Viet Nam’s Helmet Story and its Place in the Work on Global Road Traffic Safety

Seven years after publishing Helmet Day!
Lessons Learned on Vietnam’s Road to Healthy Behavior

TO BUILD AND SUSTAIN CAPACITY FOR PRODUCING AND USING SOCIAL RESEARCH FOR EVALUATION AND DECISION MAKING IN VIET NAM’S HEALTH SECTOR - PHASE 2

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Executive Summary

This report examines seven years of road traffic safety in Viet Nam, since the Social Science Research Council (SSRC) first published Helmet Day! Lessons Learned on Vietnam’s Road to Healthy Behavior, and provides an update on the progress achieved and challenges that remain in continuing to work toward universal helmet wearing in Viet Nam.

The Atlantic Philanthropies’ final funding to Asia Injury Prevention (AIP) Foundation has supported significant and sustainable progress toward universal helmet wearing by primary school aged children. The lack of helmet use by children had left a hole in the earlier success story of adults’ embrace of helmet wearing. In addition, the project carried out, Head Safe, Helmet On, contributed to increasing the maturity, strength, technical skills, and sustainability of AIP Foundation, the grant recipient. We would like to tell some of the story of steps taken by Atlantic in its long-term commitment to injury prevention and road traffic safety, its relationship to AIP Foundation, and results achieved through their collaboration.

The SSRC wrote its first report on helmet use in Viet Nam following the implementation of a new Helmet Law in 2007. One of the issues that remained following the successful implementation of the law on Helmet Day, December 15, 2007 was that although children wore helmets when the law was enforced that day, within two weeks they were no longer wearing them. Parents believed false rumors that small children’s skulls would be damaged by helmets. They also heard another rumor, that children’s necks were too weak to hold their heads up with helmets on. Since these statements were not true, it was clear that there was a lot of unfinished business related to increasing children’s helmet use. “Most significant, it is essential to put helmets back on children’s heads,” we wrote in our 2008 report about the behavior change process that put helmets on motorcycle riders in Viet Nam.¹

The Atlantic Philanthropies, a limited-life foundation, was an early, significant supporter of injury prevention work in Viet Nam, including multiple aspects of the Helmet Story. With Atlantic funding, AIP Foundation built the world’s first non-profit helmet factory where they manufacture Protec “tropical helmets.”² These efforts included designing and making children’s motorcycle helmets and getting tropical and child helmet standards approved. The Protec factory fed products into AIP Foundation’s Helmets for Kids program, which began in Vietnamese schools in 2000 and continues in 2017. This school-based program became the foundation, along with their primary school road safety curriculum, for all of AIP Foundation’s future work in this area. AIP Foundation’s successful pioneering

² A short helmet with exposure for ears, cooling vents in the helmet body and although of high standard, very light weight. Many of the workers at the Protec factory are physically challenged, mostly from the local area near Noi Bai airport. The factory was built adapted to their needs. All proceeds from helmet sales go back into road safety programming.
work in Viet Nam contributed heavily to the enormous success of the introduction and implementation of the country’s 2007 helmet use law.

**Atlantic continued support to addressing remaining issues through AIP Foundation.** In 2009, AIP Foundation received a six-month $85,000 planning grant to develop a five-year business plan and build internal capacity to 1) identify major components and a budget needed to develop and expand school-based road traffic safety injury prevention programs in Viet Nam, and 2) replicate *Helmets for Kids* in Thailand and Cambodia. The Foundation also learned a lot about working in new countries and regional authorities were exposed to global programs. The planning process gave AIP Foundation the evidence base it needed to attract donors for future work. Three lessons learned included: 1) the importance of better research, information collection, and management; 2) the necessity of flexibility in strategic planning; and 3) the significance of multilateral partnerships. Without this planning grant, it would have been impossible to next develop a successful plan and proposal to Atlantic for a long-term school-based project focused on increasing child helmet use.

Also contributing to the plan and proposal was an October 2009 “Stakeholder Meeting for Childhood Safety in Viet Nam.” The meeting brought former helmet project collaborators and partners together, hosted by AIP Foundation, the National Traffic Safety Committee (NTSC) and Ministry and Education and Training (MoET). **This meeting renewed and strengthened the network** of national and international groups. It encouraged open communication and a large forum of committed stakeholders. By 2010 they had formed a collaborative effort to increase child helmet use. The group included a number of other Atlantic-supported organizations: the Center for Injury Policy and Prevention Research (CIPPR), the Hanoi School of Public Health (HSPH), Counterpart International, UNICEF, and The Alliance for Safe Children (TASC).

**AIP Foundation successfully obtained a final grant from The Atlantic Philanthropies for the Vietnam national child helmet campaign.** The grant supported the design and implementation of the Viet Nam related component of the work plan developed under the previous grant. The Foundation was able to secure other donors for the remainder of the funding. The four year project began in September 2010.

This major project, *Head Safe, Helmet On*, with the slogan **“Children need helmets, too,”** dramatically changed the landscape of primary school-based child helmet use programming. By 2015 it had evolved into a “National Child Helmet Action Plan” program. Focused on increasing primary school children’s helmet use in selected districts of Ha Noi, Da Nang, and Ho Chi Minh City (HCMC), *Head Safe, Helmet On* emphasized police and school enforcement of the helmet law. The many partners involved in the multi-layered project discovered that much was required of them, especially flexibility and patience. Following an initial research and campaign development period, the campaign included three integrated components that were carried out in three phases: 1) an innovative and consensus-driven public awareness campaign; 2) police enforcement, including repeated periods of extreme enforcement; and 3) partnership and capacity building.

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3 Of the total US$3,000,000 budget, the Atlantic grant funded US$1,800,000. This brought Atlantic’s total support to AIP Foundation’s injury prevention and child traffic safety program in Viet Nam to US$3,748,000.

4 The story is well told in a report prepared by AIP Foundation for The Atlantic Philanthropies. “Developing an integrated campaign to address child helmet use in Viet Nam: a case study,” Ha Noi, April 2014.
This innovative project included many “firsts”:
- AIP Foundation, NTSC, and MoET had to learn how to be flexible and equitable partners;
- Initially reluctant Departments of Police in large cities became crucial and motivated partners with schools in a child helmet use campaign;
- An evidence-based approach to design and implementation of a helmet campaign was initiated, with careful baseline surveys done;
- A new Centers for Disease Control (CDC) digital film method of helmet use observation was used;
- Every component was piloted, evaluated and readjusted before expansion;
- Primary school students and families became a serious focus of activities within a school-based helmet and road traffic safety education and enforcement program;
- Public/private partnerships gained importance; and
- None of the components could stand alone; integration was key.

“The fluidity and flexibility of the campaign is widely believed among partners to be one of the key reasons behind its success”

- Nguyen Dieu Nuong, Director of Programs, AIP Foundation

The partners agreed that the partnership development and capacity building component was critical to the success of the project. It enabled AIP Foundation to build a strong structure and contributed to both the campaign’s long-term sustainability and expansion in Viet Nam.

Although the project fell short of meeting its goal of increasing child helmet use to 80%, the target stakeholder districts and schools in each city did increase the rates of helmet use in primary school aged children. By the end of the project in March 2014, the total three city average rate of child helmet use had doubled from a baseline of 18 percent to 36 percent.

Stakeholders and observers considered the campaign piloted in the three cities successful. Three new rural provinces had been added at the end of 2013 and they completed one round of all activities before the end of the grant period. A sure sign of success, buy-in was strong with many private and public donor partners committed to continuing the work after Atlantic’s support ended. Despite many ups and downs, including struggles to communicate clearly and well, all partners and collaborators were on board to expand the campaign. Districts and provinces not part of the project had already clamored to be included, to receive communication materials and to use the educational and enforcement models.

Most importantly, the NTSC and other government agencies then took the reins: “Isn’t this a great success story, how the ’AP campaign 5 provided evidence that pushed the government to lead its own road safety campaign?” asked Mirjam Sidik, the CEO of AIP Foundation.

Building on what The Atlantic Philanthropies funding of AIP Foundation had accomplished, the NTSC confidently took charge of the development of the National Child Helmet Action Plan (NCHAP). The NTSC asked AIP Foundation to coordinate 1) the plan development and implementation and 2) the

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5 In a February 22, 2017 email to Nina McCoy, SSRC, Mirjam explained that although there were many other donors involved, Atlantic supplied the largest part of the funding and the technical advice and cheerleading. Other AIP Foundation staff also expressed deep appreciation for the always available technical support during this project, crediting Dr. Duong Hoang Quyen with the courage and persistence to push them hard to work toward partnership and project sustainability.
stakeholders. Within six months of the end of the final Atlantic grant to AIP Foundation, the Global Road Safety Partnership Grant Programme, with Bloomberg Philanthropies funding, supported them for another 17 months of technical assistance and campaign work that then expanded to a total of 15 target provinces. The National Child Helmet Action Plan was signed the end of December 2014, with components mirroring the Head Safe, Helmet On model. A January 13, 2015 press conference and launch was organized by AIP Foundation. This event brought new collaborators and journalists together with seasoned stakeholders and helped to strengthen the NCHAP.

Throughout the NCHAP campaign in 2014 and 2016 the proven combination of public awareness and media campaigns, school-based education and policies, enhanced patrolling and enforcement, and partnership and capacity building led to significantly increased rates of primary school children wearing helmets in all but two new provinces. In April 2015, during and after a police and school enhanced enforcement week across Ha Noi, Da Nang, and HCMC, child helmet use observations showed a huge increase across cities with an average use rate of 69.3%, up from 36.1% in March 2014. Da Nang was the first province to reach close to the magic goal of 80% with a child helmet use rate of 75.6%, up from 37.1%; Ha Noi surprised with a rate of 70.7%, up from 23.2%; and HCMC’s rate at 66.2% was up from 48.3%.

In December 2015 the twelve newest targeted provinces in the campaign showed a cross-provincial average child helmet use increase up to 51.3% from April’s 34.9%. Eleven provinces increased their rates and Gia Lai reached 79.5%, nearly the 80% goal. The bad news in individual provincial rates was that Tra Vinh’s decreased by 9.7%. The poorest rate was in Ha Tinh with only 14.4% primary school child helmet use observed. AIP Foundation staff members do not know what happened in Tra Vinh and were puzzled about Ha Tinh, too. There had been serious focus on Ha Tinh, with tremendous collaboration and commitment from all stakeholders and abounding energy put into the program. There are lessons to be learned in taking another look at this effort. By the last measurement of helmet use in nine of these provinces in May 2016, Tra Vinh was the only one to show an increase. Even the leader, Gia Lai, decreased by 14% to 65.5%. The new cross-provincial average for child helmet use was 46.9%.

Ha Noi, Da Nang, and HCMC’s average child helmet use rate across the three cities fell nearly 20% to 49.8% in December 2015. By May 2016 these targeted cities’ rates rose again to an average observed helmet use rate of 56.9%. This compares very favorably to the February 2011 baseline cross-cities average child helmet use rate of 18%.

AIP Foundation’s GRSP funding ended in December 2015 but they continued to provide NCHAP capacity building workshops and campaign support until October 2016, when their funding from various other donors ended. Today, AIP Foundation plays a supporting role in the NCHAP, aligning some school-based programs with NCHAP activities and providing technical and financial assistance in all provinces. The US CDC, AIP Foundation, and the FIA Foundation are preparing a paper on the results from the 15 “AIP Foundation” provinces.

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6 Six previously Atlantic-supported cities and provinces (Ha Noi, Da Nang, HCMC, Ha Tinh, Quang Binh, and Dong Nai) and the nine new ones supported by GRSP, FIA Foundation, and other donors between 2014 and 2016: Gia Lai, Can Tho, Kon Tum, Binh Duong, Yen Bai, Quang Nam, Quang Ninh, Hai Duong, and Tra Vinh.

7 Due to a funds shortage only nine provinces were resurveyed. Hai Duong, Ha Tinh and Quang Binh were not.

8 This was an increase of 5.3%.

9 The targeted sites’ individual rates in May 2016 were Da Nang at 66.7%, Ha Noi at 35.4% and HCMC at 49%.
The long-term support from The Atlantic Philanthropies from 2000 to 2014 led to increased maturity, strength, and technical skills for AIP Foundation that enabled sustainability. They now have an excellent website, an online donor solicitation program, and a monthly newsletter.

**The Global Helmet Vaccine Initiative**

Since 2006, AIP Foundation has expanded globally under the Global Helmet Vaccine Initiative (GHVI) with country programs using customized, contextualized work plans. A Uganda project ended in 2015 and Tanzania’s locally-driven project is searching for full funding for a new helmet factory similar to the Protec factory. AIP Foundation is now active in Cambodia, China, Thailand, and Vietnam. The Protec factory thrives, exports to many other countries and provides financial support to AIP Foundation project activities. International university students study and work with AIP Foundation staff. AIP Foundation staff members attend high level UN meetings and international conferences, write articles, make presentations, and share program models and lessons learned in many cities in the world. AIP Foundation staff members have received international and local honors and AIP Foundation is recognized as an international leader in the area of Road Traffic Safety. AIP Foundation is a resource for Viet Nam, the region, and the world.

**Viet Nam still needs child helmet use programs.**

Many Vietnamese children, their parents, and teachers do not have helmets or helmet education. Motorcycles remain the primary Vietnamese family transport vehicle and are dangerous. In 2007 countrywide 21,000,000 motorcycles were in use. By January 1, 2017 there were 47,131,928. Approximately 16,800 people will die in motorcycle accidents this year, accounting for 75% of total traffic fatalities. Road traffic injuries continue to be the second most important cause of mortality in children aged 5-14. 2,000 children die each year in traffic accidents, with 78% of deaths a result of brain injuries related to motorcycle crashes. Viet Nam still needs child helmet use programs and AIP Foundation, its partners, and collaborators still deliver them.

