

**IMPROVING ROADWAY SAFETY:
ASSESSING THE EFFECTIVENESS
OF THE NATIONAL HIGHWAY AND
TRAFFIC SAFETY
ADMINISTRATION'S
HIGHWAY TRAFFIC SAFETY
PROGRAMS**

(110-153)

HEARING
BEFORE THE
SUBCOMMITTEE ON
HIGHWAYS AND TRANSIT
OF THE
COMMITTEE ON
TRANSPORTATION AND
INFRASTRUCTURE
HOUSE OF REPRESENTATIVES
ONE HUNDRED TENTH CONGRESS

SECOND SESSION

JULY 16, 2008

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U.S. House of Representatives
Committee on Transportation and Infrastructure
Washington, DC 20515

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July 15, 2008

SUMMARY OF SUBJECT MATTER

TO: Members of the Subcommittee on Highways and Transit
FROM: Subcommittee on Highways and Transit Staff
SUBJECT: Hearing on "Improving Roadway Safety: Assessing the Effectiveness of NHTSA's Highway Traffic Safety Programs"

PURPOSE OF HEARING

The Subcommittee on Highways and Transit is scheduled to meet on Wednesday, July 16, 2008, at 10:00 a.m., in Room 2167 of the Rayburn House Office Building to receive testimony regarding the effectiveness of the National Highway and Traffic Safety Administration's (NHTSA) highway safety programs in addressing roadway safety. Witnesses will also discuss challenges in implementing existing programs, as well as recommendations for strengthening and improving Federal behavioral highway safety programs. This hearing is part of the Subcommittee's effort to prepare for the reauthorization of federal surface transportation programs under the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU), which will expire in September 2009. The Subcommittee will hear from the NHTSA Administrator, the Government Accountability Office, a state highway safety administrator, and organizations and individuals working to improve highway safety.

BACKGROUND

According to the National Surface Transportation Policy and Revenue Study Commission (Commission), highway travel accounts for 94 percent of the fatalities and 99 percent of the injuries on the Nation's surface transportation system. In 2006, 42,642 people lost their lives and more than 2.6 million people were injured in motor vehicle crashes. Motor vehicle crashes are now the leading cause of death and disability for American ages 2 through 34. According to the National Highway Traffic Safety Administration (NHTSA), the 6.2 million motor vehicle crashes cost an estimated

\$230.6 billion related to deaths, injuries, property damage, productivity losses, medical bills, and other related costs.

NHTSA has established a fatality rate goal of 1.35 deaths per 100 million vehicle miles traveled (VMT) in FY 2009, reducing to 1.0 per 100 million VMT by 2011. According to the Commission, a fatality rate of 1.0 per 100 million VMT would reduce total highway fatalities to just over 30,000 annually. While the fatality rate has been reduced from 5.5 fatalities per 100 million in 1966 to 1.42 per 100 million VMT in 2006, the number of fatalities has remained relatively flat, ranging between 42,000 and 43,000 over the past 10 years.

The Commission, which was established by Congress and charged with forecasting future surface transportation system needs, has recommended cutting the total number of fatalities on the nation's roadways in half by 2025. With human errors the cause of 93 percent of all motor vehicle crashes, NHTSA's behavioral highway safety programs are critical to achieving this goal.

Federal Highway Safety Programs

The Federal government leadership role in improving highway safety began with the enactment of the Highway Safety Act of 1966, which created the Federal, state and local partnership to carry out behavioral highway safety programs. Highway safety programs are administered primarily by NHTSA and funded through the Highway Trust Fund. NHTSA's behavioral highway safety programs are intended to reduce fatalities, injuries, and economic losses resulting from motor vehicle crashes. These programs provide grants to states to implement highway safety programs. States allocate grant funds to local government agencies and nonprofit organizations to implement behavioral highway safety programs and enforcement activities. A total of \$3.4 billion is authorized for five years under SAFETEA-LU for NHTSA's highway safety formula and incentive grant programs.

While states are charged with carrying out safety programs, NHTSA oversees state highway safety activities and the use of grant funds by requiring states to submit performance-based annual highway safety plans. In order for a state to receive highway safety grant funds, the state's plan must be approved by the Secretary. The plans must identify key state safety problems and establish goals and performance measures to address the problems identified.

To strengthen oversight of state use of federal safety grants and to address concerns over lack of consistency in performance measure, SAFETEA-LU required NHTSA to conduct triennial management reviews of each state's highway safety program. Based on these management reviews, NHTSA recommends improvements for the management and oversight of Federal grant funds. NHTSA also assists states in carrying out their highway safety mission by providing technical assistance and training programs.

Section 402 State and Community Highway Safety Grant Program:

The Highway Safety Act established the Section 402 State and Community Highway Safety Grant Program, which remains the core Federal highway safety grant program. The 402 program

provides grants to states to implement highway safety programs designed to reduce traffic crashes and resulting deaths, injuries, and property damage.

The 402 program is funded in SAFETEA-LU at \$1 billion over fiscal years 2006 through 2009. Funds are apportioned to the states through a formula based on population and public road miles. At least 40 percent of the funds provided under the 402 program must be distributed to local communities within the State to target enforcement.

SAFETEA-LU requires that states support national safety goals, including national law enforcement mobilizations, sustained enforcement of statutes addressing impaired driving, occupant protection, speeding, annual safety belt use surveys, and development of timely and effective statewide data systems. According to the Government Accountability Office (GAO), from 1997-2007, states directed 54 percent of the 402 grant funds toward the leading causes of highway fatalities: impaired driving and lack of seat belt use. The remaining resources are targeted at other safety programs and enforcement activities, some of which are consistent with national goals, as well as others that address state-specific safety challenges.

Incentive Grants and Sanctions:

Since passage of the 1966 Act, the Federal highway safety program has been expanded to include a number of incentive grant programs targeting specific behavioral activities. These programs are designed to compliment the core 402 grant program. Incentive programs provide Federal resources to states to address a range of safety issues by encouraging enactment of state legislation designed to improve roadway safety and strengthened enforcement of highway safety laws. There are also a number of provisions included that impose sanctions by withholding Federal aid highway funds from states which fail to comply with Federal safety requirements.

Seat Belt Usage:

Significant progress has been made in increasing seat belt usage, with NHTSA reporting a 2007 seat belt usage rate of 81 percent. However, in 2006, approximately 51 percent of passenger vehicle occupants killed in traffic crashes were not wearing seat belts.

According to a Transportation Research Board ("TRB") report on the impact and effectiveness of mandatory approaches to increase safety belt usage, since initial seat belt laws were enacted in the mid-1980s, national usage increased from less than 15 percent to more than 80 percent.¹ The results of individual and multi-state studies reviewed in the TRB report found a 9 percent reduction in fatalities and a 13 percent reduction in serious injuries associated with initial seat belt laws (1984-1992).

In states with primary enforcement, law officers may ticket a non-belt user when they see a violation of the seat belt law. Under secondary enforcement laws, a police officer cannot stop and ticket a driver for the sole offence of not wearing a seatbelt. If current secondary law states would enact primary law upgrades, the report estimates a 10 percentage point increase in usage among

¹ "The Impact of Legislation, Enforcement, and Sanctions on Seat Belt Use." Nichols, James L; Ledingham, Katherine A. http://onlinepubs.trb.org/onlinepubs/nchrp/nchrp_rpt_601.pdf

occupants killed in crashes, a 6 percent to 7 percent reduction in occupant deaths and injuries, and an annual cost savings of about \$100 million per year.

Federal grant programs providing grant resources to states and local governments to target and improve seat belt usage and occupant protection include:

- **Occupant Protection Incentive Grants**—Section 405 of title 23, created in the Transportation Equity Act for the 21 Century (TEA-21), allows the Secretary to make grants to states that use programs or laws to increase the use of occupant protection devices. A state becomes eligible by meeting four of six criteria, including primary seat belt laws, minimum fines or penalty points for seat belt violations, special traffic enforcement programs, and child passenger protection education programs and laws. SAFETEA-LU authorizes a total of \$119.8 million for fiscal years 2005 through 2009. Grant funds must be used to implement and enforce occupant protection programs.
- **Safety Belt Performance Grants**—SAFETEA-LU established a new incentive grant program to encourage State efforts to increase seat belt usage. Section 406 of title 23 provides grants to states to promote the passage and enforcement of seat belt laws. This program, funded at \$498 million for fiscal years 2006 through 2009, replaces the Safety Incentive Grants for Use of Seat Belts program (23 USC 157). SAFETEA-LU funds the prior program at \$112.0 million for fiscal year 2005. Grants may be used for projects that correct or improve a hazardous roadway condition or proactively address highway safety problems.

Twenty-six states, the District of Columbia, American Samoa, Guam, the Northern Mariana Islands, Puerto Rico and the Virgin Islands currently have primary seat belt laws in place. Twenty-three states have secondary laws. New Hampshire has enacted neither a primary nor a secondary seat belt law for adults, although the state does have a primary child passenger safety law that covers children under 18.

- **Child Safety and Child Booster Seat Incentive Grants**—Motor vehicle crashes are a leading cause of death and injury for American children. SAFETEA-LU establishes this program to provide incentive grants for states to pass and enforce laws requiring children to be secured in proper safety restraints. This program is funded at \$25 million for fiscal years 2006 through 2009. Eligible uses of funds include enforcement of child restraint laws, training for child passenger safety officials, and public education efforts. While thirty-eight states and the District of Columbia have booster seat laws, only 17 states and the District of Columbia require booster seats for children ages 4 – 8.

Drunk Driving

Since the implementation of federal and state initiatives to address and enforce drunk driving laws, progress has been made in reducing alcohol impaired driving. Despite this progress, NHTSA data found that 17,602 people were killed in alcohol-related crashes—41 percent of all fatal traffic crashes—in 2006.

Federal impaired driving grant programs and tools include:

- **Alcohol-Impaired Driving Countermeasures**—Section 410 of title 23 provides grants to states for a number of measures to reduce the prevalence of alcohol-impaired driving. States can receive grants by having a low alcohol-related fatality rate, or by meeting a number of criteria: at least three of eight criteria for fiscal year 2006 grants; at least four of eight criteria for fiscal year 2007 grants; and at least five of eight criteria for grants in fiscal years 2008 and 2009. Criteria include check point or saturation patrol programs, prosecution and adjudication outreach programs, testing of blood alcohol content, high risk driver penalties, alcohol rehabilitation programs and driving while intoxicated (DWI) courts, underage drinking programs, administrative license revocation, and a self-sustaining impaired driving prevention program. Programs for alcohol rehabilitation and DWI courts are a new criteria added by SAFETEA-LU. States can also become eligible for such grants by being one of ten states with the highest alcohol-related fatality rate.

This program is funded at \$555 million for fiscal years 2005 through 2009. Grants may go to fund any of the programs listed as criteria for eligibility, and also for law enforcement or public awareness campaigns that address the problem of alcohol-impaired driving.

