially at the weekend. The elderly distributions have peaks slightly earlier in the afternoon, with additional peaks before noon.

**Figure 7: Middle-aged and elderly fatalities by day of week and time of day in EU-23, 2009**



Monday-Thursday values are the averages of the daily values from Monday to Thursday

Source: CARE Database / EC  
Date of query: November 2011

The peak of the fatality distribution occurs earlier in the afternoon for the elderly than for middle-aged, with a secondary peak before noon.

### Seasonality

**Table 10** ~~Table 10~~ shows the distribution of elderly fatalities in each quarter of the year. Although the number of elderly fatalities peaks in the fourth quarter (October to December) in most countries, as in the EU-23, the peak in Spain and Greece occurs in the third quarter (July to September).

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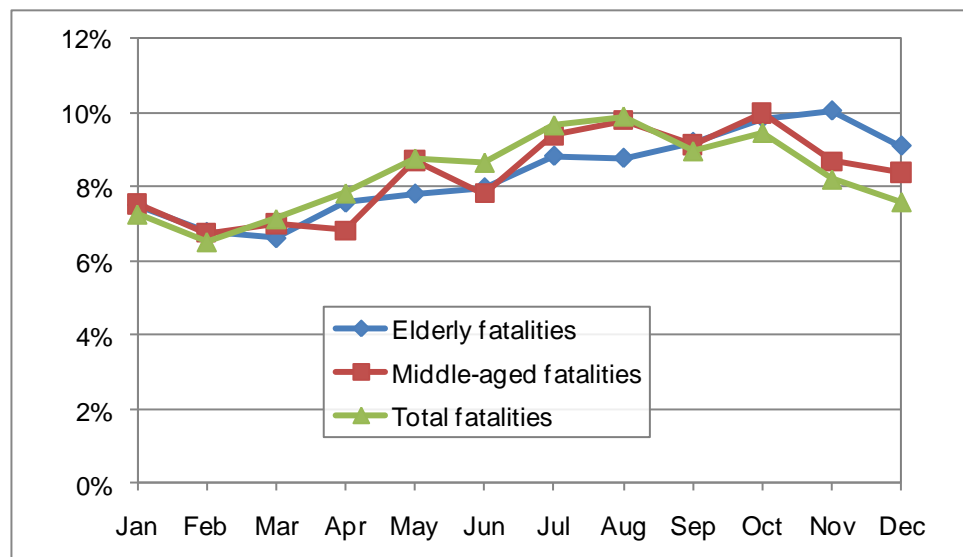
Table 10: Proportion of elderly fatalities by quarter of year and country, 2009

	January - March	April - June	July - September	October - December	Total
BE	20%	25%	27%	29%	163
CZ	21%	17%	27%	35%	167
DK	23%	33%	26%	18%	61
DE	20%	24%	27%	29%	1.104
EE	11%	11%	50%	28%	18
IE	21%	32%	26%	21%	47
EL	16%	24%	31%	29%	275
ES	26%	26%	25%	23%	507
FR	22%	23%	26%	28%	796
IT	20%	25%	26%	29%	1.111
LV	31%	22%	18%	29%	49
LU	56%	22%	0%	22%	9
HU	25%	23%	22%	30%	166
MT	0%	0%	0%	100%	5
NL	18%	23%	30%	29%	187
AT	21%	23%	26%	29%	159
PL	19%	20%	28%	34%	810
PT	21%	21%	29%	30%	205
RO	16%	24%	29%	30%	593
SI	23%	33%	26%	18%	39
SK	18%	31%	25%	25%	51
FI	26%	19%	30%	25%	69
SE	21%	25%	28%	25%	102
UK	29%	20%	23%	28%	432
EU-24	21%	23%	27%	29%	7.125

Source: CARE Database / EC  
Date of query: November 2011

Figure 8 compares the distribution by month of elderly and middle-aged fatalities with the overall distribution. For all three, the lowest number of fatalities occurs between February and April. The number of elderly fatalities rises relatively slowly to a peak in October, then declines relatively slowly.

Figure 8: Distribution of middle-aged, elderly and total fatalities by month in EU-24, 2009



There are relatively few elderly fatalities in the spring and summer, and relatively many during the winter.

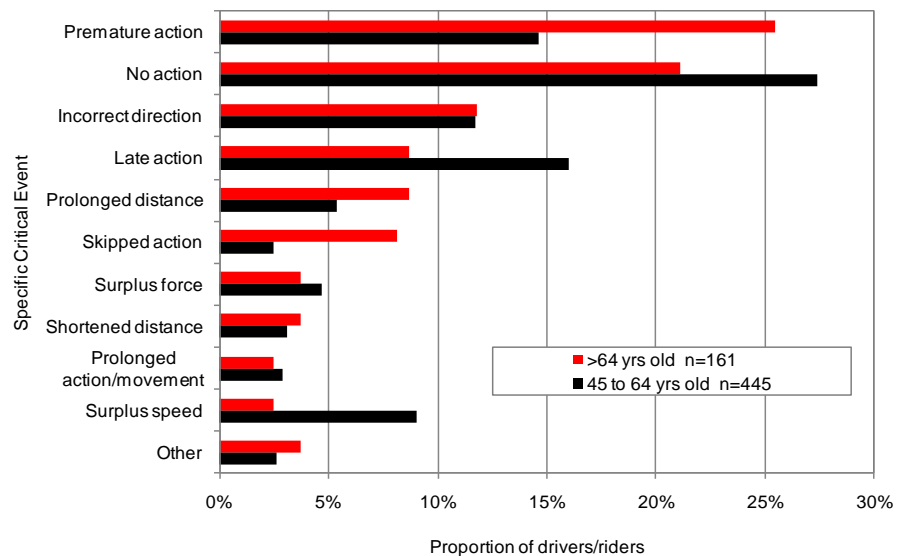
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## Accident Causation