**SSRC’s role in the dissemination of the results from “Helmet Day! Lessons Learned on Vietnam’s Road to Healthy Behavior. An SSRC Report.”**

In 2008, SSRC wrote its first paper on helmet use in Vietnam and published and disseminated it in 2010. Since then people wanting to know more about it have asked SSRC to share what we learned and to connect them to the stakeholders. Our publication was adapted as a chapter in a public health textbook at Columbia University. We connected The Center for Global Development (CGD) to AIP Foundation and other sources when CGD decided to use the Vietnamese Helmet Law story as a case study in a

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10 The World Bank, FIA Foundation, and AIP Foundation established GHVI in 2009 to accomplish universal helmet coverage in the Decade of Action for Road Safety (2011-2020). AIP Foundation replicated its helmet use program model to several countries through the GHVI. It supports Country-Level Helmet Vaccine Initiatives led by a non-governmental organization in partnership with government, corporations and researchers.


book, in which our paper is cited.\textsuperscript{14} Many US universities use this book and its interactive website. We have worked with international graduate students doing research on road traffic safety and, particularly, helmet use, participated in injury prevention conferences, and shared lessons learned with multidisciplinary groups preparing to carry out other behavior change campaigns.\textsuperscript{15}

**Addendum, 9 January 2019**

On January 2018, reporting a nationwide rate of 30-40%, the Prime Minister issued Directive number 04/CT-TTg ordering strict enforcement of helmet wearing for children age six and above nationwide, with a target rate of 80% by 2020. The directive requires the Ministry of Education and Training to require helmet wearing on both motorbikes and electric bikes by students, especially those age six and over, and requires disciplinary action for failure to comply. Parents are required by schools to sign a commitment to send their children to school wearing helmets. Thus, the measures advocated by the Asia Injury Prevention Foundation and funded by Atlantic are directed to be implemented nationwide. In August 2018, the state *Nhan Dan* (The People) online newspaper reported a nationwide rate of 20-30% from the National Traffic Safety Committee and also stated that the start of the new school year did not bring about a change in parents bringing children to school with helmets, though all parents themselves showed up wearing helmets.\textsuperscript{16} However, in December 2018, AIP Foundation reported that three new schools had joined the *Helmets for Kids* program, and that the helmet use rate had significantly increased from 23% to 96% at the new schools. All 12 participating schools developed strategies to maintain a high helmet use rate and continue to work toward making child helmet use a sustainable, lifelong practice.\textsuperscript{17} The end of the Helmet Story remains to be told, and Atlantic can look to the Asia Injury Prevention Foundation to tell it.

\textsuperscript{14} The Center for Global Development, “Millions Saved. New Cases of Proven Success in Global Health,” Amanda Glassman and Miriam Temin, Editors and Authors, in cooperation with Disease Control Priorities, 3\textsuperscript{rd} Edition. Lauren Post is the case author for “Improving Road Safety: Vietnam’s Comprehensive Helmet Law.” SSRC was an important source during the development of this case study.

\textsuperscript{15} For example: Nina McCoy, SSRC, presented at a TRAFFIC workshop on creative campaign packages that will drive behavioral change related to consumption of tigers in Viet Nam and China, November 2011.


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Main Report

In 2008 when the Social Science Research Council (SSRC) began documenting, for The Atlantic Philanthropies (Atlantic), the history of Viet Nam’s efforts to arrive at a helmet use law that would apply to all motorcycle riders, could be enforced successfully, and would reduce traffic crash injuries, we had no idea how long we would be working with this story. Now we can even say that we have helped create some of the chapters of the story during the seven years since the May 2010 SSRC publication of “Helmet Day! Lessons Learned on Vietnam’s Road to Healthy Behavior. An SSRC Report.” Many individuals and groups interested in injury prevention and road traffic safety have asked us for information and help, based on an original analysis of the story, sometimes under surprising circumstances.1

Why we are still talking about helmet use in 2017

Road traffic crash injuries continue to be one of Viet Nam’s main causes of death and disability, ranking as the second most important cause of mortality in children aged 5-14. The motorcycle is still the primary family vehicle, putting children at the same risk as adults, if they do not wear helmets.2 In 2016, motorcyclists accounted for 75 percent, or 16,800, of the estimated 22,419 annual road traffic crash fatalities. There were a total estimated 453,617 road traffic crash injuries as well.3 More than 2,000 children die each year in road traffic crashes, with 78% of deaths a result of brain injuries related to motorcycle accidents.4

Road traffic crash history. In 2007 before the Helmet Law was in place, there were 14,000 road traffic crash deaths, 2,000 of them children. Only three percent of all Vietnamese motorcycle riders wore helmets. 30,000 cases of severe brain damage and head injury, 6,000 of them children, were counted.5 By 2012 the National Traffic Safety Committee reported that 50,000 people experienced brain and head injuries, 6,700 of them children.6

Increasing numbers of motorized vehicles. In 2007, countrywide there were 21,000,000 motorcycles in use. By January 1, 2017 there were at least 47,131,928 motorcycles, close to one

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1 For more information on this please see Appendix I.
2 AIP Foundation, Progress Report #6 to The Atlantic Philanthropies, March 31, 2014, p.5.
for every two people.\textsuperscript{7} The number of motorcycles increases relentlessly\textsuperscript{8} and at least 3,033,527 cars are on the roads.\textsuperscript{9}

\textquote{“Up to nearly 90% of students driving electric motorbikes don’t wear helmets.””
- Colonel Dao Thanh Hai, Deputy Director, Ha Noi Police\textsuperscript{10}

Electric motorcycles and bicycles have become available across Viet Nam in the last four to five years although we do not have numbers for them. These vehicles are particularly dangerous as they are silent and hard to detect in traffic. Electric motorbikes are widely used by high school students,\textsuperscript{11} and riders were initially not required to wear helmets. By mid-July 2016 that policy had changed and helmet use is now required by law but often ignored by young people.\textsuperscript{12} Newspapers regularly report on the deaths of untrained students riding electric bikes and without helmets.

\textit{Primary school children at risk.} In one study in 2011 in Ha Noi, Da Nang, and Ho Chi Minh City (HCMC), 89.8\% of primary school children age 6-10 traveled to school by motorcycle; this group also had the lowest rates of helmet use of all student age groups, with an average for the three cities of 18\%\textsuperscript{13} Today despite the law that mandates helmet usage for children six years and older, compliance related to this mandate remains low across the country.\textsuperscript{14}

After the success in getting to almost 100\% adult helmet use in 2007 and maintaining between 87.6\%-90.4\% rates in Ha Noi, Da Nang, and HCMC in the period between March 2014 and May 2016\textsuperscript{15}, what has been done to meet the need for universal child helmet use?

\textbf{HELMETS BACK ON CHILDREN’S HEADS}

The Atlantic Philanthropies’ final funding to Asia Injury Prevention (AIP) Foundation supported significant and sustainable progress toward universal helmet wearing by primary school aged children. The lack of helmet use by children had left a hole in the earlier success story of adults’ embrace of helmet wearing. In addition, the new project carried out, \textit{Head Safe, Helmet On}, contributed to increasing the maturity, strength, technical skills, and sustainability of AIP Foundation, the grant recipient. We would like to tell some of the story of steps taken by Atlantic in its long-term commitment to injury prevention and road traffic safety, its relationship to AIP Foundation, and results achieved through their collaboration.

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\textsuperscript{7} Nguyen Phuong Nam, WHO, email March 13, 2017, quoted from the National Traffic Safety Committee. Viet Nam’s population is now more than 95,260,000.
\textsuperscript{8} Thought to be around 8,000 new motorcycles and 750 new cars bought each day in July 2016 according to The Vietnam Association of Motorcycle Manufacturers, in online Thanh Nien News., July 12, 2016.
\textsuperscript{9} Ibid.
\textsuperscript{10} “Police blast student bikers,” Vietnam News, July 19, 2016, p.3.
\textsuperscript{11} Grades 9-12.
\textsuperscript{12} “Police blast student bikers,” Op Cit.
\textsuperscript{13} Vu Song Ha, Trang Hung Minh and Quach Thu Trang, CCIHP, “Partnership is a learning process: Evaluation report on developing partnership in project ‘Vietnam child’s helmet campaign’,” Ha Noi, April 2014, p.13.
\textsuperscript{15} Ibid.
\end{flushright}
The Social Science Research Council wrote its first report on helmet use in Viet Nam following the implementation of a new Helmet Law in 2007. One of the issues that remained after the successful implementation of the law on Helmet Day, December 15, 2007 was serious. Although children wore helmets when the Law was enforced that day, within two weeks they were no longer wearing them. Parents believed false rumors that small children’s skulls would be damaged by helmets. They also heard another rumor, that children’s necks were too weak to hold their heads up with helmets on. Since these statements were not true, it was clear that there was a lot of unfinished business related to increasing children’s helmet use. “Most significant, it is essential to put helmets back on children’s heads,” we wrote in our 2008 report about the behavior change process that led to helmets being used by motorcycle riders in Viet Nam.16

Instead of considering the job finished after achieving near-universal adult adoption of helmet use on December 15, 2007, Atlantic recognized it still had much work to do. The issue of persistently low rates of child helmet use needed to be addressed. To do so, Atlantic chose to keep working with AIP Foundation, the Vietnamese Government, and many other helmet use and Road Traffic Safety program collaborators. An important lead had already been taken by the Helmets for Kids project17 under AIP Foundation and their Government partners: the Ministry of Transportation (MOT), the National Traffic Safety Committee (NTSC), the Ministry of Education and Training (MoET), and others. Even so, the journey to societal acceptance of universal child helmet use was going to be long and arduous.

Atlantic decided to start this new phase of “helmet work” by funding a planning process that would build on the firm grounding that Atlantic support had already given AIP Foundation. By 2009 AIP Foundation viewed their early Atlantic support as critical to three changes that led to a higher profile for road traffic crashes and their carnage in Viet Nam, namely: 1) the establishment of modified helmet standard that included AIP Foundation-designed “tropical helmets,” 2) the development of a road safety curriculum for primary schools, and 3) securing of matching funds for the construction of the world’s first non-profit helmet plant.18 It was natural for AIP Foundation to want to work with Atlantic on a longer project that mixed helmet distribution with school-based helmet use education and road safety training for primary school students, teachers, and parents. Behavior change leading to increased child helmet use was the desired result.


17 This project, with funding from corporate and other private sector sponsors and embassies, provides school children and teachers with quality helmets and road safety education. President Bill Clinton launched the first “Helmets for Kids” in 2000 when he distributed helmets at a school in HCMC. The project is carried out in Viet Nam, Thailand, and Cambodia. (From the AIP Foundation website. November 3, 2016.)

By the time SSRC published “Helmet Day!” in May 2010, AIP Foundation had already developed a proposal for, and carried out a project funded by, a seed grant from The Atlantic Philanthropies. The proposal was to: “1) develop a five-year business plan and build internal capacity to replicate the successful Vietnamese model of Helmets for Kids in Thailand and Cambodia, and 2) identify major components and costs to develop and expand school-based injury prevention programs in Viet Nam.”19

The first component, The Regional Road Safety Demonstration (RRSD) Project,20 required the development of a “sound and viable business plan” before any donor approached would agree to consider it. The second component needed a detailed plan for school-based road traffic safety injury prevention programs in Viet Nam to back up any request for donor funding.

Atlantic approved the “Capacity Building Seed Grant to Generate a Five-Year Business Plan & Improve School-based Road Traffic Safety Injury Prevention Program in Vietnam” in 2009.21 It allowed AIP Foundation to focus on strategic development and make thoughtful plans for the work that remained to be done in Viet Nam and new work anticipated in Thailand and Cambodia. Critical to the work ahead was the AIP Foundation’s experience with and lessons learned from the “Helmets for Kids” program in Viet Nam. In addition, they reviewed existing projects on road safety funded by the donor community.

AIP Foundation’s pioneering work on helmet use and other traffic safety programming in Viet Nam had contributed heavily to the enormous success of the introduction and implementation of the 2007 helmet use law. Atlantic trusted them to use the six months of planning time well and bring continuing innovation to a business plan that would support the eventual implementation of work in new countries. Atlantic also agreed that there was much work remaining to be done in Viet Nam in order to assure helmet use coverage by adolescents, youth, and children. They saw a need for safety skills development through a new comprehensive education program.

The business plan development grant included six months of funding for “workshops, meetings and extensive consultations with transport, health, education authorities, related traffic law enforcement sectors and the donor community within and outside the country and the region.”22 These activities provided a gapless continuation of work that was already being done. They also strengthened connections between AIP Foundation and the partners essential to the work of developing the next long-term project related to child helmet usage. The planning period introduced funding that helped AIP Foundation explore expansion of their helmet work into neighboring countries and globally for the first time.23

19 Ibid.
20 This was projected at $52 million dollars for five years.
21 The US $85,000 grant was executed from April 15 through October 31, 2009.
23 Betty Cox, Julia Bakutis, Mirjam Sidik, and Greig Craft, “Final Report Capacity Building Seed Grant to Generate a Five Year Business Plan & Improve School-based Road Traffic Safety Injury Prevention Programs in Viet Nam,” The Atlantic Philanthropies Ltd Grant # 17419 Asia Injury Prevention
The activities of this grant resulted in an intensive schedule and much work accomplished. Some examples of accomplishments achieved as documented in the project’s Final Report\textsuperscript{24} include:

**IN VIETNAM,** the project: 1) completed the design development and implementation of the AIP Foundation website; 2) secured funding\textsuperscript{25} for pedestrian safety materials development and use in two pilot schools; 3) identified four more provinces in which to carry out *Helmets for Kids;* 4) carried out site visits that clarified needs and challenges in eight Vietnamese provinces, providing insight into national needs; 5) identified a monitoring and evaluation partner: Mekong Economics, Ltd; 6) with UNICEF and WHO organized an essential Helmet Consultation Workshop in May 2009; 7) carried out a significant National Stakeholder Meeting on Childhood Road Traffic Safety;\textsuperscript{26} 8) implemented a Team Building Weekend for AIP Foundation staff participating in workshops on office dynamics, presentation skills, and communication skills; 9) completed a draft of an e-learning curriculum for primary school students; 10) created an enhanced Teacher Training curriculum; 11) completed a Helmet Wearing Public Awareness Campaign and initiated an Efficacy Study by Mekong Economics Ltd (MKE); and 12) began a third public awareness campaign targeting child helmet use and helmet quality standards.

**REGIONAL** work included: 1) productive trips to Cambodia and Laos to build relationships and do needs assessments resulting in understanding that Lao PDR would be a better expansion country than Thailand; 2) submission of a regional expansion proposal to the Lao PDR Ministry of Foreign Affairs for an operating license; 3) drafting a regional business plan; and 4) the initiation of the Safety Products and Equipment Company (SPEC) business analyses and preliminary plans for factory construction in Thailand, Cambodia, and/or Laos.

**GLOBALLY** the project: 1) was involved in organizing a trip for Vietnamese officials to visit the US for capacity building; 2) made presentations at major international conferences in Rome, Brussels, Istanbul, Shanghai, and Bangkok; 3) received requests from international partners to share the Vietnam model with organizations in Uganda, Senegal, Cuba, Oman, and others; and 4) received a preliminary funding commitment from the FIA Foundation and World Bank Global Road Safety Facility to support AIP Foundation’s international expansion plan: *The Global Helmet Vaccine Initiative (GHVI).*
CHALLENGES that affected progress and plan for the next project; and POSITIVE OUTCOMES

Challenges: The work carried out under the Atlantic grant encountered a number of challenges, with some of the responses quite consequential. The challenges outlined below related to timing, lack of capacity, and revised priorities after completion of mid-period feasibility assessments. Overall progress was affected by the loss of three AIP Foundation project and management staff members.