- **Safety Incentives to Prevent Operation of Motor Vehicles by Intoxicated Persons**—Section 163 of title 23 codifies the penalty against states for not enacting and enforcing a drunk driving law with a legal limit of a blood alcohol concentration level of 0.08. All 50 states currently have established 0.08 as their blood alcohol concentration level.
- **Minimum Penalties for Repeat Offenders for DWI or DUI**— Under Section 164 of title 23 of the U.S. Code, states which do not enact and enforce repeat intoxicated driver laws are subject to a three percent transfer of funds out of each of three core highway programs: the National Highway System program, the Surface Transportation Program, and the Interstate Maintenance program. Funds transferred become available to states for alcohol-impaired driving countermeasures or alcohol-impaired law enforcement activities. A repeat intoxicated driver is defined as any individual convicted of a second or subsequent offense for driving under the influence.

In order for states to be in compliance, a repeat intoxicated driver must: receive a driver's license suspension for not less than one year; be subject to impoundment or immobilization of each of their motor vehicles or the installation of ignition interlock devices; receive an assessment of the individual's degree of abuse of alcohol and treatment when appropriate; and receive minimum penalties of 30 days of community service or five days of jail time for a second offense, or a minimum of 60 days of community service or ten days of jail time for a subsequent offense.

Forty-three states, along with the District of Columbia, Guam and the Northern Mariana Islands have Repeat Offender Laws that meet federal requirements. The seven states that do not have Repeat Offender Laws that meet federal requirements are Alaska, Louisiana, Minnesota, Ohio, Oregon, South Dakota and Wyoming.

- **Open Container**— Under Section 154 of title 23 of the U.S. Code, States are required to enact and enforce open container laws, prohibiting any open alcoholic beverage containers in the passenger areas of motor vehicles located on public roadways. If a State is not in compliance, it becomes subject to a three percent transfer of funds from three core highway programs: the National Highway System program, the Surface Transportation Program, and the Interstate Maintenance program. Funds transferred become available to states to use for any activity eligible under the Highway Safety Improvement Program.

Other Priority Areas:

- **Motorcyclist Safety**—In 2006, 4,810 motorcyclists were killed and 88,000 were injured — accounting for 11 percent of total traffic fatalities. Motorcyclists are approximately 37 times more likely than passenger car occupants to die in a motor vehicle traffic crash and eight times more likely to be injured.

To help address this situation, SAFETEA-LU created this program which provides grants to states to help reduce the number of motorcycle crashes. States become eligible for such grants by adopting or demonstrating a number of measures, including motorcycle rider training courses and awareness programs, a reduction of crashes and fatalities involving motorcyclists and impaired motorcyclists, and an impaired driving program. Eligible uses of funds include motorcyclist safety training and awareness programs. SAFETEA-LU funds this program at \$25 million over fiscal years 2006 through 2009.

- **State Traffic Safety Information System Improvements**—Section 408 of title 23 was created under SAFETEA-LU, and provides grants for states to improve the timeliness, accuracy, completeness, uniformity, integration and accessibility of state safety data, to link this data with other data systems in the state, and to improve the compatibility and interoperability of this data with national data and systems. SAFETEA-LU authorizes \$138 million over fiscal years 2006 through 2009. Funds must be used to implement data improvement programs.

High Visibility Enforcement Program

An additional enforcement tool available to NHTSA and state and local agencies are high visibility enforcement (HVE) programs. SAFETEA-LU provided \$116 million from fiscal year 2006 through fiscal year 2009 for NHTSA to carry out campaigns in coordination with the states to conduct at least two high-visibility safety law enforcement campaigns each year. The campaigns will address two issues: alcohol-impaired or drug-impaired driving and seat belt usage. Funds are focused on combining high-visibility enforcement with heightened public awareness through advertising and publicity. Over 10,000 law enforcement agencies nationwide participate in the seat belt enforcement mobilization and national impaired-driving enforcement crackdown campaigns each year.

NHTSA has found periodic high-visibility enforcement efforts, supported by a coordinated media plan, are proven effective countermeasures for reducing impaired-driving fatalities. Through

its *Click It or Ticket* seat belt mobilization and the *You Drink and Drive, You Lose* national impaired-driving crackdown campaigns, NHTSA and its state and local partners hope to affect behavior through general deterrence, increase the public's perception and understanding of the consequences of violating the law, and induce people into adhering to the law.

National Driver Register

The National Driver Register (NDR) is a computerized database of information about drivers who have had their licenses revoked or suspended, or who have been convicted of serious traffic violations, including driving under the influence, a traffic violation that resulted in a fatality, or reckless driving. State motor vehicle agencies provide NDR with the names of individuals who have lost their privilege or who have been convicted of a serious traffic violation. When a person applies for a driver's license, the state checks to see if the name is on the NDR file. If a person has been reported to the NDR as a problem driver, the license may be denied. Forty-two million problem drivers are recorded in NDR. In 2006, state officials made more than 70 million inquiries for driver license applicants, 9 million of which were found in NDR. SAFETEA-LU authorizes \$20 million for this program for fiscal years 2005 through 2009.

Emerging Highway Safety Issues

There are a range of other roadway safety issues emerging as serious safety concerns. While there are not specific Federal programs in place to address these concerns, NHTSA and individual states have conducted research and begun enforcement activities to address these areas.

- **Distracted driving**—The introduction of greater technology, both in vehicle systems (GPS, traffic information, MP3 players) and communication devices (cell phones and text messaging), has led to increased concerns about vehicle operators' attention being diverted away from driving. NHTSA research has found that 25 percent of police-reported collisions—4,300 daily or 1.5 million annually—are the result of distracted drivers, and 70 percent of crashes involving a distracted driver are either single vehicle accidents or rear-end collisions. Six states and the District of Columbia have enacted bans on drivers using hand-held cell phones. Seventeen states and the District of Columbia have enacted laws prohibiting teens from using cell phones or messaging while driving.
- **Younger Drivers**—Drivers 16-20 years of age make up roughly 8.5 percent of the population, yet represent 13 percent of total motor vehicle-related fatalities and 13 percent of injuries. These drivers have a fatality rate 4 times higher than drivers ages 25-70. In response to these statistics, some states have instituted graduated driver licenses, which phase in young drivers to full driving privileges. While the experience is very limited to date, studies have found crash reductions of about 10 to 30 percent in states with some form of graduated licensing requirements.
- **Older Drivers**—As with younger drivers, older drivers also present a highway safety challenge. Currently, people above 70 years of age represent approximately 12 percent of the driving age population, and 10 percent of all drivers. While the fatality rates for drivers

above 70 years of age have been declining, these drivers make up 15 percent of motor vehicle fatalities and 20 percent of pedestrian fatalities. The number of individuals 70 and over is expected to double by 2030, to 25 percent of the driving age population. Over this same period, these drivers are anticipated to represent 25 percent of all motor vehicle fatalities and 16 percent of all motor vehicle crashes.

Past Committee Action on Highway Safety

The Committee on Transportation and Infrastructure held a hearing on the National Surface Transportation Policy and Revenue Study Commission's report, "Transportation for Tomorrow," on January 17, 2008.

The Subcommittee on Highway and Transit held a hearing on the minority views to the Commission's report on February 13, 2008.

On January 24, 2007 the Subcommittee on Highway and Transit held a hearing to assess the overall needs of the federal highway system.

WITNESSES

PANEL I

Mr. Jim Ports
Deputy Administrator
National Highway Traffic Safety Administration
Washington, DC

Ms. Katherine A. Siggerud
Director, Physical Infrastructure Issues
U.S. Government Accountability Office
Washington, DC

Mr. Christopher J. Murphy
Director
California Office of Traffic Safety and Chairman
Governors Highway Safety Association
Washington, DC

PANEL II

Mr. Patrick James
American Center for Van and Tire Safety
Knoxville, TN

Ms. Laura Dean Mooney
President
Mothers Against Drunk Driving
Washington, DC

Ms. Jill Ingrassia
Managing Director, Government Relations & Traffic Safety
AAA
Washington, DC

Ms. Jacqueline S. Gillan
Vice President
Advocates for Highway & Auto Safety
Washington, DC

The Honorable Bob Letourneau
New Hampshire State Senator
Motorcycle Riders Foundation
Concord, NH

**HEARING ON IMPROVING ROADWAY SAFETY:
ASSESSING THE EFFECTIVENESS OF
NHTSA'S HIGHWAY TRAFFIC SAFETY PRO-
GRAMS**

Wednesday, July 16, 2008

HOUSE OF REPRESENTATIVES
COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE,
SUBCOMMITTEE ON HIGHWAYS AND TRANSIT,
Washington, DC.

The Subcommittee met, pursuant to call, at 10:00 a.m., in Room 2167, Rayburn House Office Building, the Honorable Peter A. DeFazio [Chairman of the Subcommittee] presiding.

Mrs. NAPOLITANO. [Presiding] Good morning, ladies and gentlemen. The hearing for the Committee on Transportation and Infrastructure Subcommittee on Highways and Transit is coming to order.

I personally want to thank Chairman DeFazio for allowing me to chair until he is able to come back to this hearing.

And thank you, Mr. Duncan, for coming with us.

Today's hearing is regarding the effectiveness of the National Highway Traffic Safety Administration's Highway Safety Programs. These programs improve roadway safety by increasing occupant protection measures, including seat belt usage; reducing drunk driving—and hopefully also drugged driving—distracted driving, which would include cell phones; and, of course reckless driving and speeding.

Major costs of highway accidents in my district are due to reckless driving in and around highway and railroad grade crossings, as well as speed. As freight and commuter railroad services rapidly increase, it is imperative that we address grade crossing safety and work with our railroads to improve those particular areas at the grade crossings, whether through grade separations or improved quad gates or any other area that we can effectively put into use.

Communities must be assisted to implement effective countermeasures—like I said, the quad gates, median barriers approaching these crossings, and grade separation projects—which we hope the railroads will continue to increase their help in providing those. The effectiveness of railroad gates is a major concern in my district and allows drivers to maneuver around malfunctioning gates, especially if they are in a hurry or during a rainstorm or they are keeping appointments, being that 160 trains travel through my district every day over 54 grade crossings in a heavily populated area. Add to that other issues, whether it is drunk driving, reckless speeding,

any other safety factor, this is going to be a real problem, especially since the frequency of train traffic is expected to increase, double by 2020.

There are concerns about the DUI, DWI—whatever you want to name it—being used to implement certain things such as immigration checkpoints; concern that the local governments are using Federal and State grants intended for nighttime DUI or DWI, checkpoints to implement these daytime immigration checkpoints. And let me tell you, they are using it as an income increase to their general budgets. Some of the ones that I know—because I know several of them—are the tow truck operators. Because when you implement a fee plus a daily impound of \$30 a day or \$45—depends on who you talk to—for 30 days, that is a hefty amount of money. We must ensure that these provisions that allow these checkpoints to happen or to reduce the number of safety factors that affect our public's safety.

I don't see any statistics from anybody telling us that doing these other measures are decreasing the number of accidents or fatalities. The checkpoints at some of our area's adjoining counties have been including Immigration officers. Well, then we should include parole officers to be able to ensure that some of these folks that are possibly driving while on parole or violation of parole, or whether they are drugged, or whether they are otherwise impaired are taken off the highways. Those are things that I have sort of looked at as I was going through the testimony.