During the EC SafetyNet project, in-depth data were collected using a common methodology for samples of accidents that occurred in Germany, Italy, The Netherlands, Finland, Sweden and the UK<sup>2 3</sup>. The SafetyNet Accident Causation Database was formed between 2005 and 2008, and contains details of 1.006 accidents covering all injury severities. A detailed process for recording causation (SafetyNet Accident Causation System – SNACS) attributes one specific critical event to each driver, rider or pedestrian. Links then form chains between the critical event and the causes that led to it. For example, the critical event of late action could be linked to the cause observation missed, which was a consequence of fatigue, itself a consequence of an extensive driving spell.

These data have been analysed to compare the causation recorded for elderly and middle-aged drivers and riders. Of the accidents in the database, 15% (155) involve an elderly driver or rider (aged > 64 years old). Males account for 79% of this group and 75% are drivers of passenger cars, followed by 15% who were bicycle riders. Figure 9 compares the distribution of specific critical events for elderly drivers/riders against the distribution for the middle-aged group (45 to 64 year olds).

Figure 9: Distribution of specific critical events – elderly and middle-aged drivers/riders



N=606

Source: SafetyNet Accident Causation Database 2005 to 2008 / EC  
Date of query: 2010

Specific critical events under the general category of ‘timing’, no action, premature action and late action, are important for both the elderly and middle-aged groups. A premature action is one undertaken before a signal has been given or the required conditions are established, for example entering a junction before it is clear of other traffic. Premature action is recorded more frequently for the elderly group, whilst no action and late action are more frequent for

<sup>2</sup> SafetyNet D5.5, Glossary of Data Variables for Fatal and Accident Causation Databases  
<sup>3</sup> SafetyNet D5.8, In-Depth Accident Causation Database and Analysis Report

Specific critical events relating to ‘timing’ are recorded for 55% of elderly drivers and riders in the sample.

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12% of the links between causes are observed to be between 'faulty diagnosis' and 'information failure'.

the middle-aged group. No action describes those drivers/riders who have not reacted at all (or at least in an effective time frame) to avoid a collision, for example, to avoid an oncoming vehicle. Looking at other differences, prolonged distance and skipped action are more prevalent in the elderly group, whilst surplus (excess) speed is less prevalent. Prolonged distance is an action taken too far, such as entering a junction across a give way line, and skipped action is missing a part of the driving task, such as not looking before changing lane. Examples of incorrect direction, the third most frequent specific critical event for the elderly group, are making a manoeuvre in the wrong direction, turning left instead of right and going off the road instead of following the lane.

Table 11 gives the most frequent links between causes for elderly drivers/riders in the dataset. For this group there are 166 such links.

**Table 11: Ten most frequent links between causes – elderly drivers/riders**

Links between causes	Frequency
Faulty diagnosis - Information failure (between driver and traffic environment or driver and vehicle)	20
Observation missed - Permanent obstruction to view	17
Observation missed - Temporary obstruction to view	14
Observation missed - Faulty diagnosis	13
Observation missed - Distraction	7
Observation missed - Inattention	7
Observation missed - Inadequate plan	6
Faulty diagnosis - Communication failure	6
Faulty diagnosis - False observation	5
Faulty diagnosis - Cognitive bias	5
Others	66
Total	166

Source: SafetyNet Accident Causation Database 2005 to 2008 / EC  
Date of query: 2010

Faulty diagnosis is an incorrect or incomplete understanding of road conditions or another road user's actions. It is linked to information failure (for example, a driver thinking another vehicle was moving when it was in fact stopped and colliding with it) and communication failure (for example, pulling out in the continuing path of a driver who has indicated for a turn too early). For this group it is also linked, although in lower numbers, to false observation (for example, incorrectly recognising a green traffic light as being red) and cognitive bias (taking in and processing information but with incorrect cognitive interpretation, for example, reading a green light for the next set of traffic lights further on). The causes leading to observation missed fall into two groups, physical 'obstruction to view' type causes (for example, parked cars at a junction) and human factors (for example, missing a red light due to distraction or inattention).

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## Disclaimer

The information in this document is provided as it is and no guarantee or warranty is given that the information is fit for any particular purpose. Therefore, the reader uses the information at their own risk and liability.

## For more information

Further statistical information about fatalities is available from the CARE database at the Directorate General for Mobility and Transport of the European Commission, 28 Rue de Mot, B -1040 Brussels.

Traffic Safety Basic Fact Sheets available from the European Commission concern:

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**Country abbreviations used and definition of EU-level**

EU - 19		EU-24= EU-19 +	
BE	Belgium	EE	Estonia
CZ	Czech Republic	HU	Hungary
DK	Denmark	MT	Malta
DE	Germany	LV	Latvia
IE	Ireland	SK	Slovakia
EL	Greece		
ES	Spain		
FR	France		
IT	Italy		
LU	Luxembourg		
NL	Netherlands		
AT	Austria		
PT	Portugal		
PL	Poland		
RO	Romania		
SI	Slovenia		
FI	Finland		
SE	Sweden		
UK	United Kingdom (GB+NI)		

Detailed data on traffic accidents are published annually by the European Commission in the Annual Statistical Report. This includes a glossary of definitions on all variables used.

More information on the DaCoTA Project, co-financed by the European Commission, Directorate-General for Mobility and Transport is available at the DaCoTA Website: <http://www.dacota-project.eu/index.html>.

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