Challenges related to the Viet Nam program included field visits to eight potential sites for national expansion, which were slowed down by time and staffing constraints. Some were completed by phone. Data collection for preliminary analysis of all provinces took 40% more time than expected. School visits were months behind; the national program development was delayed and only completed half way through the school year in 2010.

In the Regional program challenges were similar in all countries related to site visits, assessments, and final business plans for the safety programs and helmet factories. The initial site visits to Thailand, Cambodia, and Laos were premature; the countries were not ready for full discussions so second visits were postponed beyond the life of the grant. The visits exposed the need for flexibility and adaptability in introducing nationwide child injury prevention and road safety programs, with variety in culture and context making important differences. The entire concept of the Regional Helmet Factories’ Business Plan was postponed when further research was needed. Timelines for completion of planned grant work proved unrealistic. The cutback in regional travel resulted in more time for increased data collection, improvement of program and organizational development, and making time for fund raising.

Positive results: In the Viet Nam program there were two notable positive results. Encouraging site visits revealed relatively uniform situations across the country, making planning easier than it might have been. Money was saved so the staff members were able to develop new materials used in strengthening the curriculum and training program. Related to the Regional program, the first visits to Thailand, Cambodia, and Laos were timely and helped establish relationships with government and non-government organizations. Mid-grant reevaluations confirmed the need for comprehensive initiatives’ frameworks for the development plans that would evolve.

LESSONS LEARNED

The grant from Atlantic allowed AIP Foundation to internally evaluate its programs and look outward for expansion.

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27 Betty Cox, Julia Bakutis, Mirjam Sidi, and Greig Craft, Op Cit, p.3.
28 Betty Cox, Julia Bakutis, Mirjam Sidik, and Greig Craft, Op Cit, p. 5.
29 This plan has never come to fruition. There are no factories in these three countries now.
30 Betty Cox, Julia Bakutis, Mirjam Sidik, and Greig Craft, Op Cit, p. 5-6.
31 Ibid, p.5.
32 Ibid.
• **AIP Foundation staff identified three important lessons learned:** 1) “The importance of improved research, information collection and management; 2) The necessity of flexibility in strategic planning; and 3) The significance of multilateral partnerships.”

• **Critical evaluation of existing programs allowed identification of important areas needing to be strengthened.** These areas included: improved methodology, deepened teacher training courses, the inclusion of pedestrian safety in road safety curriculum, and the diversification of curriculum through collaboration with Intel and adding e-learning.

• **Adaptability is essential to help avoid risk.** It allowed a strategic change of the Helmet Vaccine Initiative Indochina Expansion (HVI-IE) business plan away from Thailand to Laos.

• **Focusing on Laos for the HVI-IE made more sense than focusing on Thailand.** AIP Foundation thought that the needs assessment and relationship building would likely be more successful as foundation for this large project in Laos than it would be in Thailand.

• **Research for the business plan for new helmet factories in Thailand, Cambodia, and/or Laos showed the need to extend the timeline for their establishment to 2010.**

**Bringing collaboration back into focus and strengthening its power**

A major event during the grant period, the “Stakeholder Meeting for Childhood Traffic Safety in Viet Nam” was hosted by AIP Foundation and the National Traffic Safety Committee (NTSC), in cooperation with the Ministry of Education and Training (MoET), October 13, 2009. The objectives of the meeting directly related to AIP Foundation’s forward planning: 1) to share the Foundation’s three to five year agenda of current and new activities related to childhood road safety; 2) to gather input from involved stakeholders; 3) to hear from other organizations about their future plans; and 4) to develop mechanisms for improving multilateral collaboration. This meeting created a renewed and open forum of organizations engaged in this work, a strengthened network of national and international groups, and renewed communication between AIP Foundation and its partners. It pointed a way to continued collaboration.

Organizations reported on their continuing work on child road traffic safety, including helmet use. Reporting was led by AIP Foundation in an introduction of a three-year plan (2009-2012) for continuing its work in Viet Nam in three main areas: 1) **Helmets for Kids;** 2) road traffic safety education, including environment modification, an e-learning curriculum, and a pedestrian safety campaign, **Walk this Way,** with Safe Kids Worldwide; and 3) nationwide public awareness education through its third campaign for child helmet use. They believed it essential to develop these projects in order to capitalize on the new helmet wearing legislation that included mandatory helmet use by school children. They thought that these expanded projects might help them achieve measurable success nationwide.

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33 Ibid. p.6.
34 Serious political instability and intra-agency conflicts in Thailand posed unacceptable risks to a large project. AIP Foundation chose to continue in Thailand only through **Helmets for Kids** and public awareness campaigns.
37 Ibid.
Other groups that reported on programming and joined in vigorous discussions on the needs for future programming included: 1) WHO and the MOH, and 2) the George Institute for International Health. Another Atlantic grantee, The Center for Injury Policy and Prevention Research (CIPPR) of the Hanoi School of Public Health, AIP Foundation, and the George Institute of Health reported on planning to conduct a randomized trial on child helmet use, as well as carrying out training and other consultancies. Important AIP Foundation relationships with the George Institute of Health, Sydney and Handicap International Belgium, and other organizations were strengthened after the meeting. 38 39

This meeting underpinned the redevelopment of a coalition of stakeholders who would eventually move forward with a committed plan for putting helmets on children’s heads over the next four years--

**Another Step for AIP Foundation: A final grant from The Atlantic Philanthropies –putting helmets on children’s heads (2010-2014)**

By 2010 the challenge of low rates of child helmet use remained. The statistics on motorcycles, road injuries, vehicular accidents and child helmet use still posed a huge problem for society.

“Nearly 10 million vehicles were added to Vietnam’s roads between 2007 and 2010. Motorcycles made up 95 percent of all registered vehicles in Vietnam.

Road traffic injury had become a major public health issue in Vietnam, with over 11,000 fatalities in 2010. Sixty percent of deaths were among motorcycle users, and 78 percent of these deaths were a result of head injury.

One year after an amendment in 201040 which explicitly mandated child helmet use for children age six and older only 18 percent of children (6-10 years of age) in Hanoi, Da Nang and Ho Chi Minh City wore helmets on motorcycles.”41

- AIP Foundation report on “Vietnam’s National Child Helmet Campaign,” April 2014

Even though Atlantic had not promised any support to AIP Foundation after the 2009 planning grant, they were invited to submit a grant proposal. Atlantic expected the grant to support the design and implementation of a part of the five-year work plan developed under the planning grant.42

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38 Current programming was described by: 1) Handicap International Belgium (Dong Nai Traffic Safety Park demo); and two Atlantic supported organizations: 1) Counterpart International (Safe Fleet, Safe Communities project focused on an improved 115 Emergency Response system, general emergency response; First Aid training and improved parent education) and 2) the CIPPR of the Hanoi School of Public Health (injury related research, work with Atlantic funded The Alliance for Safe Children (TASC) and a future project: “Safe Da Nang.”)


40 Decree 34’s new schedule of fines was issued April 2, 2010 and effective May 20. A driver carrying a child aged six years or older who is not wearing a helmet or does not have the strap fastened is fined.


42 At that time AIP Foundation had already received five previous Atlantic grants totaling US $1,948,000.
“Head Safe, Helmet On” - A Vietnam National Child Helmet Campaign

The final proposal, requesting a 40-month grant of US $1,800,000, was approved and the project began in September 2010. This child helmet campaign grant covered the part of the AIP Foundation’s total program that related to Viet Nam’s need to improve the rate of child helmet use. One of Atlantic’s conditions to AIP Foundation was that the rest of the funding be raised from other donors. For this campaign project other donors contributed most of the remaining funding needed.  

In addition, AIP Foundation worked on an essential strategy that would lead to sustainability for the campaign. The first two years of Atlantic support provided the platform for building the strategy. The project: 1) undertook a thorough pre-campaign baseline study, and 2) spent 16 months on campaign development prior to beginning implementation. The resulting project centered on a public awareness campaign that encouraged child helmet use through education, outreach activities, advocacy, and campaign-focused events. Its goal was to achieve an 80 percent child helmet compliance rate in target areas.

Naming the problem and the target groups: a public opinion survey

The emphasis on a research-based planning process and project development was a departure for AIP Foundation; they benefited greatly from the work of consultants who 1) identified M&E indicators, 2) analyzed secondary data to establish a foundation for a public opinion survey, 3) carried out the in-depth baseline public opinion survey on child helmet use, and 4) later assessed the impact of Phase I of the communication campaign. After completing tasks one and two, the consultants carried out the opinion survey in January and February 2011 in randomly selected districts and primary schools in Ha Noi, Da Nang, and Ho Chi Minh City. The researchers, from the Center for Women’s Studies at Vietnam National University (VNU), determined approximately what the helmet use rates were through observation at primary, secondary (intermediate), and high schools in selected districts.

The rates determined for each level were:

- **Primary school** (grades 1-4): 8.7% in Ha Noi, 22.2% in HCMC, 27.1% in Da Nang;
- **Secondary school** (grades 5-8): 9.2% in Ha Noi, 32.3% in HCMC, 55.4% in Da Nang; and
- **High school** (grades 9-12): 32.1% in Ha Noi, 65.9% in HCMC, 57.3% in Da Nang.

This new grant brought Atlantic’s total organizational commitment to AIP Foundation’s injury prevention and child traffic safety work to: US $3,748,000. The grant began September 22, 2010 for 40 months, ending with a two-month extension from January 22 to March 31, 2014.

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43 The remaining funding needed from other donors was US $1,130,000, with non-project AIPF activities funding US $70,000. At the end of the project, a small shortfall occurred when the project was extended two months. AIP Foundation covered the additional US $13,739.

44 Hoang Thi Na Huong, Deputy Executive Director, AIP Foundation, Interview, Ha Noi, December 12, 2016.

45 In all of the reports on the baseline and evaluation related surveys over time, the researchers remind the reader that the time of year influences whether or not children are wearing helmets: winter or rainy weather tends to discourage wearing helmets. The season and the weather conditions may have influence on the results of the rate of use surveys. It is especially important because the Ha Noi baseline survey was done in the winter.

89.8 percent of primary school children age 6-10 traveled to school by motorcycle; this group also had the lowest rates of helmet use with an average across the three provinces of 18%. Ha Noi’s rate for primary school children was the lowest at 8.7%, Ho Chi Minh City’s was at 22.2%, and Da Nang’s rate the highest at 27.1%. In Ha Noi, secondary school students, grades 5-8, were also low at 9.2% but much higher rates in HCMC and Da Nang brought that grade level’s average rate up significantly. High school students’ use rates were the highest. 47 The helmet usage rates were later compared with those from repeat observations at several points throughout the project.

The second question the study answered was why helmet use rates for children 6-17 years of age 48 were so low, compared with the cross-city adult rate of around 90%. Other techniques besides observation were used: questionnaires, interviews, and focus groups with students aged 6-17, parents of school-aged children, teachers, school administrators, communication agencies’ representatives, traffic police, helmet producers, sale agents, and legal and medical experts 49. The findings helped AIP Foundation and partners determine campaign strategy, design, and targets. 50 The draft baseline report was shared with interested partners at a workshop at the NTSC. The campaign component of the project chose to target primary school students, their parents and teachers, and the schools’ communities because the survey showed that: primary school students were less likely to use helmets than older students; parents still worried about helmets injuring young children’s spines or skulls; a school’s encouraging environment can lead to more helmet use; helmets as part of the school uniform encourages use; and schools can require students to wear helmets. Parents became a key group to reach in the project since they are the only ones who can require compliance outside of school. 51

A correction needed

More helmet observations were needed after the end of the first survey because the NTSC added additional project sites which had not yet been surveyed. This became a learning point as the project staff and partners were being trained in using research to support evidence-based program development. AIP Foundation carried out the additional observations. 52

47 Center for Women’s Studies, Vietnam National University, Op Cit. p.12.
48 Decree 34 mandates helmet use by this age group.
49 Center for Women’s Studies, Vietnam National University, Op Cit. p. 12.
51 Ibid.
52 After the baseline study was completed and report written using data from the survey’s randomly selected target districts in Ha Noi, Ho Chi Minh City, and Da Nang expected to be the long-term targets of the project, the NTSC made a disruptive decision. Not yet convinced of the value or necessity of using evidence-based content, as Atlantic funding required, the NTSC chose additional specific target sites for Phase I of the campaign. These had not been surveyed. As a result, more helmet observations were needed so the data could be related to the specific geographical chosen by the NTSC. AIP Foundation had to do those additional observations. The positive point is that they learned that before Phase II any expansion sites needed to be selected before the baseline research was completed so that this situation would not arise again.
Problems with helmet enforcement and resolution

The baseline study additionally showed that many adults wore helmets primarily to avoid a fine and that helped maintain the 90%+ helmet wearing rate in three large cities. Parents were not convinced about the value of child helmet use. Even though fines could be levied against them if their children did not wear helmets, they did not believe it necessary. While police at all levels do enforce and fine errant adults, the survey showed that they did not enforce the new mandatory child helmet use regulations; police noted a lack of human resources and funding as the main reasons but also their own hesitance because the new child helmet law was unpopular with parents. Police did not want to stress out parents or children with pullovers and fines when they were driving to school.

A significant influence on the project’s approach: Based on the success of enforcement at the time of adult helmet use rollout and continuing over time, AIP Foundation and their project partners believed that a combination of police training and enforcement in collaboration with in-school enforcement and protocols would be essential.

Committed partners and stakeholders

The perhaps most influential component of the integrated campaign was partnership development and capacity building. During the campaign development phase long-term sustainability became a high priority for AIP Foundation and other partner organizations. . . . it was critical that the campaign components could be continued in the long term.

- AIP Foundation’s case study on Vietnam’s National Child Helmet Campaign, April 2014

With this in mind, we find that AIP Foundation first worked closely with the many partners involved in the original Injury Working Group at the time of the helmet law implementation and in the years since: NTSC, MoT, MoET, C67 (the police), WHO, the Global Road Safety Partnership (GRSP), and The International Federation of Red Cross and Red Crescent Societies (IFRC). With the guidance of a researcher from the Ha Noi School of Public Health, AIP Foundation identified other stakeholders who would bring value added to the development of the campaign, some of whom would become an advisory committee. Unfortunately this researcher’s study did not make adequate suggestions as to how to use the people identified so there was work left to be done before the advisory committee could be named. It was hoped that these groups would also bring funding to the table and over time they did. The fundraising effort began immediately.