The National Highway Traffic Safety Administration disperses grants to our States and local governments to set up these checkpoints and increase driving safety, not immigration enforcement; and that is taking away from the amount of time the funding to be able to effectively put these officers somewhere where they can be more effective in providing that safety to our public.

I welcome our witnesses today and look forward to hearing the testimony and any recommendations for improving highway safety. I have read most of the testimony with great pleasure because California, as you well know, is a heavily trafficked State and increasing by every year. We must also work with our Federal counterparts to be able to ensure that we have every tool available to decrease fatalities, and I agree, to zero.

With that, I turn to Mr. Duncan for a statement. Thank you, sir.

Mr. DUNCAN. Well, thank you very much, Madam Chairwoman. And I thank Chairman DeFazio for calling this hearing to assess our traffic safety programs. I would also like to thank all of our witnesses for being here. In particular, I would like to thank one of my constituents, Patrick James, for traveling from Knoxville, Tennessee to testify before us here today.

Mr. James lost his daughter, Alexis "Lexie" James, in a 15-passenger van accident last July. Since this tragedy, Mr. James has worked tirelessly to raise public awareness and to improve the safe operation of these vans. He is here today to testify about those efforts. Actually, his work led the Congress to pass at least a preliminary or beginning resolution on this subject just a couple of months ago.

The safety of our Nation's highways is a major concern for the Transportation and Infrastructure Committee. In 2006, 42,642 peo-

ple lost their lives in motor vehicle crashes. That translates to an average of 117 people per day, or 1 person every 12 minutes. In fact, I remember a couple months after 9/11 I was asked to be on the Oprah Winfrey Show because they had an inspector general of the Department of Transportation at that time that said our planes were becoming so dangerous we were going to start averaging a crash a week soon, and that woman was totally wrong; and they had me on there to talk about how safe the aviation system was, and I said at that time, unfortunately, we have more people killed in three or three and a half months on our Nation's highways than killed in all U.S. aviation accidents combined since the Wright Brothers' flight in 1903. The disparity is almost unbelievable.

Behind the numbers, though, of these 42,000 plus people being killed, behind those numbers are devastated families and individuals. In addition to that, traffic crashes cost the Nation an estimated \$230 billion annual. While there has been some progress in reducing these numbers—the 2006 number decreased 2 percent from 2005—traffic fatalities and injuries remain a major public health problem in this Country. In fact, I think they are the leading cause of death for people from the age of 2 to the age of 34, if I remember correctly.

As we move forward on reauthorizing the highway safety programs, we will face the challenge of reducing or trying to reduce these numbers further. This challenge is, in addition, complicated by changes in the causes of fatal accidents, as well changes in the demographics of the motoring public. For example, we must be prepared for the graying of America. As our population grows in size, the average age of our citizens is also increasing. In 50 years, the percentage of the population over 65 will almost double, from about 12 percent now to about 21 percent. This is something we are going to have to take into consideration.

We need to have programs in place that will help meet the challenges by keeping older drivers at the wheel safely. Really, they are the among the safest drivers in this Country today, but they also have a higher percentage of fatalities because, when they are involved in a serious accident, there is more likely to be a death involved.

Our witnesses will address the issues facing the highway safety programs. I look forward to hearing their testimony and I yield back the balance of my time.

Mrs. NAPOLITANO. Thank you so very much, Mr. Duncan.

With that, we will proceed with the testimony of our witnesses, which include Mr. Jim Ports, Deputy Administrator of the National Highway Safety Traffic Administration. Welcome, sir.

Ms. Katherine Siggerud, Director of Physical Infrastructure Issues at the Government Accountability Office. Welcome, ma'am.

And a very hearty welcome to one of my State's great people, who is Christopher Murphy, Director of the California Office of Traffic Safety and Chairman of the Governors Highway Association.

Thank you all for being here, and we will proceed with Mr. Ports. You may begin, sir.

TESTIMONY OF JIM PORTS, DEPUTY ADMINISTRATOR, NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION; KATHERINE A. SIGGERUD, DIRECTOR, PHYSICAL INFRASTRUCTURE ISSUES, U.S. GOVERNMENT ACCOUNTABILITY OFFICE; AND CHRISTOPHER J. MURPHY, DIRECTOR, CALIFORNIA OFFICE OF TRAFFIC SAFETY AND CHAIRMAN GOVERNORS HIGHWAY SAFETY ASSOCIATION

Mr. PORTS. Thank you, Madam Chairman, Ranking Member Duncan and members of the Subcommittee, thank you for inviting me here today to discuss motor vehicle safety issues. I want to express my appreciation for this Committee's support for highway safety programs. Your leadership and support have made significant contributions to advancing the cause of highway safety and improving the quality of life in communities across the Nation.

Transportation safety is a top priority for President Bush and Secretary Peters. Our mission at NHTSA is very straight forward: to save lives and prevent injuries. Motor vehicle crashes continue to be the leading cause of death for Americans in every age 2 through 34. In 2006, more than 42,600 people lost their lives on U.S. roadways, and 2.6 million were injured in vehicle crashes.

As Representative Duncan mentioned earlier, the associated financial costs are staggering, at \$230 billion each year. What makes that situation even more distressing and frustrating is that many of these deaths were preventable. Over 90 percent of crashes are caused by human factors, such as speeding and alcohol impairment. We must aggressively continue to work to change driving behaviors. Advances in new technology, such as electronic stability control, will also play a major important role in reducing traffic fatalities in the future.

One of the areas where new advances in technology linked to behavior programs shows strong promise is in reducing impaired driving crashes. In 2006, alcohol-impaired driving crashes accounted for more than 13,400 deaths, or 32 percent of all traffic fatalities. Impaired drivers also take a terrible toll on our most precious resource, our children. In 2006, 598 children under the age of 18 were killed in crashes involving an alcohol-impaired driver.

Lack of seat belt use also continues to be a major factor in motor vehicle crashes. Research has shown that seat belt use is the most effective traffic safety countermeasure available to prevent fatalities and injuries. Seat belts saved an estimated 75,000 lives between 2002 and 2006. Higher belt use rates translate directly into saved lives.

One of the most challenging areas we face today is motorcycle safety. The number of fatalities continues to rise. In 2006, 4810 motorcyclists were killed, an increase of 5 percent over the 2005 number, and a 127 percent increase since 1997. NHTSA supports comprehensive efforts to reduce motorcycle-related crashes and injuries, including the use of motorcycle helmets.

Just this morning, as a matter of fact, Secretary Peters held an event at the Department of Transportation in recognition of Ride to Work Day, highlighting motorcycle safety. In November 2007, Secretary Peters announced a new departmental action plan to reduce motorcycle fatalities. The plan includes a comprehensive range of initiatives, including rider education, tougher standards

for helmet certification labeling, law enforcement training, and road design that can consider motorcycle handling dynamics.

The growing number of older drivers also requires attention. As the Ranking Member just mentioned, in the United States we are facing a surge in the population of those over the age of 65. In 2006, there were 30.1 million older licensed drivers, which was an 18 percent increase from 1996. NHTSA's policy is to promote safe mobility for older riders, to help seniors drive as long as they can do it safely, and to encourage the development of transportation alternatives for those who can no longer drive.

NHTSA developed an older driver strategic plan to better target agency programs and resources to address this at-risk growing population. Key areas of focus include skills screening and assessments, licensing, counseling by medical providers, public information and program promotion and other activities.

At the other end of the driving spectrum, NHTSA also has a strategic approach to addressing teen drivers. In 2006, young drivers between 15 and 20 years old accounted for 6.4 percent of the total number of drivers, but accounted for nearly 13 percent of drivers involved in fatal crashes.

Through these behavioral and technology efforts, NHTSA seeks to reduce the total motor vehicle crashes in this Country. Many of these crashes and fatalities are preventable, and through greater implementation of proven safety countermeasures, we believe that thousands of additional lives could be saved each year.

Madam Chairwoman, thank you for your consideration and this Subcommittee's ongoing efforts to improve highway safety, and I would be pleased to answer any questions at the appropriate time.

Mrs. NAPOLITANO. Thank you, sir, for your testimony, Mr. Ports.

We will move on to Ms. Katherine Siggerud.

Ms. SIGGERUD. Madam Chair, Ranking Member Duncan, thank you for inviting GAO to this important hearing on NHTSA's traffic safety programs.

While there is progress to report over the past decade, as the traffic fatality rate has decreased by about 14 percent, safety remains one of the key challenges facing DOT and the States. It is unfortunate that the number of traffic fatalities has remained at about 43,000 annually.

We have recently published four reports on key NHTSA programs and my statement today is based on that work. Today I will cover, first, NHTSA's activities related to programs authorized in SAFETEA-LU; second, these programs' effectiveness in addressing traffic safety issues; third, observations from our work on safety for older drivers; and, finally, issues to consider in reauthorizing the programs next year.

NHTSA has made substantial progress in implementing traffic safety grant programs and high-visibility programs. NHTSA provided guidance and developed programs quickly to implement SAFETEA-LU. In fiscal years 2006 and 2007, NHTSA awarded over \$1 billion through its main formula grant and its incentive grants meant to induce States to adopt Federal priorities such as improved seat belt use. With regard to high-visibility campaigns, by these I mean the Click It or Ticket and the impaired driving program, known as Drunk Driving Over the Limit, Under Arrest.

NHTSA has both developed and distributed advertisements and coordinated advertisement and enforcement activities with all States.

In our April report, we raised concerns and recommendations about NHTSA's evaluation of these campaigns. NHTSA is considering changes as a result.

With regard to oversight, we recommended in 2003, and SAFETEA-LU subsequently required, that NHTSA improve the consistency of its oversight of grants to States. NHTSA has done so by conducting management reviews every three years and working with the State partners to develop a useful review protocol. In our report issued Monday, we recommend several improvements, including that NHTSA consider the results of these reviews in identifying opportunities for technical assistance and training.

With regard to these programs' effectiveness, it is generally too early to know whether programs established or changed since SAFETEA-LU are having an effect on crashes and fatalities. States told us that the programs are helping to improve traffic safety by addressing important issues such as unbelted and alcohol-impaired driving. State officials further said that incentives grants are good complements to the core safety program.

But the incentive grants appear to have induced only moderate changes in State programs during this authorization. Overall, nine States have passed primary safety belt laws that can reasonably be ascribed to SAFETEA-LU incentives. Thirteen States have passed laws necessary to receive the Child Safety Seat grants, and no States have passed laws to meet certain criteria established for impaired driving grants.

Each safety incentive grant has a separation application process, which is an administrative burden, especially for States with small safety offices. Some States would also prefer more flexibility in using the grants. This could become a key issue in the future as emerging issues, such as older driver safety, become more critical in States. We also noted that NHTSA does not have sufficient performance measures to assess the grant programs' effectiveness, but has begun the process of developing these measures.

We issued a report last year looking at safety for older drivers, including licensing procedures. More than half of the States use licensing requirements for older drivers that are more stringent than for younger drivers, but not enough is known about whether these and other practices are actually effective in identifying problems in improving safety. We noted as a best practice States' use of coordinating groups to develop cross-agency plans for managing older driver safety. NHTSA and the States are sponsoring initiatives to develop such plans and assist States in implementing more comprehensive driver fitness assessments.