A crucial partner was the WHO, which used US $200,000 of its own Atlantic funding to assist the traffic police helmet enforcement component in the campaign districts.

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Ibid.

Vu Song Ha, Trang Hung Minh and Quach Thu Trang, CCIHP, “Partnership is a learning process: Evaluation report on developing partnership in project “Vietnam child’s helmet campaign,” Ha Noi, April 2014, p.6.

Mirjam Sidik, Executive Director, AIP Foundation, Interview, March 23, 2012.
workshops for provincial and national government agencies on how to encourage child helmet use were facilitated by the GRSP and funded by Bloomberg Philanthropies.

The leadership council, which oversaw all program components, consisted of: the NTSC, AIP Foundation, MoET, and C67 (the police). The WHO was responsible for implementation of the traffic police enforcement activities. The first stakeholder workshop to engage multi-sector partners committed to child helmet use was held in March 2011, the beginning of the campaign development period. Ogilvy agreed to work with AIP Foundation pro bono on the behavior change campaign. By the end of the last phase of the campaign the integrated group of stakeholders included people from local, provincial, and national level Vietnamese government, more international organizations, non-governmental organizations (NGOs), research institutions, and many private sector partners.57 58

Timeline before the national child helmet use campaign:

September 2010-March 2011:   The pre-campaign baseline study
March 2011-June 2012:   Campaign development

These baseline data gathering and campaign design periods were followed by the implementation of three integrated components during three phases of activities. Using the data collected during the baseline survey and other sources, AIP Foundation and its partners were better able to understand why the child helmet use law was not popular with parents. They learned about why children were not using helmets, and working in collaboration project partners could customize the contents of the total child helmet campaign to address the obstacles.

The three components of activities and the management of entire total campaign:

- **A comprehensive public awareness campaign** with three different types of communication campaign: The 1) information campaign; 2) agency campaign, and 3) the main one, a behavior change campaign.
- **Enhanced police and school enforcement** of the child helmet law combined.
- **Partnership and capacity building for partners and collaborators** with the hope of strengthening the long-term sustainability of the work.

The three phases of activities:

- Phase I June 2012-November 2012
- Phase II December 2012-May 2013
- Phase III September 2013-April 2014

58 Additional contributors included: provincial Traffic Safety Committees (Ha Noi, Da Nang and HCMC); provincial Departments of Education and Training (Ha Noi, Da Nang and HCMC); provincial Traffic Police Departments (C67 Ha Noi, Da Nang and HCMC); FIA Foundation; UNICEF; Vietnam Certification Centre (QUARCERT); Cho Ray Hospital; Center for Creative Initiatives in Health and Population (CCHHP); Abbott Laboratories; Australian Road Research Board (ARRB); Big C, Blah Blah Films; Johnson & Johnson; Long Huei; Michelin; Protec; Sealed Air; Sophie Paris; Unilever; and the United Postal Service Foundation (UPS).
The three components ran concurrently across the three phases of the campaign from June 2012 to April 2014, in Ha Noi, Da Nang, and Ho Chi Minh City, resulting in an integrated campaign with more power than previous campaigns might have had. In 2013, many pieces of the integrated campaign were also replicated in three more provinces: Ha Tinh, Quang Binh, and Dong Nai.

Evaluations

Learning from prior experience, serious evaluation was planned into the project, including both focused and comprehensive evaluations. The Center for Women’s Studies at VNU carried out the collection of Phase I data and before mid-2012 compiled an evaluation report related to the first districts involved in the project.

In September 2012, an additional baseline survey in six new districts participating in Ha Noi, Da Nang, and HCMC was completed by VNU, but a new evaluator from the Center for Creative Initiatives in Health and Population (CCIHP) was hired for further evaluation activities. The post-Phase II intervention survey was done by CCIHP. It focused on helmet observations as an indicator of behavior change. Their evaluation report was completed in May 2013 and reviewed positively. CCIHP also carried out the April 2014 post-Phase 3 evaluations of: 1) the effectiveness of the communication and education campaign, 2) the helmet observations to measure change in the level of helmet use among primary students in target districts in the three main project cities, and 3) the strategic partnerships and capacity building. The results of each Phase’s evaluation were applied by the project in the planning of the work of the next Phase.

Qualitative research collaboration

AIP Foundation, in collaboration with the University of Wisconsin (UW), also carried out an additional research project in 2012 after obtaining international research board (IRB) approvals and developing guidelines and training. A student researcher from UW did a qualitative assessment on road safety beliefs, attitudes, and behaviors of children, parents, and families affected by road traffic injury. AIP Foundation helped her contact HCMC hospitals after which she interviewed people from a list of victims’ families. A documentary film, grounded in the interview results, was produced, communicating the victims’ parents’ safety messages for television broadcast.

A snag or two: partnership building takes time and patience.

The period of campaign development was slowed down by several realities: AIP Foundation and the NTSC having to learn to live a “partnership” approach, a false start on the public awareness campaign development, and an overall slowdown on the official approval of the full Phase I

60 AIP Foundation, Progress Report #5 to The Atlantic Philanthropies, November 31, 2011, p.7.
63 Ibid.
campaign activity plan. The slowdowns put the campaign development work four months behind at one point. Catching up was not easy but by the end of Phase I, the work schedule was on track.

A partnership approach

Atlantic encouraged a partnership approach with an eye to long-term sustainability that would depend on many parties working together on the expansion of the campaign model. As was the case with the concept of using evidence-based campaign content, the partnership approach was new to both AIP Foundation and the NTSC. There were resulting difficulties at the beginning of the project as AIP Foundation worked on a functioning “partnership” approach to designing and implementing the campaign. Through the first year and a half the NTSC did not completely accept this approach, which slowed down the progress of the campaign. Greig Craft acknowledged that by March 2012 they had not moved forward much in the previous 14 months.

Public awareness campaign slowed down

Another problem arose when it was not possible to develop the public awareness campaign quickly. Partnership required many steps of planning, discussion, and approval that slowed down the campaign development process a lot. AIP Foundation was unused to this. In 2007 they had worked on a campaign with Ogilvy and Mather that was designed and implemented outside a “partnership model” vis-a-vis government partners. They again chose Ogilvy (Viet Nam) to provide pro bono communications services. Ogilvy developed a concept paper for a behavior change campaign focused on targeting parents. Their concept was rejected by the NTSC in June 2011 and it was September before an alternative storyboard was developed and a new Vietnamese creative agency selected. This was a main reason the campaign was delayed for more than four months.

The upside was that the resulting project television commercial (TVC) “When I grow up” was universally accepted by project stakeholders and distributed to all 63 Traffic Safety Committees for television use. Helios, a media monitoring agency, agreed to keep track of the nationwide airing of this TVC.

Late official approval

An additional major slowdown occurred when the full 3-step Phase I campaign activity plan was not officially approved by stakeholders before October 2011, four months late. Implementation

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64 Greig Craft, President, AIP Foundation, Interview, Ha Noi, March 23, 2012
65 Nguyen Dieu Nuong, Program Director, AIP Foundation, Interview, May 25, 2015.
66 Greig Craft, Interview, Op Cit,
67 AIP Foundation, Progress Report #4 Op Cit, p.5.
worked well in November; the rest of the roll-out of the information and agency\textsuperscript{68} campaign components were completed as scheduled by mid-December.\textsuperscript{69}

Capacity building of partners and collaborators had to be undertaken step-by-step and was highly time consuming.\textsuperscript{70} However, by the end of Phase I the project was running smoothly.

**The “pilot” approach**

AIP Foundation and partners carried out monitoring, evaluation, and research during each of the three phases of the integrated campaign. After applying the results of the baseline study to the draft design for the campaign a pilot was conducted before being used in all targeted provinces and districts during the next two phases. This helped to customize and strengthen the total campaign as the right fit for Viet Nam’s road safety environment.\textsuperscript{71}

> “The fluidity and flexibility of the campaign is widely believed among partners to be one of the key reasons behind its success.”
> - Nuong Nguyen, Director of Programs, AIP Foundation\textsuperscript{72}

**Implementing the three main components together**

Each of the components was first piloted separately. As they were rolled out in the total campaign, the work was integrated for a stronger effect. Integrating the previously reticent national police force and the motivated participating school systems brought synergy to their messages as they worked well together. A large and informed network of partners and collaborators underpinned the long-term sustainability of the work. Stakeholders came to know each other, regardless of the primary component with which they worked. They became a large team where the components’ individuals and groups worked in complementary ways and supported each other.

**The public awareness campaign (Component 1)**

In developing the public awareness campaign (PAC), MoET, the NTSC, and the Department of Police joined AIP Foundation in identifying, approving, and addressing five common “myths” on why children do not wear helmets:

1. *Road crashes don’t happen on short trips, so it’s unnecessary to put a helmet on my child;*
2. *Helmets for children are too expensive and I don’t know if they are of high quality;*

\textsuperscript{68} “Agency” refers to those “agents” or the people who will be carrying out the work of child helmet use and assuring that it moves forward and that progress is made: primarily parents and teachers but many other groups in the community as well, including the private sector. The purpose of these workshops was to assure all such people have accurate information and gain motivation.

\textsuperscript{69} AIP Foundation, Progress Report #2 to The Atlantic Philanthropies, November 31, 2011, p. 1.

\textsuperscript{70} Nguyen Dieu Nuong, Interview, Op Cit.

\textsuperscript{71} AIP Foundation, “Developing an integrated campaign to address child helmet use in Vietnam: a case study” Op Cit., p.9

\textsuperscript{72} Ibid.
3. It takes too long to put a helmet on my head;
4. I am an excellent driver, so I will not have an accident; and
5. Helmets are too heavy and will hurt my child’s head and neck.\(^3\)

The success of the PAC was judged by: campaign exposure, resulting knowledge change, attitude change, and behavior change. The project measured recall of key messages, the increase in awareness among parents and adult supervisors about the mandatory child helmet use law, the perceived value of child helmets, and the actual wearing of child helmets through direct observation. All measurements helped project implementers adjust the PAC throughout the campaign.\(^4\)

Communication activities promoting helmet use included: direct communication to the target group\(^5\) and communication through the mass media and digital media.\(^6\) In addition, direct incentives were provided to students, such as free helmets and helmet discount vouchers for quality helmets.\(^7\) One of the newest kinds of outreach was through community-wide “family days” where parents, children and other family members gathered in public areas to learn about helmet use through fun activities. Each of these events drew between 1,500 and 3,000 people.

**New districts and new child helmet use baselines**

The first phase of the PAC began in November 2011 in Ha Noi, Da Nang, and Ho Chi Minh City. In the second phase this work continued in these cities but added six new districts, two in each city. Before the PAC began in these new districts a baseline survey was conducted in September 2012 measuring school children’s helmet use.

**Evaluation of the Public Awareness Campaign**

The excellent final evaluation of the PAC, carried out by the Center for Creative Initiatives in Health and Population (CCHIP) in 2014, concluded that the results of the PAC were “positive and encouraging.”\(^8\) The findings addressed four key questions: 1) the level of exposure to the communication products, 2) changes in knowledge, 3) changes in attitudes, and 4) changes in reported behavior. Information gathered from primary school students, their parents, and teachers through in-depth interviews and focus group discussions confirmed that the intensive campaign had made a huge difference in the targeted districts. The respondents in the study reported high awareness of the communication campaign and its products, increased motivation to assure that children used helmets, and commitment to continued use. The evaluators also noted that reported helmet use always measured higher than that measured by observed helmet use data. They

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\(^3\) Ibid, p.12
\(^4\) Ibid. p 11
\(^5\) These activities included: education materials for primary students and parents, interactive informational sessions at schools, letters to parents requesting commitment to consistent helmet use, and reminders about helmet use through audio broadcasts at the school gate.
\(^6\) These activities included: large outdoor billboards in each city, a variety of local and national television shows, press conferences, Facebook, Twitter, and other digital media.
\(^7\) AIP Foundation, “Developing an integrated campaign to address child helmet use in Vietnam: a case study” Op Cit., p. 11
\(^8\) See a description of some of these results on page 19 of this report, under Key Achievements.
suggested that most future focus should be on channels such as TV and posters, which would be easily accessible to the target groups. All of the results had significance for planning for expansion of the PAC work into new provinces.

**Enhanced police enforcement (Component 2)**

The success of police enforcement of adult helmet use led the child helmet use campaign partners and collaborators to plan enhanced police enforcement of the mandatory child helmet law. This key component turned out to be not very easy to implement.

At first, the traffic police departments were not at all interested in participating in the campaign in the ways that AIP Foundation and others had imagined. The Ho Chi Minh City pilot for the enforcement component was developed by AIP Foundation, working closely with the NTSC, other government departments, and the WHO. The WHO funded the provincial TSC directly, which led to enhanced police enforcement carried out well from September to December 2012 in five districts of the city. The HCMC primary school-aged child helmet use rate was only 22.2 percent at baseline and by the end of Phase I it had risen to 48.3 percent.

The police enforcement success in HCMC encouraged Da Nang and Ha Noi traffic police departments to also join this activity. In Phase II the WHO supported Ha Noi’s enhanced police enforcement out in April and May 2013 in three districts and similar enforcement in five districts in Da Nang from March to May. Ho Chi Minh City again focused on enforcement from April to May 2013. Altogether 2,500 fines were levied across the three cities. The PAC was also implemented during this time to reinforce the work of the enforcers and vice versa, in hopes of creating deeper behavior change.

**Unintended positive consequences**

Non-project districts began implementing their own enforcement efforts when they saw what was happening in the project districts. The police forces are coordinated in a way that fed this action. They were also supported by the NTSC as well as other agencies that shared strategies and what they were learning from the government network. A lesson learned was that it is useful to be ready to share with other district police departments as expansion takes place.

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80 This funding originated with The Atlantic Philanthropies as part of its Grant #15334 to the WHO. By the end of the grant in 2011, the WHO had not spent US $335,000; in reprogramming that money at the WHO’s request Atlantic requested of the WHO and approved $200,000 to support enhanced traffic police enforcement activities under AIP Foundation’s Head Safe, Helmet On project. This first money went directly to the provincial Traffic Safety Committee in HCMC in 2012 and used in a pilot enforcement activity. The rest was used in HCMC, Da Nang, and Ha Noi in 2013.
83 Ibid.
The development of partnership and capacity building (Component 3)

The component devoted to developing partnership and the capacity building carried out for stakeholders, especially the government agencies at all levels, is now seen as the most influential piece of the campaign. It is called the key to establishing long-term campaign stability and sustainability. Developing partnership is also described as very, very challenging and took far more time and patience than the partners had expected or prepared for. It also led to delays in some of the activities of the planning stages and the Phase I campaign. Many meetings and efforts to understand each partner’s needs and beliefs were necessary.

The partners soon included corporate and non-profit organizations that provided complementary services to the campaign. This expanded its impact exponentially and helped strengthen the framework that would support the sustainability of the group and the work. 84

For example, the capacity building workshops were largely supported by the GRSP with Bloomberg Foundation funding. The workshops focused on reaching provincial and national government agencies. They sought to elicit ideas about how to best design a child helmet use campaign that would effectively reach local communities. The sensitive approach to this work led to a variety of partners willingly contributing their support and skills to the total campaign. The workshops were also places to establish a network within which communities could share experiences over time. The six provinces and cities that participated in policy makers’ workshops in October 2013 eventually developed their own action plans for increasing child helmet use, an important progress marker. 85

Another sort of media workshop aimed at journalists’ understanding of the issues and importance of child helmet use and its Vietnamese context. The workshops led to participants producing eighty related in-depth feature articles within six months of the course. These workshops resulted in the establishment of a “community of practice” on child helmet use. It maintained itself through a webpage containing course materials, an online forum, and a Facebook group. 86

Another brainstorming workshop was led by UNICEF, under the auspices of the Ministry of Transport, to gather ideas about how to improve the results of public education about child helmet use. 87 This contribution at the end of 2012 excited AIP Foundation staff, who loved that it was their first collaboration in training with UNICEF. 88

The most important thing is that by the last phase of the project:

“The partnership was committed to continuing the campaign components in the three target cities, in addition to expanding to three other provinces in Viet Nam. The public awareness campaign and the police enforcement components served to bring about desired behavior change, but the partnership component

84 Ibid. p. 16
85 Ibid.
86 AIP Foundation, Progress Report #6 to The Atlantic Philanthropies, March 31, 2014, p.6,7.
88 Nguyen Dieu Nuong, Interview, Op Cit.
serves to sustain that behavior change in the long term, which was the ultimate goal of the child helmet project.”

- AIP Foundation’s case study on Vietnam’s National Child Helmet Campaign, April 2014

As AIP Foundation will tell anyone, this kind of partnership building was new to them and their learning process extensive.

**Evaluation of the Partnership component:** Between December 2013 and February 2014, researchers from the Center for Creative Initiatives in Health and Population (CCIHP) carried out an evaluation of the effectiveness of the partnership and documented lessons learned about the process used in this project. The objectives of the evaluation were:

1) To review the structure, functions, and evolution of the partnership related to its mission;  
2) To evaluate achievements, outcomes, challenges, and lessons learned about partnership relations within the project; and  
3) To provide recommendations for the continuation and strengthening of the partnership beyond the grant period.

The report examines the Vietnamese context around the project, the process of initiating the partnership, the planning process, the implementation or performance of partnership, and the achievements and outcomes of the partnership. It then addresses challenges and lessons learned, and ends with recommendations. This evaluation was much appreciated by the partners and contributed much to discussions that were important to the planning of the next stage of the campaign’s work, the next expansion of the recently completed Atlantic funded project “Head Safe, Helmet On.”

The next phase of the campaign, the planning for the National Child Helmet Action Plan, was carried out parallel to and as part of AIP Foundation’s work. This major post-Atlantic project involved AIP Foundation and the many partners of the “Head Safe, Helmet On” project. It owed its existence to the work diligently, professionally, and doggedly done by all stakeholders, no matter their role, from September 2010-March 31, 2014.

**Key achievements by March 31, 2014, at the end of the third phase of the integrated campaign:**

- As described in “Developing an integrated campaign to address child helmet use in Vietnam: a case study.”

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90 Vu Song Ha, Trang Hung Minh and Quach Thu Trang, CCIHP, Op Cit, p. 1  
91 Ibid.  
92 This name of this project changed a number of times throughout the four years of Atlantic funding and the proposal, the reports, press releases, the AIP Foundation website, and many documents use different names for the project, which might cause confusion in the mind of the reader. One of the most common names was really the slogan for the campaign “Children need helmets, too.”  
93 AIP Foundation, “Developing an integrated campaign to address child helmet use in Vietnam: a case study” Op Cit., p.18
94 percent of respondents across Ha Noi, Da Nang and Ho Chi Minh City reported having heard about or seen components of the public awareness campaign.

88 percent recalled the campaign’s key message “Children also need a helmet.

99.7 percent of all respondents knew about the regulation stating that children six and older must wear a helmet on a motorcycle, compared to 78 before the campaign.

96 percent believed that it is necessary for children to wear a helmet when on a motorcycle.

Only 10 percent of respondents believed that a helmet is actually harmful for a child, compared to 33 percent before the campaign. 94

Six provinces developed action plans to increase child helmet use in their jurisdictions.

Total child helmet use increased substantially across (three) target cities from an average of 18 percent to 38 percent (later revised to 36). 95

Multiple long-term corporate partnerships were developed to sustain financial support and continue the campaign.

All campaign partners surveyed either “highly agreed” or “agreed” that all partners understood the purpose and goals of the partnership, and that all partners were committed to the campaign.”

Data from Protec’s helmet factory supported the helmet observation survey’s post-Phase II report of significant increases in primary school child helmet use. It also showed large increases in many districts. Child helmet sales and helmet discount voucher redemptions during Phase II indicated that parents were shopping for and purchasing child helmets. 96

At the end of 2013, the campaign’s model, with many of the components replicated, was expanded to include three rural provinces: Ha Tinh, Quang Binh, and Dong Nai. 97 Then, in the post-Atlantic supported project: full replication in these provinces began in 2014 continuing through the end of December 2015. Nine additional provinces were also added by March 2015: Gia Lai, Can Tho, Kon Tum, Binh Duong, Yen Bai, Quang Ninh, Hai Duong, Quang Nam, and Tra Vinh

By March 31, 2014 the average rate of child helmet use across all three cities, Ha Noi, Da Nang, and HCMC increased to 36 %, from 18% in January-February 2011 and 31% in November 2012. This was however much lower than the 47% average hit in May 2013. Compared to the baseline rate levels, all three of the cities had greatly increased child helmet use rates by March 2014. HCMC’s rate increased the most, from 22.2 % to 48.3%; Da Nang’s rate increased from 27.1% to 37.1%; and Ha Noi’s rate increased from 8.7% to 23.2%. 98 While all of these figures are far from the 80% rate that was the goal

94 All of the above achievements, which relate to the Public Awareness Campaign were identified in the “Evaluation of the Effectiveness of the Communication Campaign” carried out by CCHIP in 2014.
95 Mirjam Sidik, Chief Executive Officer, AIP Foundation, email letter, February 22, 2017
96 AIP Foundation, Progress Report #5 to The Atlantic Philanthropies, May 31, 2014, p.3
for the “Head Safe, Helmet On” child helmet use campaign, they represented a good beginning toward higher coverage.

- The intensive engagement of the Departments of Traffic Police (C67) and their commitment to the enhanced enforcement of child helmet use was exceptional in this project.
- “Helmets for Families” built on the success of the Helmets for Kids program launched a new way to reach parents. By the end of the 2013-14 school year “Helmets for Families,” run through schools, succeeded in meeting the needs of families for more helmet use education as well as help in securing high quality helmets. During this first year, parents exchanged 4,289 sub-standards helmets for subsidized quality helmets learned in workshops why helmet standards are important. Stakeholders agreed that this innovative program should be replicated throughout Viet Nam.

AFTER THE LAST ATLANTIC GRANT ENDED March 31, 2014

After the end of the project “Head Safe, Helmet On,” the child helmet campaign continued. The successful last two years’ of campaign activities were just the beginning of something greater. Collaborators had already committed to financially supporting child helmet use into 2014 and beyond, including: Abbott Laboratories, the Australian Road Research Board (ARRB), the FIA Foundation, the GRSP, Johnson & Johnson, Protec, Sealed Air, UNICEF, and the UPS Foundation. In Phase I of the “Head Safe, Helmet On” project, these groups’ support had assured that the campaign expanded to three additional provinces in Phase II. They then agreed to further support the campaign post-Phase III, guaranteeing its sustainability after Atlantic stopped giving grants. The AIP Foundation’s government partners were eager to continue the work also.

“Isn’t this a great success story, how the “AP campaign” provided evidence that pushed the government to lead its own road safety campaign?”

- Mirjam Sidik, CEO, AIP Foundation, February 22, 2017

Building on The Atlantic Philanthropies’ funding for “Head Safe, Helmet On.” Toward a National Child Helmet Action Plan

“This was the first time we collaborated with government to create a national action plan with government bringing other stakeholders to join the campaign. We still carried out the main responsibility for the public awareness campaign, education at schools and together with the government worked on national enforcement.”

- Hoang Thi Na Huong, Deputy Executive Director, AIP Foundation, 2016

100 This project was primarily funded by The Atlantic Philanthropies and complemented by AIP Foundation’s project partners and collaborators (especially WHO, UNICEF, and the GRSP (Bloomberg Philanthropies funding)).
101 This decision was part of The Atlantic Philanthropies’ plan to dissolve the organization by 2020. It closed its Viet Nam office in 2013.
102 Mirjam Sidik, Chief Executive Officer, AIP Foundation, email letter, February 22, 2017 She also noted that she used “AP campaign” since Atlantic was the primary donor at this time; she added that other donors were important, too.
Leveraging the success of the child helmet campaign for scale-up: AIP Foundation used the final results of the “Head Safe, Helmet On” campaign to encourage the Vietnamese Government to scale-up the campaign that Atlantic had funded. AIP Foundation proposed the development of a multi-sectoral government action plan to bolster nationwide awareness of and compliance with the child helmet law.

The NTSC Vice Chairman Dr. Khuat Viet Hung and its members requested that AIP Foundation would coordinate: 1) the action plan development and implementation and 2) among stakeholders, as the NTSC did not have adequate resources and technical capacity in some necessary areas.

AIP Foundation received confirmation of a grant for “Launching the National Action Plan to Enforce the Child Helmet Law in Viet Nam.” The grant was from The Global Road Safety Partnership (GRSP) with Bloomberg Philanthropies’ funding. This grant financed AIP Foundation’s continuing work on a significant official document, the National Child Helmet Action Plan. It guaranteed that the lessons learned and the successes and adaptation of the framework for “Head Safe, Helmet On” could be applied to model replication in all of Viet Nam’s 63 provinces. Important educational materials were also shared. The flexibility built into the expansion program helped provinces adapt the campaign model to their own needs. From October 2014 this 15-month project eventually extended to 17 months, ending December 31, 2015. The grant also supported AIP Foundation in carrying out capacity building workshops for policymakers and journalists in order to enhance child helmet legislation implementation. Six provinces benefited from this work.

The partners worked toward Viet Nam’s first-ever National Child Helmet Action Plan (NCHAP). It would enforce the child helmet law in all 63 provinces. The NCHAP work was initially a response to the Third UN Global Road Safety Week “Children and Road Safety.” The work between March-December 2014 culminated in the government’s approval of the NCHAP.

Concurrent continuation of AIP Foundations’ helmet use campaign work. Taking advantage of the momentum and sustainability afforded by the completion of “Head Safe, Helmet On,” AIP Foundation and collaborators continued campaign work while developing the NCHAP. UPS Foundation supported AIP Foundation’s national public awareness campaign called “Love your child. Provide a helmet.” A communication plan

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103 Also called “Children need helmets too” in documents.
105 AIP Foundation was tasked with helping to: 1) Secure support from international organizations, local NGOs, and civil society groups to take action on low compliance with the child helmet regulation; 2) provide support to the government through technical assistance and the organization of inter-agency workshops to develop and issue a coordinated national action plan on child helmet use; 3) provide support to implement the coordinated national action plan by working together with civil society groups and government ministries and agencies...; and 4) ...organize meetings for the launch of the NAP, develop a communications strategy and media campaign to promote voluntary compliance and provide technical assistance to enforce regulations in schools leading to child helmet use enforcement day.” AIPF was also asked to assist the NTSC to organize a mid-term press conference to review the progress during the UN Road Safety Week themed “Children and Road Safety” in 2015, and a final year-end review workshop to communicate the results to the press and the public.
106 Tra Vinh, Can Tho, Binh Duong are part of the 15 provinces AIP Foundation focused on under the NCHAP. An Giang, Long An and Tay Ninh were additional provinces receiving this support for this particular skill building.
and communication materials package were developed, including a Public Service Announcement (PSA) created and approved by the NTSC in December 2014. The FIA Foundation funded AIP Foundation for two years of capacity building for traffic police and the public awareness campaign in six provinces. 

- **Throughout the autumn, AIP Foundation worked closely with the** NTSC and previous partners to prepare the NCHAP and organize the launch. They also added a new partner to the group: The Vietnam Judicial Support Association for the Poor (VIJUSAP). This organization was the only other GRSP grantee working on child helmet use. It worked closely with AIP Foundation in preparations for the NCHAP.

- **December 31, 2014. The National Child Helmet Action Plan was signed by Dr. Khuan Viet Hung, Executive Vice Chairman of the NTSC.**

2015

“This plan will lead to strengthened efforts among relevant Ministries and a wider coverage of road safety subjects. The Plan addressing pedestrian, motorcycle, bicycle and helmet safety—all focused on keeping children safe—will enhance the traffic culture in Viet Nam”

- Manu Eraly, WHO Representative, 2015.

- **The Government officially launched the National Child Helmet Action Plan.** This government-owned plan is made up of four components: 1) Public awareness and mass media campaigns, 2) School-based education and policies, 3) Enhanced patrolling and enforcement, and 4) Partnership and capacity building. These reflect the successful plan that was used in the earlier “Head Safe, Helmet On” child helmet use campaign. They also show that that project’s capacity building for government agencies and other stakeholders paid off when the authorities embraced the NCHAP.

- **In January, a major press briefing and conference at the Press Club in Ha Noi activated the public launch of the NCHAP.** 140 participants attended including 92 journalists from print, online, and television news outlets.

- **This press conference contributed to AIP Foundation agreements with the Swedish and US embassies.** They pledged to collaborate and sponsor AIP Foundation’s complementary activities in 2015.

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108 Tra Vinh, Can Tho, Gia Lai, Kon Tum, Yen Bai and Quang Ninh provinces. These are six of the 15 provinces AIP Foundation focused on related to the NCHAP.