In conclusion, this Committee and the Congress have a number of issues and opportunities to consider in the next authorization. I have already mentioned challenges associated with the incentive grants, including whether they, as designed, will be able to induce the changes the State legislation and the Congress would like to see. In addition, with the exception of the data improvement grants, these programs also generally do not relate State safety performance to the receipt or size of grants, and Congress would need to consider whether to tie funding more closely to perform-

ance. Congress will also hear suggestions to allow for more flexibility in using grant funds to address current and emerging safety issues. In our view, increased flexibility should be combined with quality crash data and accountability mechanisms to ensure that Federal dollars are going to the highest priority safety problems.

Furthermore, the plateau of the number of annual traffic fatalities nationwide and changes in causes of fatalities may indicate that the current structure in traffic safety programs needs some change. For example, from 1997 through 2006, motorcycle fatalities increased by 127 percent, while child passenger fatalities decreased by 31 percent. Finally, speed remains an important factor and is not currently targeted by any of the programs I have discussed today.

Mr. Chairman, this concludes—sorry, Madam Chair, this concludes my statement, and I will answer any questions you may have.

Mrs. NAPOLITANO. Thank you, ma'am.

Next we will have Mr. Christopher Murphy give us his testimony. Thank you for being here, sir.

Mr. MURPHY. Madam Chair Napolitano and Ranking Member Duncan and members of the Subcommittee, thank you for allowing GHSA to be here today to talk about ways to improve highway safety.

GHSA members administer one formula grant, seven incentive grant programs, and two penalty transfer programs. All of these programs have different requirements and different deadlines. These programs have been authorized in a piecemeal basis over the last several reauthorizations.

GHSA recommends that a national strategic highway safety plan be developed. We also recommend that the national plan set a goal of towards zero fatalities. Instead of supporting a single highway safety grant program with performance tiers, States would like a single application with a single deadline and all the grant funds allocated October 1st. Congress should streamline the application process to allow more rationality in the State planning process. This change would mean that States would spend less time submitting grant applications and more time on program development and implementation.

We also support more performance-based grant programs. GHSA is currently working with NHTSA to develop core performance measures that all States will begin using in 2010. Additionally, GHSA has also endorsed the idea of greater flexibility between behavioral highway safety grant programs. Currently, there is no flexibility. States want to be able to shift a percentage of their incentive funding to the emphasis areas where they have the greatest need.

GHSA supports making changes to the various incentive grant programs. We support expanding the purpose and scope of the 2010 motorcycle safety program and combining the three occupant protection programs into a more performance-based one. We also strongly support the idea that the eligible activities under the 410 2010 and the occupant protection program be expanded.

GHSA is supporting a new program to combat excessive speed. The program would provide incentives to States that implement

speed enforcement and automated speed enforcement, speed paid media and educational campaigns or speed management workshops. GHSA also recommends that Congress fund a national campaign to re-educate the public about the dangerous consequences of speeding, a biennial national speed monitoring data collection study to determine how fast the traveling public is actually going, and research into emerging technologies for measuring and controlling speed.

We also very strongly support substantially increased funding for data improvements. The current \$34.5 million program is just not adequate. Performance-based programming is heavily dependent upon good data, so it is imperative that improvements be made in State data systems. We also support increased funding for traffic safety research. States should have the ability at the same time to pool their funds to fund research that would supplement the Federal research. The NHTSA behavioral research program and FHWA safety research program should also be increased.

Training is also a big issue for GHSA. There is concern that many directors of highway safety are retiring and there is not adequate training for new directors, nor is there training to attract young professionals into the field. Training is a problem government-wide, but it is particularly acute in highway safety. GHSA supports AASHTO's recommendation for the development of a AASHTO-GHSA Highway Safety Center of Excellence, funded at about \$3 million annually. We also support increased funding so that NHTSA can enhance its training capabilities.

GHSA strongly supports the continuation of and improvement of the strategic highway safety plan. As an association, we continue to oppose new sanctions. States are already sanctioned for failure to enact seven different highway safety laws. They are making progress on high BAC, booster seat, and graduated licensing laws. We would, however, vigorously oppose any effort to roll back the national minimum drinking age sanction.

In summary, Madam Chair, the Association is not recommending major changes to the current grant programs. GHSA has recommended that the current grant planning and application process be streamlined. The program should be more performance based with greater flexibility between behavioral programs, and that some programmatic changes should be made to the incentives.

Thank you.

Mrs. NAPOLITANO. Thank you for your testimony, Mr. Murphy. The information that you have given us is appreciated. Of some interest was your statement in regard to reducing speed also saves energy, lowering gas mileage to reduce the 33 percent highway speeds, and the rule of thumb is this should be out to the consumers right now since gas is so expensive, that for each 5 miles per hour they drive above 60 is like paying an additional 20 cents per gallon for gas. Is that including today's gas prices?

Mr. MURPHY. Those are the latest figures that we have.

Mrs. NAPOLITANO. Okay. That is significant. In areas of different questions that I had—and I have a lot of them, so I will defer to some of the members in a minute—I still have some issues with the COPS policing grant in California, whether they are utilizing—and I don't know whether the States are the same—some of their

funding to be able to conduct daytime immigration checkpoints, but checkpoints in general. And what correlation have they found because most people are driving to or from work, or they are delivering or they are going to appointments, versus nighttime, after work, go have a couple of drinks and then getting on the road, driving that might affect the actual public safety.

Whether or not there is consideration in your governor's focus of being able to identify what other safety issues can come up at checkpoints that might then be more geared towards whether it is teen driving, driving under the influence, or even during the daytime, during school hours, in schools, when kids are taking off and not going to school, being truant, and already possibly being under drug influence. I was suggesting that we change the Mothers Against Drunk Drivers to Mothers Against Drunk and—well, Impaired Drivers, which would include anything else, because those are serious problems our communities are facing today.

Mr. MURPHY. Madam Chair, in California, our policy, through my office, is that we only fund checkpoints that start after 6:00 in the evening, so I can't really respond to checkpoints that are done during the day, because they are not being done with federal funding. So we know that checkpoints are the most effective countermeasure out there for DUI. In California they can only be conducted in areas on streets that have a high incidence of DUI arrests and/or alcohol-involved crashes. So our checkpoints generally run anywhere from 6:00 to 2:00 in the morning or 8:00 to 2:00 in the morning. I am not really sure about daytime checkpoints.

Mrs. NAPOLITANO. Okay. And you are recommending Congress implement a speed management program to provide incentives to States to address speeding. Is there a technology that you know of—I know one gentleman in the audience is from the auto industry—that would equip a car with a sensor to be able to detect alcohol impairment, something that the industry would help address to be able to then negate an impaired driver from getting behind the wheel?

Mr. MURPHY. Madam Chair, I know a little bit about that, but I really should defer to my colleagues at NHTSA, who could probably better answer that question.

Mrs. NAPOLITANO. Okay.

There are other questions, but I think what I will do is I will yield to my Ranking Member, and I will continue the questions. There are other members here.

Mr. DUNCAN. Well, thank you, Madam Chairwoman, but I want to go first on our side to Mr. Poe.

Mr. POE. I want to thank the Ranking Member for yielding. I have basically two questions for Mr. Ports.

Talk about buses that transport kids. Not the old-fashioned yellow school buses, but these high-dollar big buses that we think are safer than school buses when kids are transported from, let's say, a town to another town for an athletic event. We had two teenage girls in a State playoff killed in a bus that turned over, and these massive windows shattered and they were both killed. Correct me if I am wrong, these big buses are really more dangerous in a crash than old-fashioned school buses. What is being done, if anything, to

rethink the way we build these massive buses, especially those that transport kids from event to event?

Mr. PORTS. Thank you very much for that question, Mr. Representative. What NHTSA has done is we have been very aggressive in trying to look at that situation as it involves motorcoach safety. One of the things we recently did was, in December, for the first time in NHTSA history, we crashed a motorcoach. We wanted to find out what the pulse of that vehicle was so that we could then devise a sled device so we could further research how we can make motorcoaches safer.

We equipped that motorcoach with several dummies to look at how they would react to seat belts, how the seats would react, different seats in a motorcoach would react, and we are taking that information now and trying to come up with some policies.

To address fully your question about the windows, we are also looking at the glazing issue of the motorcoaches.

So we are starting to address those and we hope to have something completed by December.

Mr. POE. Is the motorcoach industry actively trying to come up with some solutions? Are they an obstacle, are they cooperating, or what, in your opinion?

Mr. PORTS. Well, they were actually in attendance at the crash, so they are very interested in working with us on some safety measures.

Mr. POE. Another question has to deal with age of drivers. If you could give me some statistics. Under 25-year-old drivers account for approximately what percentage of the fatalities in the United States? Just approximately.

Mr. PORTS. I believe it is about 15 percent right now, but let me get back to you on that question.

Mr. POE. Well, is it true that younger drivers, percentage wise, commit more fatalities as the driver than people that are older? I don't want to talk about senior citizens. I think the Ranking Member will get to the senior citizens in a minute. But is that true or not?

Mr. PORTS. It is. As a matter of fact, the percentages of teen drivers, as I mentioned, they are about 6.4 percent of the total driving population, but represent about 13 percent of the fatalities. So they are definitely over-represented in the fatality and crash injury of all drivers.

Mr. POE. Talk about a little heresy here. What if we raised the driving license age? Would that have any significant effect on loss of teenagers that are getting killed?

Mr. PORTS. To be honest with you, I am not sure of that answer. I could have some of our folks at NHTSA look into that for you.

Mr. POE. I would like to know if that isn't a fact. It is true, is it not, though, that teenage drivers account for a disproportionate number of fatalities that are alcohol-related? Is that correct?

Mr. PORTS. That is correct. As a matter of fact, they shouldn't be drinking to begin with.

Mr. POE. That is right. Not until they are 21.

Mr. PORTS. They are not 21, right.

Mr. POE. All right, that is all my questions.

I yield back the remainder of my time. Thank you.

Mrs. NAPOLITANO. Mr. Arcuri.

Mr. ARCURI. Thank you, Madam Chair.

Thank you for being here. I have a couple of questions. The difference in the number of deaths as it relates to the speed limit, do any of you know the difference in terms of the numbers when the speed limit was 55 miles an hour and what the percentage are when it is 65 or 70 miles an hour, as it increases?

Ms. SIGGERUD. Mr. Arcuri, I have to say the GAO actually did a study on that way back in 1977, and there has been some updated information. We have a new request from Senator Warner to look specifically at this issue of the speed limit as it relates to energy efficiency and safety. I would certainly be glad to provide some information to you for the record on that.

Mr. ARCURI. Great. I appreciate that. Thank you.

Second question is we see a lot on the road of the doubling of fines in work zones. Has that had any success in terms of more compliance? Are people complying more with the speed limits? How has that affected the number of fatalities in work zones?

Mr. PORTS. To be effective, any time you have an increase in the fines, you also have to have enforcement. That is a critical factor. We do know that proper enforcement in any zone, whether it be a speed zone, a school zone, or any other roadway, has a significant impact on the behavior of those individuals.

Mr. ARCURI. I believe that there have been some significant grants that have been given out to law enforcement to enforce speed limits within the work zones in the past few years.