109 Mirjam Sidik, email March 20, Op Cit.


111 Referenced as No. 419/KH-UBATQG.


113 Goodwill Ambassador Chi Trung, 23 representatives from Vietnamese government agencies (NTSC, MoET, Local TSCs, Ha Noi DoET, MOT, Fatherland Front, Women’s Union, Youth Union.), 25 representatives from international organizations (GRSP, UPS, FIA-UNICEF, WHO, Australian Embassy, Swedish Embassy, U.S. Embassy, The Netherlands Embassy, World Bank Group, AIG, Johnson & Johnson, Save the Children) and 92 reporters from print, online, and television news agencies, according to the AIPF’s Half-Year Narrative Report to the Road Safety Grants Programme March 31, 2015.

114 January 13, 2015.

• “The NCHAP is a coordinated effort to guide nationwide enforcement of the child helmet law and increase public awareness about its requirements with focus on 15 provinces.” It expanded the original AIP Foundation driven six-province child helmet campaign to nine new provinces. The NTSC used the lessons learned from the “Head Safe, Helmet On” project and decided to add new partners, including the Ministry of Communication and Information (MOCI).

Stakeholders agreed to place more emphasis on schools’ responsibilities, police capacity building and journalist workshops.

- **Implementing agencies and partners** include: the NTSC, lead agency, coordinator and monitor; MoET; the Ministry of Public Security; MOCI; the National TV Station and National Radio Station; other ministries, governmental bodies, socio-political associations (all members of the NTSC); provincial and district Traffic Safety Committees. Each has specific responsibilities and together they manage and carry out the NCHAP.

- **Partnerships** guaranteed that helmet donation, capacity building and support to target provinces, and partnerships for sustainability survive. They helped assure the success of provincial action plans, as well as of the parent NCHAP. The AIP Foundation coordinated expanding school-based helmet donation and helmet use education for at-risk schools, funded by many private sponsors including The UPS Foundation (*Safe Roads, Safe Communities Project*), Johnson & Johnson, Abbott Laboratories (*Helmets for Families*), and AIG. Technical support and endorsement came from: GRSP; the WHO, the FIA Foundation, and UNICEF. UNICEF also helped fund the NCHAP work.

- **From January to the present the Ministry of Education and Training leads monitoring and evaluation** of the school policies they developed with local education departments.

- **AIP Foundation was responsible for TV, billboards, and the social media campaign development and implementation.** In March 2015 all materials were approved and AIP Foundation produced 63 **CDs** for the NTSC, which distributed one to each province.

- **The National Directive to Schools**, which mandated the integration of a child helmet use policy for students into general school guidelines, was signed.

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116 The Swedish Embassy raised $8,000 USD from Swedish corporations for 500 child helmets and a primary school activity in HCMC.
117 Mirjam Sidik, Chief Executive Officer, AIP Foundation, email letter, February 22, 2017
118 Ibid.
121 The communication materials package included the PSA commercial, a documentary film, billboards, posters, banners, backdrops, loudspeaker airings, songs, a website, flyers hand fans, and others, on the theme of “Love your child. Provide a helmet.”
122 It is national directive No.113/KH-BGDDT, signed my Vice Minister of MoET, Mr. Nguyen Thi Nghia on March 9, 2015.
The National Enforcement Action Plan was developed by the C67/Traffic Police, with NTSC and AIP Foundation review in April. A national directive for enforcing helmet use on a designated day (No. 669/KH-CCSGT) had been signed in March. This was sent to all local traffic police departments in Viet Nam. April 10th was a designated day for national enforcement. A well-organized press conference announced the action plan. The total plan increased law enforcement efforts during a weeklong “enhanced enforcement” police program April 6-10, during which 23,464 fines were issued for drivers’ failure to assure children wore helmets. AIP Foundation coordinated observation trips for C67 and two TV stations to spend time in Ha Noi, Ha Tinh, and Yen Bai during and immediately after the enforcement week. In observations, the group found that parents in Ha Tinh124 and Yen Bai excelled in carrying helmets for their children when they picked them up from school.125

The highest rates for the three cities during the NCHAP through May 2016

- April 2015 child helmet use observations in Ha Noi, Da Nang, and HCMC showed a significant increase to a cross-city average rate of 69.3%, up from 36.1% in March 2014.126 This rise reflects a period of time described above when police departments spent extra time and energy on enforcement in the areas designated by the NCHAP. Media coverage of the enhanced enforcement time was very good. The April 2015 rates for all three provinces were much higher than in March 2014. Ha Noi’s rate 68.8% was much higher than the 23.2% in March; Da Nang’s rate reached 75.6%, up from 37.1% and HCMC’s rate at 66.2% was up from 48.4%.127 Da Nang came very close to reaching the 80% child helmet use rate that was the goal of the earlier “Head Safe, Helmet On” project. Between April 2015 and May 2016 the rates fell by varying degrees in all three cities.

- The National Plan for Children’s Road Safety was launched, and the “Children’s Declaration for Road Safety” distributed to each province in Viet Nam.
- By May action plans had been collected from 60 provinces, with three more having just received instructions on how to write one. This was considered a great accomplishment in the context of nationwide diversity.128 Ultimately all 63 produced local Child Helmet Action Plans for implementation.
- The NCHAP mid-term review workshop on May 8th attracted 230 participants, including 40 media representatives.129
- The second half of 2015 was spent planning and following up with MoET, MoT, the Public Security (PS), and NTSC.

124 Unfortunately, in Ha Tinh this did not translate into a high rate of child helmet use during helmet observations after these visits and Ha Tinh had the lowest rates for the 15 AIP Foundation focus provinces in December 2015.
128 Nguyen Dieu Nuong Interview, Op Cit.
129 Ibid.
By August, the UN launched the Post-2015 UN Sustainable Development Goals, which for the first time include key road safety targets.\textsuperscript{130} AIP Foundation had advocated for these inclusions at UN meetings.

September's National Road Safety Month was monitored by AIP Foundation under the GRSP grant and led by the International Red Cross and Red Crescent Societies. NTSC planned an enforcement week this month as the schools began their new year.\textsuperscript{131}

The School Guidelines for Helmet Use were approved for nationwide use on October 26, 2015. AIP Foundation wrote them in consultation with MoET. The guidelines mandated the integration of a child helmet policy for students and included instructions on the proper buckling of a helmet. After AIP Foundation consultation with the NTSC and MoET, MoET Deputy Prime Minister, Nguyen Thi Nghia signed the decision to promulgate the guidelines.

December 2015 child helmet use observations in Ha Noi, Da Nang, and HCMC showed a significant decrease to an average rate of 49.8%, down from 69.3% in April.\textsuperscript{132} This decrease came as a shock and AIP Foundation was very sad given that the partners and stakeholders had worked hard on the activities. They knew that this period did not have an enhanced enforcement week push like the one in April so it was not strange that people reduced vigilance about children wearing helmets. December is also a cold month in Ha Noi and children tended to need to wear winter hats and scarves and that might have been one reason for the large decrease.

Measurement of child helmet use change in twelve additional provinces under the NCHAP project\textsuperscript{133} was carried out. The twelve provinces added to the child helmet use campaign model under the NCHAP activities and supported by AIP Foundation with GRSP funding, underwent comparative measurements in April and December 2015. These showed a wide variety of April rates and all provinces experienced changes by December. Gia Lai reached a child helmet use rate of 79.5%, the highest in any of the targeted provinces at any time during the campaigns. Quang Ninh and Yen Bai’s rates were 66.5% and 66.0%. Given that these provinces were still using enhanced enforcement efforts before the December survey it was not a surprise that most of them showed significant increases in child helmet user rates. Tra Vinh was the only one that decreased. Across all twelve the average rate increase of 16.4% came from across provinces average change from 34.9% in April to 51.3% in December 2015.\textsuperscript{134}

Helmet donation expanded when the NTSC and MoT planned a new Helmet Donation Program. Many embassies and international and Vietnamese corporations became partners and collaborators. The high level of competence of the NTSC leadership inspired increased interest in this work from Vietnamese corporations. Both Vietnamese and international companies committed to multi-year agreements to provide helmets to

\textsuperscript{130} Ibid.
\textsuperscript{131} Nguyen Linh, International Partner Director, AIP Foundation, Interview, May 25, 2015.
\textsuperscript{133} The provinces were Gia Lai, Can Tho, Kon Tum, Binh Duong, Yen Bai, Quang Ninh, Hai Duong, Ha Tinh, Quang Binh, Quang Nam, Dong Nai and Tra Vinh. Ha Tinh, Quang Binh and Dong Nai began their campaigns as part of the last Atlantic funded project Head Safe, Helmet On (Children need helmets, too) in 2013. The rest joined in campaigns including capacity training work beginning in October 2013 under GRSP support.
\textsuperscript{134} Mirjam Sidik, AIP Foundation, “Summary for 12 provinces” data results matrix, March 22, 2017.
at-risk children in low income areas. Strong commitment from Public Security, the NTSC and MoET convinced AIP Foundation to focus more on this component of the work. Schools also began to help with the project. The NTSC had already donated 50,000 helmets and then helped raise funds. They also gave provinces guidance and support for capacity building, creating a strong connection between national and local levels of Traffic Safety Committees. More than 100,000 helmets reached people of all ages in 42 provinces by 2016.

- **The US Department of State and the US Embassy partnered with the AIP Foundation.** For the first time since its collaboration with AIP Foundation in 2000 when President Bill Clinton passed out the first *Helmets for Kids* helmets to school children in HCMC, the US Embassy got involved again. Celebrating the 20th Anniversary since normalization of diplomatic relations between Viet Nam and the US, AIP Foundation and the Embassy signed an MOU on collaboration. The Embassy agreed to help AIP Foundation with fund raising with private corporations in support of *Helmets for Kids* in at-risk schools.

- **“Helmets for Families”** continued, funded by Abbott Laboratories, providing helmets and awareness education to communities in Tra Vinh, HCMC, and Ha Noi. Schools received free helmet donations and 4,203 parents traded their substandard helmets for quality helmets through the project’s subsidized helmet purchase program.

- **UNICEF** recognized the Vietnamese NCHAP in a report and at the UN General Meeting in New York City this year.

- **A breakthrough for UNICEF’s relationship with AIP Foundation.** In June, for the first time, UNICEF and AIP Foundation signed an MOU supporting collaboration, advocacy and sharing and leveraging of resources. UNICEF agreed to share its work on Communication for Development Education, which it created to help further Public/Private Partnerships. AIP Foundation staff members enthusiastically joined in this collaboration with UNICEF.

2016

- **The Ministry of Communication and Information (MOCI)’s new partnership with the NCHAP resulted in journalists taking more responsibility** as reporters to create stories about the NCHAP. AIP Foundation provided capacity building to journalists, funded by GRSP. The journalists then repeatedly covered the Action Plan’s enforcement and child helmets, in the media.

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136 Nguyen Dieu Nuong, Interview, Op Cit.
138 Nguyen Dieu Nuong, Interview, Op Cit.
139 This resulted in events and helmet donations funded by the US Embassy, with SOS children’s home in September; AIG donated helmets to children and teachers in HCMC in November. Other companies joined in in 2016.
141 Nguyen Dieu Nuong, Interview, Op Cit.
142 Ibid.
The 2015 end of the year review workshop was postponed until February 24, 2016 due to NTSC’s busy schedule from October through December. This meeting of 150 participants was smaller than the mid-year review gathering. Attendees were encouraged by an increased average aggregate child helmet use rate in Ha Noi, Da Nang, and HCMC. It increased to 49.8% in December 2015 from 36.1% in March 2014. At the same time, a rate of 49.8% was nearly 20% lower than in April 2015.

It was clear that while child helmet use rates increased greatly during enhanced enforcement periods, measurements several months later showed decreases, although not below the baseline rates. The workshop ended with provincial representatives discussing challenges and lessons learned in implementation, and doing forward planning for 2016-2020. FIA Foundation funding for AIP Foundation’s implementation of capacity building for traffic police and the public awareness campaign in six provinces continued.

Results of the year review workshop focused on beginning to collect recommendations from stakeholders on what to include in the Action Plan for 2016-2020. The theme is: “Strengthening resolutions for the implementation of helmet wearing regulations for all people.” Child helmet wearing, especially, and helmet wearing overall are the focal points of activities to ensure traffic order and safety. Public Security was instructed to strengthen child helmet enforcement and sanctions and carry out child helmet use training and capacity building for traffic police. A week of enhanced enforcement was planned, followed by continuous and rigorous enforcement and fining of violators over time. MoET made plans for the first week of school to be “Traffic Safety Week,” with schools countrywide charged with implementing helmet use in the best way for each school. MOCI and all other sectors were asked to strengthen communication activities. Ministries and sectors continued close collaboration and cooperation on child helmet issues. Promotion of a helmet donation program aimed at domestic and international organizations focused on provision of standard helmets for poor children and ethnic minority women. The PTSCs needed to coordinate the involved agencies in order to apply the suggestions for action. Monitoring of child helmet use had to become a priority because the highest usage rates came when there was enhanced enforcement, often followed by extreme decreases in rates in the later months.

May 2016 child helmet use observations in Ha Noi, Da Nang, and HCMC showed a significant increase again to an average rate of 56.9% up from 49.8% in December 2015. Da Nang had the highest rate at 68%, up from 56% in December; HCMC was second highest at 49%, but that was almost exactly where it was in December (47.6%);

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143 April 2015 was an enhanced enforcement period in these cities.
144 The participants included: 20 representatives from national government, 100 representatives from the DoET, Traffic Safety Committees and traffic police from 63 provinces, and 30 media journalists. (AIP Foundation, A summary of advocacy work and results under the NCHAP, October 2014-November 2015.)
146 Ibid.
147 Nguyen Dieu Nuong, Interview, Op Cit..
and Ha Noi was the lowest at around 36%, a slight drop from the 37.1% in December.\textsuperscript{148}

The highest cross-cities rate was still in April 2015.\textsuperscript{149}

- **May 2016 child helmet use observations in nine of the 12 provinces** averaged out to 46.9% only slightly up from 46% in December 2015. Tra Vinh was the only province in this group to increase during this observation period.\textsuperscript{150} 151

- **UPS Foundation’s national PAC “Love your child. Provide a helmet.”** continued.