Mr. PORTS. That is correct, sir. That is Federal Highways that provides those grants, that is not NHTSA. But, again, we would be more than happy to get with Federal Highways and get that information for you with work zone safety.

Mr. ARCURI. Great. I appreciate that.

Thank you, and I yield back.

Mrs. NAPOLITANO. Mr. Duncan?

Mr. DUNCAN. Go ahead to other members, I will go last.

Mrs. NAPOLITANO. Okay, Mr. Sires.

Mr. SIRES. Thank you, Madam Chair, and thank you very much for the panel being here.

You know, despite great efforts in the State of New Jersey, this year we had 280 deaths on the roads, in 2008. In my district alone we had 70. I really believe it is vital that we come up with whatever we can to reduce the fatalities. Some of our current problems are educational, while others, such as mandatory seat belts, are all mandatory.

In your review of traffic programs, how much more effective is it in curbing the behavior of drivers when you fine the drivers as compared to educational programs for the drivers?

Ms. SIGGERUD. There has been extensive research on this very concept of is an educational campaign sufficient to change behavior, or does taking enforcement action through fines or other means, through core process, is that important to reinforcing the behavior change, and it is very clear that combining enforcement activities with an educational campaign is the most effective way to get change in behavior by drivers both at the time of the cam-

paign and that lasts over time. The educational component by itself has generally only a relatively small effect.

Mr. SIRES. So when they are fined and they are required to go through an educational process, you find that that is the most effective, or just—

Ms. SIGGERUD. Well, the research shows this really in two ways. One is, of course, those that have gone through this enforcement process may change their behavior. But, in general, the visibility of enforcement together with education has the potential to change many other drivers' behavior as well.

Mr. SIRES. Another one of my pet peeves is this driving with the cell phone in your ear. I know in New Jersey we banned that, but you get on the Jersey Turnpike and everybody has it without the piece in their ear. How effective are these laws when it comes to something like cell phones in your studies? Are they a deterrent or do we have to go back to a fine and education? I am just trying to get a way of how we enforce this, because most people just seem to ignore it. And I am not an abuser; I have my little earpiece.

[Laughter.]

Mr. PORTS. Again, thank you for that question. What we have found is that licensed sanctions and fines are probably the best deterrent, as mentioned, but, also, again, it goes back to enforcement. If there is a strong enforcement component, then you would see changes in behavior. As a matter of fact, you will be very happy—I am sure you are very happy to know that southern New Jersey just joined the Smooth Operator program to combat aggressive driving this year as a regional program, so you are starting to see—

Mr. SIRES. This is the southern part of New Jersey?

Mr. PORTS. Yes, sir.

Mr. SIRES. How do you divide south and north?

Mr. PORTS. That is up to them.

[Laughter.]

Mr. PORTS. They do that, not us.

[Laughter.]

Mr. SIRES. Thank you very much.

Mrs. NAPOLITANO. Thank you.

Mr. BROWN.

Mr. BROWN. Thank you, Madam Chair, and thanks to the witnesses. I apologize for being a little bit late, but let me ask a question to Mr. Ports, if I could. And any of you all might join in if you have something to add to it.

What role does increasing congestion play in the number of accidents and related deaths? Are more congested cities or highways more dangerous from a statistical point of view than the ones that aren't?

Mr. PORTS. Thank you very much for that question. What we have found through our research—and we are rolling out a new program for rural safety as we speak—is that most of the fatalities occur on rural roads, and usually a divided highway with traffic coming in each direction. Some of that is because of the way the roads are structured; you have a lot of hills, turns, curves, trees, utility poles very close to the roadways, and, of course, cars are close to each other as they are passing. And then, of course, you

have aggressive drivers who change lanes when they should or should not, at times.

So what we have found is that, as it gets congested, people obviously slow down and you do have a lot of crashes, but there are not as many fatalities.

Mr. BROWN. Okay, let me ask you another question. Since 2000, injuries in motor vehicle crashes have dropped by about 500,000 per year; yet, fatalities have stayed level, at between 40,000 and 45,000 a year. How would you relate to that statistic?

Mr. PORTS. Thank you very much. That is one of the more frustrating things to us, is the way the numbers are used. But if you look at how we measure the statistic, what we do is we take 100 million vehicle miles traveled and we look at the fatality rate. The fatality rate has been decreasing significantly. And, of course, we have dedicated employees throughout NHTSA working on that every day; their mission is to save lives and reduce injuries every day.

Although the numbers are staying the same, flat, as you had mentioned, the overall number, there are a significant amount of motorists out there registered and driving, as well as more vehicle miles being traveled, so statistically we are reducing that rate. But, more importantly, as I mentioned, our mission is to reduce fatalities and injuries, and we don't look at just the statistics or just the numbers; we look at each and every one of these as a person and a family member and a community member.

Mr. BROWN. One final question. How does your administration work with research and innovative technology administration and its intelligent transportation system joint program office to integrate safety priorities into design and development of intelligent transportation systems?

Mr. PORTS. We work very extensively with them and we also have just rolled out the new NCAP, our new vehicle program, which talks about technology. What we have found is that most of the cars throughout the United States are getting four and five stars, as you are probably aware, so we have rolled back that a little bit and looked at technology and how we can introduce technology side impacts and ESC, electronic stability control, and all these future technologies so that we can give the consumer a better idea of how technology can benefit them and the safety of their families.

Mr. BROWN. I know there are automobiles now that give you a little alarm if you back up and you get too close, and I was just wondering if that technology is being further advanced to give early warnings for maybe crossing the center line or maybe some other safety factors that might be included.

Mr. PORTS. That is an excellent question, and, yes, we are very interested in that technology. We are working with the auto manufacturers on technology for lane departure, so if you go on either side of the lane, it will warn you before you leave the road, because that is what we are trying to prevent. There are also technologies out there for automatic braking that we are working with with large trucks, that will determine if they are too close to a vehicle or if they are drowsy, for example, and not paying attention, it will automatically stop that vehicle. We are also looking at further tech-

nologies with backing up and what we call vehicle-to-vehicle communication to determine if a vehicle is in your blind spot.

So all these technologies, we are very excited about technology at NHTSA and how it can help prevent injuries and save lives.

Mr. BROWN. Thank you very much.

Thank you, Madam Chair.

Mrs. NAPOLITANO. Thank you, Mr. Brown.

Mr. Duncan.

Mr. DUNCAN. Thank you, Madam Chairwoman.

Last year, I wrote something in a newsletter I sent to my constituents, and I said this: drunk driving standards were toughened in most after the Congress passed laws to withhold some Federal money if alcohol levels were not lowered. Now, with our aging population, some want to make it tougher for senior citizens to renew driver's licenses because there is a myth about them being very unsafe drivers.

However, the National Highway Traffic Safety Administration recently found that drivers 75 and older are the safest drivers of all. The next safest are those 65 to 74. And this is based on the crash rate per 10,000 drivers. In this study, the lower percentage was better, and the figure for those 75 and over was 2.5 percent, while the rate for those 16 to 20 was 13.3 percent.

Now, that was from a chart that was published in The Washington Post. That is a dramatic difference. Now, that applies just to accidents.

We have a chart that is on the screen now that shows something a little bit similar, except this pertains only to fatal crashes. It shows, once again, those over 65 have the lowest percentages of fatal crashes. Now, it does show a dramatic difference between male and female drivers. I read, a couple years ago, that there is only one thing that 100 percent of the people in this Country agree on, and that is that everybody thinks they are a good driver.

[Laughter.]

Mr. DUNCAN. Now, that may be true, but what these two different studies show is, number one, that the older drivers are safer. Now, I do understand there is some statistic that I am a little bit confused about, that when older people who are riding as passengers are involved in these bad wrecks, they are more likely to be killed than the younger people; and I guess that is true. But they are safer drivers.

I will ask you, Mr. Ports, do you have any kind of program aimed at pointing out to male drivers how bad they are in comparison to women drivers? But more seriously, are you aiming anything particularly at the high schools? Because there is a private foundation that contacted me a few months ago, and they sent this young man who was a star football player in California who was seriously brain damaged in a bad wreck because of alcohol, and they send him around all over the Country; he has been on the Today Show. I don't remember his name right at the moment, but they offered to do that in a high school in my district and we went and we did that. I was there and introduced the program and so forth. It had a real effect on those young people.

Now, that was being done privately. What are you all doing?

Mr. PORTS. I really appreciate that question.

By the way, Madam Chairwoman totally agrees with you, the difference between male and female drivers. I saw her head shaking vigorously and her smile was from ear to ear.

We are trying to address that, as a matter of fact. Many of our programs now, the Click It or Ticket, the Over the Limit, Under Arrest campaigns—which, by the way, thank you very much for the \$29 million per year to do those campaigns—we are starting to target young people, for one, but males in particular. We are trying to do that for the very reasons you said. We recognize that about 64 percent of the teens who die in fatalities die because they are not wearing their seat belt, and that is a statistic that we need to change.

As a matter of fact, in our Click It or Ticket program that I just did a whirlwind tour on the west side of the Country, we brought out individuals like you just mentioned, two males involved in a crash going about 60 miles an hour; one of them hit a wall. He was almost totally decapitated and his passenger was wearing a seat belt and walked away from the crash.

We need to educate teens, especially males, who think they are invincible. I am sure you had teenagers too; you understand how difficult it is to get them to clean their room, let alone wear a seat belt in a vehicle. It is a very difficult proposition to get them to understand they are not invincible. We are doing our best to do that through creative campaigns. We had someone on Click It or Ticket. You would notice it looked like aliens were coming down. We are trying to focus on ways that they might relate.

We are also doing some peer-to-peer reviews. We are working with school-aged children, especially high school age, through some of the programs and the NOYS organization to effectively address the teen situation, but we do know this: it is speed, it is not wearing a seat belt, and it is, as you mentioned, drinking and driving. And, quite frankly, they are not supposed to be drinking anyway because they are below the age of 21, so we need to address that problem, and we are going to need parental help in that area. We need parents to take responsibility and work with their children, and we need to have law enforcement out there doing their best, and they are doing, by the way, a terrific job.

Mr. DUNCAN. Well, I can still remember—in fact, as I am sitting here thinking about it, I can picture in my mind when I was in high school, there was this terrible wreck, and just a group of people on their own—it wasn't the government that did it—they brought that crashed car that was just all smashed up to our high school and set it out in front of the school for a few days, and, boy, I tell you it made an impact. We need to be doing things like that in all these high schools all over the Country, and showing things on videos and all kinds of things.

Is NHTSA doing anything to ensure the safe operation of these 15-passenger vans? We are going to hear some testimony about that on the next panel.

Mr. PORTS. Yes, sir, absolutely we are. We are working very aggressively on the 15-passenger van situation. As you know, Administrator Nicole Nason put out an announcement earlier in the year. By the way, I want to thank you for your resolution—I think it was 964—in April of this year to address that problem.

There are a few things that we definitely know about the 15-passenger vehicles. One, we did put electronic stability control, we mandated electronic stability control in all vehicles starting in 2011, which we believe is probably the next best safety device and countermeasure since the seat belt. We expect that to help in these rollover situations and reduce the risk of rollover. We also have been very aggressive in talking about maintenance of tires and tire pressures. It also saves energy, Madam Chairman. But it is very important to the safety of your family and the vehicle and its performance.

We also recognize that one of the problems with the 15-passenger vans is overloading. When you overload that vehicle—and there are specifications in the door jams of every vehicle with the weight the vehicle can handle. We need people to understand the capacity of these vehicles.

Again, as I mentioned, we want to recognize your resolution that you were proactive in passing, which really addresses the inexperienced drivers. When you have all of these other factors occurring and you put an inexperienced driver into the seat of that 15-passenger van, in the driver's seat, I should say, that is potential for a hazard.

Mr. DUNCAN. All right, thank you very much.

Ms. Siggerud, one thing I have become really concerned about the last couple of years has been motorcycle wrecks and deaths, because I started noticing on the second page of the local section of the Knoxville News Sentinel, almost every day they have a story about a motorcyclist being killed. Then, I also have been reading that the numbers of people 40, 50, and 60 that are buying motorcycles is just exploding, going way, way up.

In your study of all this—you even, I think, have noticed the number of motorcycles registered is going way up and predicted that it is going to go up even further—are there any States out there that are doing dramatic or unusual or very innovative programs about motorcycle safety?

Ms. SIGGERUD. Mr. Duncan, it is an excellent question. In our work we did notice all the problems that you mentioned, and it is, I think, most interesting to note that the fatality numbers that we are seeing now are very much driven by the motorcycle fatalities. If it weren't for the increase in motorcycle fatalities over the last decade, we would see this annual number actually make some progress and start to go down over the past decade.

In our work on this issue, we did not study specifically what activities States were undertaking and whether some of them were particularly interesting or innovative. What we did hear, though, in looking at the motorcycle incentive grants, which we did earlier this year, that is one of the smaller grants in the incentive grant program and it is also restricted largely to education-related activities. So we raise as an issue for authorization next year whether there perhaps are some different approaches that could be used in that grant to make it more effective.

Mr. DUNCAN. I just think, based on what I have been reading and hearing, that maybe we ought to increase that grant program more, maybe, than perhaps some others, because it looks to me like there needs to be some special efforts directed in that way also.

Mr. Murphy, according to your testimony, you say we can be on a path towards cutting accident fatalities in half by 2030 by simply annually reducing losses by 1,000 per year. You note that we came close to that in 2006. Do you know of anything that we were doing differently then or better then, as opposed to prior years, or do you have any key suggestions in regard to all these things I have been asking these other witnesses?

Mr. MURPHY. Thank you for the question, Ranking Member Duncan. A lot of this has to do with high-visibility enforcement programs. More and more States are participating and more local agencies are participating. I think with motorcycle safety, one of the key things States need to do is pass mandatory helmet laws for all riders. For seat belt safety, States need to pass primary seat belt laws. These are two critical lifesaving laws that we know will save lives.

I think it really comes down to the education, enforcement, and engineering, but high-visibility enforcement, be it Click It or Ticket, Drunk Driving Over the Limit, those programs have been very successful.

Mr. DUNCAN. All right, thank you very much.

Mrs. NAPOLITANO. Second round, Mr. Sires.

Mr. SIRES. I just have a quick question. When I went to high school, we had a very good driver's ed program, where they actually took you on the road, they had the cars and everything else. But we notice, due to the budget crunch, a lot of the schools are going away from that. Have you noticed that as a national trend in most of the States because of the problems with the budgets on the board of educations, that they are reducing their driver's ed program? Anyone.

Mr. PORTS. I am not sure I can answer from a total national standpoint, but we have seen that a lot of the States have moved from the high schools into the privatization of those schools for budgetary reasons, yes.

Mr. SIRES. Thank you. Anybody else? No? Thank you.

Mrs. NAPOLITANO. Yes, I will give her a chance to settle down, then I will ask some questions. You are going to have some questions, Ms. Richardson? I will let you mull it over.

One of the questions that I had mulling in my mind, and we have discussed this, the Click It or Ticket, but how effective is it in States without primary seat belt laws, or is it effective? Anybody?

Ms. SIGGERUD. Well, the Click It or Ticket campaign in general, you can see the before and after effect, where you see an increase in seat belt use in the wake of these Click It or Ticket campaigns in any State. But it is very clear that there is a strong correlation between the overall, year-long use of safety belts and whether there is a primary law in place; and, of course, the use is much higher in States that have the primary law.

Mrs. NAPOLITANO. Anybody else?

Mr. PORTS. Sure. Thank you, Madam Chairman, for that question, it is an excellent question.

We know that States with secondary laws average about 73 percent usage. Yet, States with primary seat belt laws average about 87 percent. We also know, through our statistics and data, that for

every percent increase, it is about 280 lives saved. That is a significant number. So the more that we can induce primary seat belt laws, and the more education we can have through the Click It or Ticket campaigns to increase awareness and get people to use those seat belts would be very, very beneficial.

Mrs. NAPOLITANO. What is preventing, in your estimation, the States from enacting primary laws for seat belt usage? Is it will-power, is it political? Are you tying some of the grant money to the ability to have a primary seat belt law?

Mr. PORTS. Through SAFETEA-LU we do have a primary seat belt incentive grant, and sometimes people say it may not be as effective because there may only be eight States that want the primary laws, but we look at it a little differently. Like I said, we are very dedicated to saving each and every life, and for every percentage point, as I just mentioned, 280 lives saved. So we tend to measure that statistic a little differently, that we are doing a good job and we are educating the population.

When you see numbers as high as 87 percent, that is 87 percent of the people who are wearing their seat belts. That is a significant amount of the population. There are some States that are over 95 percent at this point, and that is a terrific number. But a lot of that, as I mentioned, is enforcement. So enforcement is a key component. I know that Chris Murphy, we worked very closely with Chris on many issues. This was one of the issues that I am sure he would agree with us, that enforcement is a key component of this strategy.

Mr. MURPHY. Madam Chair, if I might add, in California, we actually wrote more seat belt citations when we were a secondary State than when we became a primary State, and I think that is kind of an interesting fact. Primary seat belt use and the use of seat belts, there is nothing more important. It takes two seconds to buckle up. A lot of States legislatures feel that it is giving up freedom. They don't want someone telling them what to do.

But, my God, primary seat belt laws will cure the disease of unsafe highways. It is something that will save lives overnight. In California, our seat belt use increased 10 percentage points when we passed our primary seat law in 1993. It has been a phenomenal law. In California, our seat belt use is 94.6 percent. We are the fourth highest in the Nation, and our goal is to hit 96 percent next year, so we have a lot of work to do. And the people that are not buckling up now are the very, very hard to reach, especially when you get in the 90 percent range.

Mr. OBERSTAR. Madam Chair, would the Chair yield?

Mrs. NAPOLITANO. Certainly.

Mr. OBERSTAR. In that context, what, then, has been the effect of improved seat belt use? That is a phenomenal number, I congratulate you on it, but what has been the effect in the traveled way in accidents? Have there been lower fatality numbers, lower injury numbers? That combined with air bags, can you enlighten us on that?

Mr. MURPHY. Thank you, Congressman. One of the interesting facts is that, in California, a very high number of fatal vehicle occupants are killed restrained. We have the highest in the Nation. So we know that seat belts are, as you know, 50 percent effective

in preventing death, and we have seen in California that our fatal occupant protection rate is the absolute highest. In other States—Oregon, Washington, Hawaii—they are at the top too.

So there is a definite correlation between seat belt use in fatal vehicle occupants and our observational studies, which tell us we are absolutely saving lives. In California, I believe our fatalities this year should be down the biggest number probably in seven or eight years. So we really believe that more people would have died in California had we not had primary seat belt use and if we would not have had such a high seat belt use rate.

Mr. OBERSTAR. What is your relationship between—if I may, Madam Chair—

Mrs. NAPOLITANO. Certainly.

Mr. OBERSTAR.—between alcohol and accidents and fatalities and then seat belt use? Which has the greater effect?

Mr. MURPHY. Well, we know about 40 percent of all fatal crashes are alcohol-involved. But if you look at a behavior that is easiest to change, it is buckling up.

Mr. OBERSTAR. Buckling up a lot better than driver education on alcohol use and driving?

Mr. MURPHY. I don't know that I would necessarily say that, but I think it is much easier to get someone to buckle up; they do it 16 times, it becomes a habit. A lot of people that are drinking now, the hard-core drinkers, there are other issues. So the seat belt is such an easy, easy fix.

Mr. OBERSTAR. Thank you.

Mrs. NAPOLITANO. Thank you.

Continuing with my line of questioning, to Mr. Ports, the GAO and the DOT Inspector General have raised questions with the inconsistency and the oversight of the State Highway Safety programs, and there have also been concerns over the consistency of the performance measures the agency uses in evaluating States' progress towards meeting its goals. There is a lot of talk about increased accountability in moving towards a more performance-based program. Consistent oversight and evaluation standards would be critical to establishing the accountability necessary to ensure States are meeting the national safety goals. And while it appears that the organization has made some progress over the last few years, the concerns remain.

What are you doing to address these issues raised by both GAO and the Inspector General?

Mr. PORTS. Thank you, Madam Chairwoman. First of all, I want to thank GAO for their help in this issue, and also the IG's office that you just mentioned. Again, we are very dedicated to saving lives and reducing injuries, and we look to anyone that can help, and we appreciate all your help in Congress, too.

In addressing this issue, we look at the management reviews, and we do those every three years. If a State is not making their performance criteria, then we work with them on an action plan. We also have the special management reviews that we are doing. And I believe the GAO's recommendation was to look at performance measures.

I can assure you and the rest of the Committee that we did just that. We looked at that issue from GAO and we are working with

GHSA, as well as the rest of the States. We have got about a dozen to 14 performance measures for the first time, and I believe Chris actually—we spoke a little bit about this earlier. He was very excited because the States have not had performance measures to look at before, and they too are excited about this process of being able to measure the performance of these grant programs.

Obviously, one of the difficult issues is the diversity of the local jurisdictions and their ability. As we heard earlier, they may not have the personnel or the ability, and the diversity of the issues within that community. So we are trying to work with all those to mesh those together to come up with these performance measures moving forward. We are very excited about that. We have looked forward to working with the States and GHSA, and, of course, finalizing the report to GAO and the IG and yourselves on the progress that we are going to be making in the next few years.

Mrs. NAPOLITANO. Thank you for that answer. One of the questions that I had in mind after reading some of the testimony is that many States have national safety plans. You do not. Can we expect one?

Mr. PORTS. We work very closely with the States and make sure that each and every State has a safety plan. That is really what we are to do. We are the clearinghouse and we are looking to work with the States because, quite frankly, the States know their State better and their local jurisdictions better than we do on the national level. So we look at it as a cooperative partnership between the national priorities and the State priorities. As I just mentioned with the performance measures, they have different situations that they are in, and we need to work very closely with them.

Mrs. NAPOLITANO. Thank you. I know Canada has one. I am not sure how effective their plan is, but I am assuming that they are doing very well.

There are other questions, I think, Ms. Richardson.

Ms. RICHARDSON. Yes, thank you, Madam Chairman.

A couple of questions. First of all, is there an overall signage plan for the safety for what you do on the highways? Do we have a signage plan?