- **AIPF’s NCHAP capacity building workshops for traffic police and campaign support ended in October 2016.** AIP Foundation completed capacity building workshops for traffic police and public awareness campaign support in six provinces\textsuperscript{152} when FIA Foundation’s two years of donor funding ended.\textsuperscript{153} AIP Foundation continued to function within the NCHAP in a supporting role.\textsuperscript{154}

**Currently**

The National Traffic Safety Committee and its government partners steer the NCHAP, with AIP Foundation in a supporting role. In this work, AIP Foundation aligns some of its school-based programs with NCHAP and through them continues to provide some technical and financial assistance. The Foundation’s goal in its school-based helmet use program is to reach a rate of 80% of primary school children wearing helmets in target districts by the end of 2017. The US Centers for Disease Control and Prevention (CDC), AIP Foundation, and the FIA Foundation are preparing a paper on results from the 15 “AIP Foundation” provinces. AIP Foundation is collaborating with the CDC on the analysis.\textsuperscript{155}

AIP Foundation believes that the successes of the NCHAP can be credited to three realities:\textsuperscript{156}

- **Successful capacity building:** The Vietnamese government is the main force behind NCHAP activities, with AIP Foundation offering support.

- **Rigorous monitoring and evaluation:** AIP Foundation carries out monitoring and evaluation to document processes and encourage the government to continue improvement of law enforcement work.

- **Buy-in from local stakeholders:** Educators and community members are critical participants in the effort to improve child helmet use. AIP Foundation continues to contribute resources and time for training educators and other primary stakeholders to help them work independently in their communities. This results in positive change.

\textsuperscript{148} Mirjam Sidik, AIP Foundation, “*Summary for 3 cities*” data results matrix, March 22, 2017.

\textsuperscript{149} Ibid.

\textsuperscript{150} Mirjam Sidik, AIP Foundation, “*Summary for 12 provinces*” data results matrix, March 22, 2017.

\textsuperscript{151} By May there was not enough money to do helmet observations in all 12 provinces, so the bottom three provinces, Quang Binh, Hai Duong, and Ha Tinh were not surveyed.

\textsuperscript{152} Tra Vinh, Can Tho, Gia Lai, Kon Tum, Yen Bai and Quang Ninh provinces.

\textsuperscript{153} Mirjam Sidik, email letter, March 20, 2017, Op Cit.

\textsuperscript{154} Mirjam Sidik, email letter, February 22, 2017, Op Cit.

\textsuperscript{155} Ibid.

\textsuperscript{156} Greig Craft, “Partnerships for Improving Child Motorcycle Safety in Southeast Asia: Vietnam’s *National Child Helmet Action Plan, *” Op Cit
OVERALL SUSTAINABILITY for AIP Foundation and Viet Nam Child Helmet Campaign.

The results of The Atlantic Philanthropies’ grant making

The Atlantic Philanthropies’ support for a planning grant for the development of the Five-Year Business Plan and continuing improvement of the School-based Road Traffic Injury Prevention Programs in Viet Nam allowed AIP Foundation to move further toward sustainability. The grant helped this non-governmental organization build a more solid base for its future work. It provided time for the staff members to develop new skills and experiment with them. This was an enviable arrangement that more donors should make in order to help assure organizational, program, and project sustainability.

This granting decision by Atlantic was followed by another one to fund 60% of the cost of the 2010-2014 Vietnam national child helmet campaign. AIP Foundation carried it out with the help of partners, collaborators and additional donors. The two years of careful research and preparation of and for that campaign, including the constant technical assistance from Atlantic’s staff, are credited with the resulting firm base for the helmet use work. Partnership and capacity building for government partners and collaborators strengthened the national child helmet campaign.

By the time the Atlantic grant finished, AIP Foundation received a Global Road Safety Partnership grant under the Global Road Safety Programme and with support from other donors. AIP Foundation expanded its portion of the campaign to a total of 15 provinces. It also became a major player, at the request of the highly motivated NTSC leadership, in the development and adoption of the National Child Helmet Action Plan. The NCHAP supported the replication of the proven child helmet campaign to all 63 provinces. This NCHAP campaign continues and AIP Foundation does, too.

Protec Helmet Factory’s 15th Anniversary: A Contributor to AIP Foundation’s sustainability

AIP Foundation’s work began in Viet Nam in 1999 and in 2000 Helmets for Kids, the helmet donation and helmet use education part of the outreach program started. The first 200 helmets were imported from the US because no children’s motorcycle helmets were manufactured in Southeast Asia. Since that time, not only has the Viet Nam program built its own helmet factory but many of the helmets produced are exported to other countries.

15 years after opening its doors in 2001, the award winning Protec social enterprise helmet factory celebrated its continuing provision of high quality, low-cost helmets to Viet Nam, Cambodia, Thailand, and other countries. 200 people are employed, including 130 factory workers, 30 percent of whom are physically challenged. By the end of 2016 the factory had

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157 The Protec factory was endorsed by H.M. King Norodom Sihanoni of Cambodia in 2004, in 2006 it received an award for its innovative helmet design from the Vietnamese Ministry of Science and Technology, in 2008 it was by the Blue Ribbon Awards (USAID supported) for its support for physically challenged workers, in 2009 Hillary Clinton conferred a commendation under the Secretary of State’s Award for Corporate Excellence."

158 Laos, Nigeria, Uganda, and Tanzania were supplied with helmets in previous years. The Uganda Helmet Vaccine Initiative project ended in 2015 but Tanzania now has a grant to build its own factory modeled on Protec’s.
produced a total of nearly 6.5 million helmets. Many were directly supplied to the Helmets for Kids projects but others were purchased by corporations and organizations for their staff. As a social enterprise, all proceeds from helmets sold go into the program work of the AIP Foundation, providing additional stability to its injury prevention public awareness campaigns and road safety education programs. This is an invaluable backup source of funding and security for the organization.

**Donation opportunities through GlobalGiving**

On the AIP Foundation website, interested supporters find a well-designed GlobalGiving webpage “Give a Vietnamese child a helmet; save a life,” set up by AIP Foundation. It organizes appeals to anyone wishing to help fund helmet use and other road safety program activities. This global crowd-funding community supports organizations like AIP Foundation worldwide; taking advantage of this network AIP Foundation adds one more source of sustainability to its list. In addition, the website informs on how to make a check donation directly to AIP Foundation and invites readers to work with them on organizing benefit events and other fundraising activities.

**The Atlantic Philanthropies praised by AIP Foundation staff**

AIP Foundation staff members express deep appreciation for Atlantic staff support and technical assistance during the last Atlantic grant period. They credit Dr. Duong Hoang Quyen, their Atlantic grant manager, with the courage and persistence to push them hard to work toward partnership and project sustainability, even when, at the beginning, they were not convinced either was going to be possible. Her door was always open to the staff members and she played an important role in moving them along toward acceptance of these new concepts. The Atlantic feedback, trouble shooting, and recommendations for improvement helped AIP Foundation toward the goal of the last grant: to assure the competence and independence of the government leaders as they built and managed the future child helmet use campaigns.

AIP Foundation staff eventually recognized how much they, too, changed during the course of the “Head Safe, Helmet On” child helmet use campaign. They learned to be real partners, improved their own professionalism, and found the resources they needed to continue the work. AIP Foundation staff admits it is harder work without Atlantic; they miss the long-term funding and technical assistance that the Atlantic grants contributed. At the same time, AIP Foundation staff members are also proud of their accomplishments and new confidence and remain committed to universal child helmet use, no matter how long it takes to achieve it.

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160 Ibid.
161 Additional information about the Global Helmet Vaccine Initiative can be found AIP Foundations Annual Reports, Monthly Newsletters and its website.
162 Hoang Thi Na Huong, Interview, December 12, 2017, Op Cit.
LESSONS LEARNED from the Vietnam National Child Helmet Campaign

This paper has already discussed many of the successes and challenges of the child helmet work carried out from 2009-2017. Below are some of the lessons learned as the many phases of the work were carried out.

• **Partnership between AIP Foundation and government agencies worked.** The partnership approach required of AIP Foundation by Atlantic was a critical component of the building of the campaign. It paid off as the campaign expanded to twelve new provinces for a total of 15 by 2015. The larger National Child Helmet Action Plan led by the NTSC engaged all 63 provinces, replicating the *Head Safe, Helmet On* project model as context permitted.

• **Expect the unexpected.** For example: expanded and essential partnership activities led to a slowdown in getting to the first phase of the campaign, affecting scheduling and completion of activities. With hard-won collaboration between the partners and local participants the project met its objectives without losing any of the program components.

• **Partnership pays off but it can also be demanding in time and personnel.** AIP Foundation and its government partners, especially the NTSC, MoT, MoET, and the C67 (Traffic Police), all learned how to put together strong and balanced projects, despite busy schedules and steep learning curves. Everyone experienced frustrations in this situation but with flexibility problems were worked through and achievements evolved. Trust, direct communication, and continuous checking in brought results. The willingness of all parties to put in the time needed to come to understanding and agreement is essential. The results may not be perfect but they will be worthwhile.

• **Long-term relationships between a donor and the project partners and collaborators contribute to stability and trust** over the length of road safety projects. The Atlantic Philanthropies’ willingness to support the proven collaborators involved in road traffic safety partnerships in Viet Nam to address the issue of child helmet use created a win-win situation. Atlantic’s funding was well used; AIP Foundation became stronger and more stable, while building long-term sustainability into the projects and its own organization. Government, school, and community partners acquired new skills related to injury prevention and road traffic safety work.

• **An evidence-based approach can work even if it is new to Viet Nam’s road traffic safety work.** The evidence-based approach toward road safety campaigns resulted in professional and well thought out project components, grounded in survey data. This approach, in turn, led to a successful integrated campaign. Skill building in the use of evidence, first for AIP Foundation staff, then partners at all levels led to greater professionalism and pride, and the accomplishment of objectives. It is not easy to push over the threshold of this new approach but with determination and clear communication of purpose and results, it can change the course of a project.

• **Sometimes international staff provide important value added.** It was necessary to add an international staff person to support activities and monitoring and evaluation. AIP Foundation did not have the skills necessary to carry out this work without adding international staff, and also used this opportunity for staff training.

• **School-based road traffic safety programming needs to be carried out with the total commitment** of the school staff and authorities, health care staff, students, parents, the
traffic police, and the entire community. It works best when all have something responsible to do related to a behavior change project. It is then possible for the “experts” involved early to step back when local participants can take the lead.

- **This targeted project, while not comprehensively reaching all provinces in the country directly, produced a strong integrated model.** It showed that the integrated model worked well to carry out the child helmet campaign. Child helmet use rates increased in all original targeted sites. The project convinced the Vietnamese government agencies to expand to all provinces through the National Child Helmet Action Plan (NCHAP), building on the results of the *Head Safe, Helmet On* project. AIP Foundation helped them implement that expansion after the Atlantic grant ended and continues to support the NCHAP.

- **Excellent government agency leadership underpinned a necessary smooth project transition to the NCHAP work.** After early AIP Foundation leadership at the beginning of the work on the NCHAP, a confident NTSC took over. That the NTSC then invited AIP Foundation to coordinate some of the work underscored their trust, collaboration, and recognition of needed skills.

- **Enhanced enforcement is possible and essential to the success of child helmet use campaigns.** The emphasis on enforcement resulted in collaboration between schools and the local traffic police. The active engagement of the traffic police produced results seen when the child helmet use observations were completed. The increase in helmet use rates reflected the enhanced enforcement component of the campaign in all target provinces. The decrease in rates nearly always occurred when there was no enhanced enforcement underway.

- **Local corporations and organizations can be introduced to corporate and community social responsibility successfully.** This is a long way from earlier years when no local groups could be motivated to become involved as they have during these projects. Their willingness to support helmet donations and many events and activities is impressive as they continue to be active in the work of the NCHAP.

- **The context within which a child helmet use campaign occurs matters. For example: weather affects child helmet use.** This means that the data for the December surveys, especially in Ha Noi, cannot be seen as clear indicators of actual behavior change. The cold and rainy weather could have affected the results as children wore hats and other warm clothes that interfered with the use of helmets. Rain elsewhere could have affected the use of helmets also. **Seasons affect the results. In summer months it is hard to gain access to school-based resources.** As a result, activities had to be sped up to catch up when school began again and the schedule readjusted. Do not plan a school-based campaign for a time when school is out! **It is not so simple for parents or schools to assure helmet use by children.** Most have not yet found a way to store helmets at the schools due to lack of space, and parents’ responsibility for several children’s school schedules, deliveries, and pickups may complicate how to provide helmets consistently to all.

- **Child helmet use campaigns (2010-16) were dramatically less immediately successful at putting helmets on heads than the adult campaign of 2007.** We need to look more carefully at what we can learn from comparing them. While the child helmet campaigns have succeeded over time, changes in the rates of child helmet use at the target sites came far more slowly and less than anyone had anticipated. For the NCHAP partners, not
giving up was the right thing to do, despite frustration and exhaustion. Eventually the rates increased in 14 of the 15 AIP Foundation focus provinces. Getting there took many more years than originally planned, enormous energy, patience, repetition of messages and activities, and great collaboration among stakeholders. It also meant serious readjustment of expectations and a renewed look at what leads to behavior change in different populations.

Some disappointments and challenges remaining

Despite the long, hard work by stakeholders, the many successes discussed in this paper, and the “against all odds” collaboration and partnerships established in order to implement the National Child Helmet Action Plan, some disappointments and challenges remained.

Only a few provinces could be reached by the complete project-supported campaign.

The primary school age child helmet campaign “Head Safe, Helmet On” focused on targeted schools, in targeted districts and in targeted provinces and cities the years Atlantic supported it. Fortunately, other districts were inspired by the project model and replicated as they could and other provinces developed their own Action Plans. They did not receive the same financial or training support that the 15 “AIP Foundation” provinces did.

In 2015, all Vietnamese provinces wrote their own Child Helmet Action Plans and received advice, project materials, and support from the NCHAP partnership team and have participated actively but we do not know how they have done by 2017. That is a story yet to be told. How will they have measured up to the provinces and districts that received more outside support? How well are they applying the resources they do have? What could have been done better? Are they innovating in ways that were unexpected? Who is going to review the larger effects of the NCHAP?

The goal of an increase to an 80% rate of child helmet use: too high an expectation?

AIP Foundation set 80% as the child helmet use goal for “Head Safe, Helmet On.” That goal is still what AIP Foundation hopes to achieve in its target provinces by the end of 2017, according to its website. During the “Head Safe, Helmet On” campaign no province achieved the 80% goal; the cross-city average child helmet use rate by the project’s end in March 2014 was only 36.1%, up from the baseline rate of 18% in January and February 2011. This was a dramatic failure to reach the 80% child helmet use goal, but it was also progress.