Ms. SIGGERUD. Ms. Richardson, signage policy is really handled by the Federal Highway Administration, and there is in fact an entire manual—

Ms. RICHARDSON. Would you pull the mic up a little bit to you, please?

Ms. SIGGERUD. Absolutely. Sure.

So road signage and road marking is handled by the Federal Highway Administration, together with AASHTO, the organization of State DOTs, and there is an entire manual on what they call traffic control devices, which includes both signage, road markings, and traffic lights and that kind of thing.

Ms. RICHARDSON. But from a safety perspective, do you have a signage plan?

Mr. PORTS. No, we don't have a specific signage plan. However, what I can tell you, from a speed research perspective, NHTSA's role, what we are doing is we are working very closely with the States through the regional offices on speed management workshops. What we have found is that people in the communities, if

they think a speed limit is arbitrarily set, they don't abide by it. So through these speed management workshops and the behavioral research that we have done, we found that if you set the speed limits appropriately and then create the enforcement behind that, that you have much better speed control. So—

Ms. RICHARDSON. Okay, excuse me. I don't know if you heard what I said. I am talking about signage, not speed. Let me give you a few specific examples. I come from the California area, as the Chairwoman of this Committee is holding right now. I have seen on various highways where you see the sign Click It or whatever. You rarely see anything about driving in my blind spot, some of the key things that are just repeated accidents over and over again: driving in the blind spot, are your tires properly inflated. A lot of these things, with proper reminders of drivers, could reduce some of the incidences that we have.

So my question is do you have a signage program as a part of your safety program that could maybe incorporate periodically placing some signs that would be very good reminders to drivers to increase safety, besides the once every 10 years when they take the driving test?

Mr. PORTS. Okay, I maybe can more effectively address that question.

The States are allowed to use some of their grant funds to create signs if they decide that they would want to do it. For example, the seat belts, seat belt enforcement. I know that when I was in Washington State I saw quite a few signs that address that. So it is really up to the local governments to decide how they want to do that.

In my previous life as a State deputy secretary, we also had to abide by the highway beautification laws from, I guess, 1968, that try to reduce the amount of signages. One of the issues that we hear a lot in the communities is the overabundance of signs. So I think it is up to the local governments to decide how that issue would fare with their constituents.

Ms. RICHARDSON. Would you mind looking into some of the major causes of incidents of accidents and maybe doing a double check of that and seeing if there is something you may want to recommend or at least have the States to consider?

The other thing is the use of electronic boards. We recently, in California, had the whole thing of hands-free and no longer being able to use your cell phone, and the electronic boards that normally dictate the flow of traffic and what is happening ahead was utilized to announce that today is July 1st and this is now into effect.

So the other question I would have is to what degree are you, from a safety perspective, utilizing those electronic boards? Now, of course, you can't do them every day and every month, but there might be some coordination that could exist that, for key problems that you have; Click It, drunk driving, whatever it might be beyond the 4th of July on the holiday we should be talking about not doing drunk driving, it could be on the weekends.

So I would just urge you to evaluate some of the consistent problems that we are having and look at some of the existing signage that you have and how we could better utilize that to reach out to the drivers.

Mr. PORTS. We actually work with the States on our Click It or Ticket program and our Over the Limit, Under Arrest drunk driving campaigns to do just that. But we would be more than happy to look into that issue further and get back with you. That is a terrific idea.

Ms. RICHARDSON. Okay. Then I have 14 seconds. I understand my colleague asked a little bit about cell phones, and I was in another Committee markup. Has there been any discussion about out-ruling texting while people are driving nationwide? Has there been a discussion? Have you thought of that?

Mr. PORTS. NHTSA's position on any distraction is that we don't think anybody should do anything that would distract them from driving. However, we also need to keep in mind that we only have jurisdiction over what is in the vehicle from the manufacturer's standpoint. As far as a cell phone or texting with a cell phone that you bring into the vehicle, we do not have jurisdiction over that, so then it becomes a local jurisdiction decision.

Ms. RICHARDSON. Are GPS systems under that same?

Mr. PORTS. If the GPS system is part of the vehicle, from the manufacturer, we can address it. If it is brought in from your local store, then we cannot; we do not have jurisdiction over that.

Ms. RICHARDSON. Okay.

Thank you, Madam Chairwoman, for giving me the extra 50 seconds.

Mrs. NAPOLITANO. Thank you.

Mr. Oberstar. Chairman Oberstar, sir.

Mr. OBERSTAR. Thank you.

I appreciate the testimony of this panel and the documents you have submitted are very well done, thoughtfully considered.

Mr. Ports, I have a very particular interest in the national driver register. Actually, the idea of the national driver register was launched by our former colleague, Congressman John Rhodes, of Arizona, later the minority leader in the House. After he left Congress, I picked up on that initiative through a very personal involvement. A family across the circle from where we lived was devastated; their daughter, who had been a babysitter for our children, was killed when a truck crashed into their car pulled well off the traveled way up at Fall River, Massachusetts.

The truck driver, as it turned out, had a driver license revoked in one State, suspended in another, and was still able to get a driver license from a third State, driving and careless and reckless, and one life was lost. All the family had broken bones. As I visited them in the hospital, they said all we want, we can't bring Cami back, we just want to do something so that people like this can't get on the road again.

I looked up the national driver register and talked with then retired Congressman Rhodes, and in 1982 I was able to get language in the surface transportation bill to update the NDR, to have a pointer system operated by the State Association Motor Vehicle administrators. At that time drivers were being caught with multiple licenses, but there was a three-to four-week delay because all the information was mailed in from the respective State motor vehicle administrative offices.

With the pointer system and computers even in their, compared to today, infancy, we expected that there would be a substantial increase, and there was. But I am troubled by the IG report of significant delays in reporting from the various States into the NDR and then information back out to catch these bad drivers, for want of a better word, those who have manifestly demonstrated they shouldn't have another license. If they had it revoked or suspended or they have serious violations in one State, to try to get a license in another State, we shouldn't let those people out on the roadway when we have a mechanism by which to stop it. What attention have you paid to the NDR, to the report of the IG, and what plans do you have to take action?

Mr. PORTS. First of all, I appreciate that question. You are very knowledgeable, obviously, of this issue. Not only has NHTSA paid attention to this issue, I personally have paid significant amount of attention to this issue.

Mr. OBERSTAR. Good.

Mr. PORTS. I have been working very closely with members of AMFA when they brought some situations to us earlier in the year; I have been working with our folks in NDR. You had mentioned the CDL situation, where people were able to get different licenses in different States, and you are right, Congress passed a law and we prohibit that now. The issue that the IG brought up to us is that the States were not providing the information according to law and/or regulation within a 30-day time period.

We were glad the IG brought that to our attention, because it helped us recognize that there is a lot of turnover in the States through the MVA or DMV directors or administrators, whoever the top person is in that State. They did not even realize that they had that requirement. So we worked very vigorously; we got the information, mailed out the letters right away. Administrator Nason did that, mailed them out to every State, making sure that they were aware of the requirements to report within 30 days.

We are also working through that process with the judiciary, because part of the problem is, in the judicial process, they were not getting the information to the MVAs or the DMVs. So through this process of the IG making us aware of this situation, we were able to also work with the judiciary, thinking forward on other ways that may improve our successes.

Again, I mentioned, we were working with AMFA. We have a great relationship; we constantly talk. I am also going to be speaking at their national convention. So we are all over this issue personally and through NHTSA.

Mr. OBERSTAR. I am glad to hear of personal interest, that you are on top, that you are making those inquiries, you are talking to the association and on the NDR, but I would like some statistics updated on how many drivers are being caught applying for multiple licenses. How many have been intercepted, prevented? What is the effect of the computer-updated NDR? What additional steps should we take or are necessary to be taken? You have mentioned one, educate the State motor vehicle administrators on what their responsibilities are and on taking prompt and vigorous action. You mentioned earlier one important action we can take that imme-

diately saves lives is seat belts. Another is keeping the bad drivers off the road.

In this Committee room 20 years ago, I held hearings on the future of transportation in the post-interstate era. Among the demographic information submitted at the hearing was the projection that—this was 1987—that by the end of the decade of the 1990s, half of all drivers would be 50 years of age and older. That set off two tracks in my mind: one, more leisure time for driving, more opportunity to see the historical, cultural, archeological treasures of America, and I developed the National Scenic Byways from that; the second was a need for better signage, more visible signage, better retro-reflective material, better pavement marking material.

And those projections proved right, we are now well over half of all drivers 50 years of age and older. People living longer, driving longer. Older people are involved in fewer accidents, but they have a higher fatality rate because of fragility of bones as you age. What steps are you doing, taking to deal with the older driver phenomenon?

The Federal Highway Administration Byway, by the way, has been absolutely hopeless in their responsibility to promulgate a higher standard of retro-reflectivity, of pavement marking, shoulder striping, center striping, both yellow and white; and there is material out there that could be vastly better, especially on asphalt pavement in rain, and they have been hopelessly behind the curve on this. Now, NHTSA should be prodding them, pushing them, as a sister agency or brother agency—whatever you want to call it—in the department.

Mr. PORTS. To answer the first part of your question, we would be more than happy to get all that statistical data for you from the NDR system.

Mr. OBERSTAR. Have you seen the two volume work of the University of Minnesota Center of Transportation studies on the older driver? I suggest you get a copy of the two volume work and read through it, it is a very, very useful document.

Mr. PORTS. Well, to address the older driver part of our question, we are conducting research and looking at assessments as screening tools to predict how older drivers might likely survive or be involved in a crash. We are also looking at the long-term post-crash medical outcomes of those drivers. We are gathering the information. GAO asked us to be a clearinghouse, and that is exactly what we are going to do.

We are looking at fitness screening for other drivers by licensing agencies, family physicians, friends, and we are looking at all these other factors to determine how we can better address the vehicle side for older drivers to help them survive a crash or reduce injuries. So we are looking at those technologies also.

Mr. OBERSTAR. Are you doing that under the special designation we included in the current law? The very first word of that acronym, SAFETEA-LU, is safe; safe, affordable, etc. There is \$1,700,000 for research into traffic safety measures specifically directed at the older driver.

Mr. PORTS. That is correct, yes.

Mr. OBERSTAR. Is the work you are referring to done under that or under other provisions?

Mr. PORTS. Most of the work we are doing is done under that. We also have demonstration projects in Missouri, New Jersey, and Virginia that I am sure you are aware of to establish older driver coalitions and enhanced driver referral programs. So all of these things that we have going on at NHTSA are trying to address the older driver situation, both from the vehicle side, the safety side, and behavioral side.

Ms. SIGGERUD. Chairman Oberstar, if I may.

Mr. OBERSTAR. Yes.

Ms. SIGGERUD. You may be aware the GAO issued a report on this topic last year.

Mr. OBERSTAR. Yes.

Ms. SIGGERUD. And I can cover perhaps a little bit on the FHWA side.

Mr. OBERSTAR. You are next on my list.

Ms. SIGGERUD. Okay. So setting aside the retro-reflectivity issue, there is a manual of suggestions for improved signage and other improvements that would help older drivers in terms of navigating the roadway, navigating intersections, that type of thing. We did a survey and found that about half the States had adopted at least some of those recommended activities.