The highest point for the three cities

After the “Head Safe, Helmet On” project, and a year later during the NCHAP work in April 2015, the cities reached their highest child helmet use ratings after an enhanced enforcement period. The cross-city average rate was 69.3%. Da Nang, at 75.6%, came closest to the 80% child helmet use goal earlier set for the “Head Safe, Helmet On” project. Ha Noi was at 70.7%.

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and HCMC at 66.2%. The staff was excited about this showing, until they noted how all the rates dipped again in December.

Down, then up again

The next helmet use observation measurements show a sharp decrease in all three provinces by December 2015 to a cross-city average rate of only 49.8%. A long drop from 69.3%. Then in May 2016, more than five years after the baseline rates were measured, the child helmet use cross-city average rate was back up to 56.9%. This was still a long way from 80%, but again, progress. A big disappointment came in HCMC; the May 2016 rate was about the same as the March 2014 rate of 48.4%, so even though HCMC had peaked at 67.6% in April 2015 that was the only bright spot. Some AIP Foundation staff members were sad about the lack of increase during this second campaign even though HCMC ended the campaign at more than double its 2011 baseline.

The twelve additional provinces

After the end of “Head Safe, Helmet On” and the expansion of the NCHAP work in the twelve additional provinces that AIP Foundation supported Gia Lai province reached a child helmet use rate near 80% (79.5%) in December 2015. That rate for child helmet use was a remarkable increase of 30.8% over Gia Lai’s April 2015 baseline of 48.7%. It was notable because Gia Lai was the first mountainous area province in the project and AIP Foundation staff members were elated. None of the other of the twelve provinces came close to 80% but Quang Ninh and Yen Bai also did well at 66.5% and 60.0% during the same survey period.

In May 2016, the last measurement we know of, all the provinces lost ground again, except Tra Vinh, which gained 5.3%, to rank seventh highest out of the nine provinces observed that time. It was still lower than its first rate measurement in April 2015. In the last observation only six of the twelve provinces had rates higher than their first rates in April 2015. The three provinces with the lowest rates, Quang Binh, Hai Duong, and Ha Tinh were not observed in May 2016 because of funding constraints and it is possible that they were doing better than their baseline measurements.

What happened? The weather

Ha Tinh was seen by AIP Foundation staff as a poster child province. From 2013, under “Head Safe, Helmet On” they implemented a capacity building project there. The objective was to give them methodology, support, and training in how to run their own education programs. Ha Tinh partners and collaborators succeeded completely at becoming good program implementers and trainers. Nevertheless, in April 2015 Ha Tinh’s primary school child helmet rate was 10.7%. When it was only 14.4% in December the explanation was that the weather was getting cold in

165 AIP Foundation, “Child Helmet Use in 12 Provinces” Advocacy Presentation PowerPoint from Hoang Thi Na Huong, Deputy Executive Director, AIP Foundation at interview December 12, 2016.
166 Hoang Thi Na Huong, Deputy Executive Director and Tran Thi Nhai, Program Coordinator, AIP Foundation interview, Ha Noi, December 12, 2016
December children had to wear different kinds of hats. Weather was mentioned as a problem in other provinces at times.

**Hai Duong at the bottom of the baseline**

Hai Duong had the lowest baseline rates of any province among the 15 focus provinces at 7.1%. It is a puzzle as to how it could rate so low in child helmet use and still be a province with a relatively large ‘capitol’ city and fairly near Ha Noi. This was a baseline ranking that did not make much sense but there could be some context explanation. By December 2015 they had more than tripled their child helmet use rate to 22.6%. Although still second from the bottom it showed healthy progress and success.

**A committed provincial leader’s disappointment.** Nguyen Hiep Thong, Deputy Director of the Ha Noi DoET and one of the campaign’s heroes during the GRSP-supported work described above, was a perfect partner. He went to all of the schools with the AIP Foundation team, attended all kinds of activities and committed as much as anyone could. He was the personification of a dedicated leader. What he could not do was make the primary school child helmet use rates increase any higher than they did. In the NCHAP period Ha Noi began in March 2014 with a rate of 23.2%, zoomed to 70.7% during April 2015’s huge enhanced enforcement push, then stuck at 36.8% from the beginning in December 2015 and 35.4% in May 2016. When the rate fell back to less than 37% again Deputy Director Thong did not believe the results and was very disappointed, having expected much more of Hanoians. AIP Foundation sent him the film tapes that they used to document the helmet observations each time to convince him of the results. He is now retired and they miss him so much. It remains for someone else to figure out why Ha Noi was the worst overall performer of the three cities.

**“We were so confident that 80% was doable.”** At the time that AIP Foundation launched their first helmet campaign for adults the messages of the television behavior change ads were so powerful that all of the provinces wanted them. They used them all on their local TV channels. It was hard for AIP Foundation staff when it did not happen the same way with the targets for the children’s campaign

> “We didn’t come close to 80% in most provinces. I think it is still more about what parents believe. I think they still do not have a full belief in the value of wearing a helmet. They have a lot of excuses, as shown in our survey: ‘I am a good driver,’ ‘From home to school is very close so accidents will not happen.’ We talk to a lot of parents and teachers, from different backgrounds and meet all kinds of excuses and situations.”

> - AIP Foundation staff member, 2016

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167 The Ha Noi baseline rate in January 2011 was only 8.7%.
168 Hoang Thi Na Huong, Interview, December 12, 2016, Op Cit.
169 Ibid.
170 Ibid.
One of the challenges countrywide is the need for enhanced enforcement on a regular basis.

“If you do education but there is no enforcement it doesn’t work. At the same time the police have a lot of other things to do when they are working in the traffic. Helmets are not the only thing they have to do.”

- Hoang Thi Na Huong, Deputy Executive Director, AIP Foundation, 2016

The numbers have fallen but for the most part are still much higher than the baseline child helmet use rates were to begin with. The reality is that it will take a very long time to bring a generation of parents to total commitment to child helmet use. It is important now to think again about why it did not work during the child helmet campaigns like it did when adults put on their helmets. It is not because primary school children aged 6-10 do not want to wear them. For the most part the rates improved respectably over the five years of the child helmet campaigns. They did not reach 80% and are not high enough yet to guarantee safety for all children motorcycle riders. Still, progress continues to be made and expectations made need to be adjusted, with the timeline to success lengthened.

When asked if she ever gets discouraged a project staff member responded:

“Not really. Besides the challenges we see a lot of beautiful people and stories. The school based program will still produce good results and we realize that everything needs to be repeated and repeated. And we get support from schools and local authorities. That won’t change. We are of course disappointed if it doesn’t meet our expectations. But we never feel defeated. We have a lot of support from the private sector with great success. FED Ex and FIA Foundation, the UPS Foundation and Johnson & Johnson and others are not the kind of funder that Atlantic was but they keep their commitments. We are also applying to USAID in Viet Nam and Thailand related to new helmet work.” December 2016.

AIP Foundation looking ahead in Viet Nam and the region.

“In terms of where we are going from here, most importantly we are keeping a clear focus on how we can save the most lives.”

- Mirjam Sidik, CEO, AIP Foundation, February 2017

The basic approach AIP Foundation will take while continuing their many-faceted work is clear. 17 years after President Clinton passed out the first 200 Helmets for Kids in HCMC they have a strong 2017 plan. AIP Foundation will:

Use what already works. They will expand the effective school-based programs, including helmet donation and education. In addition to urban areas, they now target underserved communities such as ethnic minorities in Gia Lai, and rural areas, where Helmets for Families is especially popular. They will continue to produce Protec helmets.

Influence policy change and enhance enforcement through ensuring safer school zones through applying speed reduction laws and road environmental modifications; and by continuing to

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171 The thoughts below are those of Mirjam Sidik, CEO, AIP Foundation, email, February 17, 2017.
encourage the establishment of helmet related school policies, the use of school manuals, and enforcement.

**Work in high-risk areas**, expanding programs in industrial zones and shipping ports such as in Ba Ria-Vung Tau, and teaching driving skills to truck drivers. They will emphasize how these drivers can positively influence the communities in which they live and work.

**Target the most affected age group for skill building**: young, novice motorcycle drivers. Skill-building training will focus on eliminating distracted driving and mobile phone use and improving driving skills.

**Leverage funds to ensure children are safe on their way to school** by combining AIP Foundation programs with other large-scale projects. In the *Safe Kids Walk This Way* project supported by Fed Ex for the next four years, they will continue to build in child pedestrian safety interventions alongside the development of new Bus Rapid Transit (BRT) system in HCMC; and in Cambodia, integrate school-based components into large road rehabilitation projects funded by development banks.*172 173

**Global outreach and programming: Before and during the Global Helmet Vaccine Initiative**

In 2006 AIP Foundation joined the United Nations Road Safety Collaboration. That was the beginning of what is now global involvement in diverse Road Traffic Safety programming. The same year, “*Helmets for Kids*” expanded to Thailand and Cambodia. This work, along with other road safety programming, continues in both countries.

The Global Helmet Vaccine Initiative (GHVI)175 was established by AIP Foundation in collaboration with the FIA Foundation and the World Bank Global Road Safety Facility in 2009. It aims “*to put a helmet on every head in the Decade of Action for Road Safety*” (2011-2020).176 The same year, AIP Foundation became the Viet Nam representative of Safe Kids Worldwide, implementing the Safe Kids *Walk this Way* program. Efforts to expand the GHVI to Laos failed when funds could not be secured.177

Begun in 2010 in Cambodia, the *Head Safe, Helmet On* project under the GHVI mirrors that of Viet Nam, with adaptations for cultural and contextual differences. The US Centers for Disease

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172 AIP Foundation recently submitted a proposal to the Cambodian Government and the ADB. There is nothing like this planned for Viet Nam.


174 The Global Helmet Vaccine Initiative is “an international action plan based on the notion that helmets can serve as a universal vaccine against potentially fatal head trauma.” The founders hoped that donors beyond Atlantic would see the value in this concept and support a future for GHVI.

175 The GHVI works to “support the establishment of Country-Level Helmet Vaccine Initiatives, led by a nongovernmental organization and involving government, corporate and research partners. It relies on: targeted programs, public awareness education; global and legislative advocacy; research, monitoring and evaluation; and helmet production.” The AIP Foundation website, “Our Work. Global Helmet Vaccine Initiative,” March 6, 2017.

176 In 2010 AIP Foundation attended the UN General Assembly meetings to advocate for the 2011-2020 Decade of Action for Road Safety resolution.

177 Mirjam Sidik, CEO, AIP Foundation, email, March 7, 2017.
Control and Prevention (CDC) supported baseline surveys as groundwork for both the Cambodian and Ugandan GHVI work. Cambodia’s government, with GHVI advisor support, approved a motorcycle helmet standard in 2010. In 2014 USAID and AIP Foundation partnered for the first time in the Cambodian version of Head Safe, Helmet On. By 2015 Cambodia approved a new Road Traffic Law mandating helmet use for all motorcycle passengers, including children three years old and up. This is a step up from Viet Nam’s helmet law which only requires helmet use by children six years old and up.

Senegal, Tanzania and Uganda were also countries joining the GHVI with their own programs. Discussions continue with the Tanzania Helmet Vaccine Initiative (THVI) about their plans for, and the 2015 government grant given to build, a helmet factory modeled on the Vietnam Protec factory. It will be run by the Tanzanian Prison Services as a rehabilitation support program for prisoners. The local representative who manages the THVI also sits on the coordinating Committee for the Bloomberg Initiative for Global Road Safety (BIGRS) 2015-2019 as it aims to improve road safety laws and regulations through capacity building for lawyers, civil society, and journalists. They will revise the mandatory helmet law.

AIP Foundation supported the Uganda Helmet Vaccine Initiative (UHVI) that developed the helmet standard adopted in 2012. The UHVI also carried out a three year program “Life is your wealth—wear a helmet!” of helmet use education and distribution for motorcycle taxi drivers.

Thailand’s children benefit from “The 7% Project” begun by AIP Foundation and Save the Children in 2014 to focus on increasing a countrywide low rate of 7% for child helmet use coverage. The project appealed to Bangkok’s Governor to insist that Bangkok schools expand road safety awareness and adopt a helmet wearing policy for all students. In 2016 project supporters were asked to advocate for helmets being a mandatory part of student uniforms. This work dovetails with the Street Wise program which is now an expanded pedestrian and helmet safety project, with strong provincial support in target provinces, similar to “Head Safe, Helmet On.” In China, “Walk Wise” a pedestrian safety program supported by Chevron began in 2012. Subsidized helmet sales are part of this growing program’s strategy, with more than 70% of students reporting always wearing a helmet. The project experiences expansion every year.

Recognition for AIP Foundation and the Road Traffic Safety and Helmet Use projects

AIP Foundation staff members attend high level UN meetings and international conferences. They produce articles for international publications, make presentations, and share program models and lessons learned in many cities in the world. “When I grow up,” a public service announcement, won the Silver Award at the 2012 Davey Awards and appears in the WHO online library of road safety campaign materials. A documentary, “In Retrospect,” about the need for children on motorbikes to wear helmets won the grand prize at the Global Road Safety Film Festival in Paris. Staff members and AIP Foundation, the organization, have received

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181 Funding for the boda boda taxi driver training work came from DFID and the EU. Helmet use among the drivers increased from 49% at baseline to 77% when the project ended.
182 Thailand has the second deadliest roads in the world.
international and local honors. AIP Foundation is recognized as an international leader in the area of Road Traffic Safety; it is a resource for Viet Nam, the region, and the world.

Addendum, 9 January 2019

On January 2018, reporting a nationwide rate of 30-40%, the Prime Minister issued Directive number 04/CT-TTg ordering strict enforcement of helmet wearing for children age six and above nationwide, with a target rate of 80% by 2020. The directive requires the Ministry of Education and Training to require helmet wearing on both motorbikes and electric bikes by students, especially those age six and over, and requires disciplinary action for failure to comply. Parents are required by schools to sign a commitment to send their children to school wearing helmets. Thus, the measures advocated by the Asia Injury Prevention Foundation and funded by Atlantic are directed to be implemented nationwide. In August 2018, the state Nhan Dan (The People) online newspaper reported a nationwide rate of 20-30% from the National Traffic Safety Committee and also stated that the start of the new school year did not bring about a change in parents bringing children to school with helmets, though all parents themselves showed up wearing helmets.  

However, in December 2018, AIP Foundation reported that three new schools had joined the Helmets for Kids program, and that the helmet use rate had significantly increased from 23% to 96% at the new schools. All 12 participating schools developed strategies to maintain a high helmet use rate and continue to work toward making child helmet use a sustainable, lifelong practice. The end of the Helmet Story remains to be told, and Atlantic can look to the Asia Injury Prevention Foundation to tell it.