What was interesting from that is that we saw much wider benefits than just for older drivers, however. Any improvements to street signs, any improvements to being able to navigate an intersection safely helps the entire population, not just the population that was targeted, the older drivers.

Mr. OBERSTAR. Mr. Murphy, do you have any comments about retro-reflectivity marking material for pavement and signage? What is California doing about that? Goodness knows you have the biggest number of drivers and most miles driven and most vehicle miles traveled in California.

Mr. MURPHY. Mr. Chairman, unfortunately, that is not an area that I am familiar with. Our Department of Transportation, Caltrans, is very active in that area. We do have an older driver task force that is looking at that.

Mr. OBERSTAR. Pavement markings and retro-reflectivity of signage is not under traffic safety in California?

Mr. MURPHY. It is under CalTrans.

Mr. OBERSTAR. I will have to talk to Will about that, then, Will Kempton.

All right, there are lots of other questions I have, and I see Mr. Boozman has arrived.

I just want to ask about motorcycle helmet law. It is a dangerous area to walk into. Motorcyclists treasure their ability to get on the cycle and ride, as one of my friends said, and let the wind blow through my hair. Well, if I had hair, I might feel good about that myself. Hair is greatly overrated.

[Laughter.]

Mr. OBERSTAR. But your head is the first thing that hits the pavement in a crash, it is the heaviest single part of the body. I am reminded of a story in the State of Wisconsin that legislature enacted a motorcycle helmet law, and not long afterward the motorcyclists got up a petition, angry about the requirement to wear a helmet, submitted the petition to the legislature; they repealed

the law the next session. In the aftermath of the repeal, there was a motorcycle accident; a cyclist went right into a truck, head-first, and killed. He was the first one to have signed that petition. It is a tragic story.

What are you doing, if anything, about motorcycle helmets, at least in education, if not requirement?

Mr. PORTS. Thank you for that question. It is a very important topic, especially to Secretary Peters.

Mr. OBERSTAR. Yes.

Mr. PORTS. As you know, she is an avid rider. Matter of fact, she spoke today at Ride to Work Day, and spoke specifically about her crash and how her helmet is in her office as a reminder of how it potentially saved her life when she crashed.

Mr. OBERSTAR. A helmet saved mine on a bicycle.

Mr. PORTS. There you go. So she is all over this issue. Safety is second to none with her and Administrator Nason. As a matter of fact, what we asked Congress to do this year is to allow the States to use their 2010 monies from SAFETEA-LU, to allow the States to use that money for educating riders on helmet safety. That is one of the proposals.

Some of the other proposals that Secretary Peters has initiated is the labeling of the helmet. She wants to change the way that we label them, so that you can't tamper with them, but so that you can't have these helmets that would disguise the DOT label as a safety label. So we are looking at increasing labeling effectiveness. We are looking at education measures.

We also recognize that because of the heavy increase, 127 percent since 1997, that there are a lot of other factors. Alcohol is a factor. We are looking at peer-to-peer counseling with riders to try and take away the keys, much like we did in other campaigns. We are also looking at the rider's age, the endorsement training programs through the States, as well as working with the motorcycle community. We work very closely with the motorcycle community. We have got Packy back here, who is a good friend of mine from Maryland, and others that we work with in that community to help educate rider training, and they do a fabulous job with rider training and equipment.

Mr. OBERSTAR. Thank you.

Thank you, Madam Chair, and thank my colleagues for their patience.

Mrs. NAPOLITANO. You are very welcome, and very good questions, Mr. Chairman. You had a little story about the motorcycle issue. I was in California when it was enacted, I was in the State legislature, and my niece, a motorcycle enthusiast, wrote a letter to me really calling me you know what because I had dared to prohibit her ability to ride without a helmet. About four months later she was involved in a traffic accident and the doctors told her had she not been wearing the helmet, she would have been dead. She is still walking with crutches, and this is about six years since that accident. So I understand.

We went to the emergency hospitals and asked the EMTs and the doctors in charge about the fatalities, and 99 percent of them that replied indicated that if some of those who were involved in motorcycle accidents had been wearing a helmet, they could have

possibly survived. So that was a big motivator for us, because a lot of those folks did not have insurance and the taxpayer ends up paying for a lot of those services. And while it is something that is a freedom—my husband keeps saying if my hair flew, I would like to have a convertible—he has no hair—so it is a great saying, but truly I think it does save lives.

With that, I would like to turn it over to Mr. Duncan for his final question.

Mr. DUNCAN. Well, I know we need to get very quickly to the next panel. But because Mr. Poe earlier today got into the issue about the safety, or lack thereof, of these larger buses, I did want to state for the record that we do have a bill that I think we are going to mark up fairly soon that directs NHTSA to look at occupant protection systems and window glazing and roof strength issues and things like that, and issue a rule on these issues. They basically are consistent with NTSB recommendations on motor-coach safety.

But one last brief question I have. I pointed out earlier the dramatic difference between male and female accident and fatality rates, but, Ms. Siggerud, do you know if anybody has studied that? Do men drive more than women, on average?

Ms. SIGGERUD. Well, that is certainly true, men do drive more than women, yes.

Mr. DUNCAN. How much?

Ms. SIGGERUD. I don't have those statistics at my fingertips, I am sorry.

Mr. DUNCAN. Is it dramatic, is it a great deal of difference?

Ms. SIGGERUD. I am sure that is something we could probably look up and get back to you. I wouldn't want to opine on that unless I had a stronger sense of the statistics.

Mr. DUNCAN. All right. Okay, thank you very much.

Mrs. NAPOLITANO. Boys are more daredevils and they love speed. With that, I think—

Mr. OBERSTAR. If there are no other questions—

Mrs. NAPOLITANO. Yes, Mr. Chairman.

Mr. OBERSTAR. Just one final observation for our panel.

Mrs. NAPOLITANO. Yield to Mr. Chairman.

Mr. OBERSTAR. That is, in May, I traveled to Europe to address the 27 transport ministers of the European Union, at their annual conference. In preparation for that session, which was very interesting and informative gathering—I talked to them about transportation in the U.S. and our plans for investment in the future, but one of their keen interests is safety.

Now, the European Union has roughly 500 million people, about the same land area in its expansion as the United States. Five years ago they had 53,000 fatalities on their highways; last year they had 43,000 fatalities. They have made a dramatic drop in fatalities with enforcement, education, and better signage and dealing with alcohol and driving, and as in the case of Portugal, it is a crime in Portugal to use a cell phone while driving. They have cracked down on cell phone use, among other distractions.

We will send you information on this, we have a compendium of information that I think you at NHTSA should have, if you haven't paid attention to it, that GAO should do, and to look carefully at

the European practices. We ought to do at least as well. If we could have a 10,000 reduction in fatalities in the United States over the course of the next six-year bill, I would be thrilled, and families would be happy and there would be less grieving in this Country. We have got to do better and I tell you we are going to do better in the next transportation bill.

You can comment if you wish.

Mr. PORTS. Well, thank you, Mr. Chairman. Just to let you know, we are members of the Economic Commission for Europe and very involved with the WP.1 and WP.29 Committees. We share information with them constantly. A terrific example of that is ESC, electronic stability control. They invented the technology in Europe; we mandated it on our vehicles first. I personally spoke over in Europe to talk about the effects of ESC and how successful we were in mandating that terrific technology. Since that time, they are now mandating it. They just had a convention in Geneva where they took up a GTR, and they are now mandating that technology and following our lead, if you will.

So we work very closely with them in sharing information and we look forward to working with them in the future to reducing fatalities and injuries, as you mentioned.

Mr. OBERSTAR. Thank you.

Any other comments?

[No response.]

Mr. OBERSTAR. Thank you. Thank you, Madam Chair.

Mrs. NAPOLITANO. Thank you, sir.

With that, we would like to thank the witnesses and dismiss them. We are very grateful for your testimony, especially the GAO's report, which I found very enlightening. Thank you very much to all three of you. With that, you are dismissed.

We would like to call the second panel, Mr. Patrick James from the American Center for Van and Tire Safety, from Knoxville, Tennessee; Ms. Laura Dean Mooney, President, Mothers Against Drunk Driving, from Washington, D.C.; Ms. Jill Ingrassia, Managing Director, Government Relations & Traffic Safety Advocacy, AAA, in Washington, D.C.; Ms. Jacqueline S. Gillan, Vice President, Advocates for Highway & Auto Safety, Washington, D.C.; and the Honorable Bob Letourneau, New Hampshire State Senator, Motorcycle Riders Foundation, in Concord, New Hampshire.

Welcome. Let's see, we will start off Mr. James, Ms. Mooney, Ms. Ingrassia, Ms. Gillan, and Mr. Letourneau.

I believe Mr. Duncan has a couple of comments as an introductory to make to Mr. James.

Mr. DUNCAN. Well, thank you very much, Madam Chairwoman. In my opening statement, I already mentioned Patrick James and the very tragic situation involving his daughter, Lexie, and he will tell a little bit more about that. But I do want to welcome him. As I say, I have a little over 700,000 bosses, and Mr. James is one of my bosses, and we have been working with him both through my office and the Committee staff here, and I appreciate that very much. I am very impressed by the efforts that he has been making in regard to trying to make our highways a little safer. I want to welcome him to the Committee.

Unfortunately, I do have a meeting that I have to be at at noon, so I will have to leave in just a few minutes, but at least I will be here for Mr. James' testimony, and I want to welcome him here once again.

Thank you very much.

Mrs. NAPOLITANO. Thank you, Mr. Duncan.

With that, we will start with the testimony of Mr. James.

TESTIMONY OF PATRICK JAMES, AMERICAN CENTER FOR VAN AND TIRE SAFETY; LAURA DEAN MOONEY, PRESIDENT, MOTHERS AGAINST DRUNK DRIVING; JILL INGRASSIA, MANAGING DIRECTOR, GOVERNMENT RELATIONS & TRAFFIC SAFETY ADVOCACY, AAA; JACQUELINE S. GILLAN, VICE PRESIDENT, ADVOCATES FOR HIGHWAY & AUTO SAFETY; AND THE HONORABLE BOB LETOURNEAU, NEW HAMPSHIRE STATE SENATOR, MOTORCYCLE FOUNDATION, CONCORD, NEW HAMPSHIRE

Mr. JAMES. Madam Chairwoman, Ranking Member Duncan, and members of the Subcommittee, thank you for inviting me here today to speak to you. My name is Patrick James, and I am here with my wife Kelli and son Austin to talk with you about the deadly combination of 15-passenger vans, aged tires, and vehicles that are rollover-prone and lack occupant protection.

I am testifying before you one year to the day I last talked to my daughter.

Mrs. NAPOLITANO. She is a beautiful young lady, sir.

Mr. JAMES. She was excited about going to play with her old softball team in a tournament in Savannah, Georgia the following day. Twenty-four hours later, my family and friends' lives were changed forever. At 12:30, July 17th, 2007, we started receiving phone calls from friends, informing us that Alexis had been in an accident. The van's left rear tire had ample tread and looked like new, but it was 13 years old; and when it failed on the highway in South Carolina, the van rolled over and my daughter was ejected, even though she was wearing her seat belt.

I was pulling into the airport parking lot when I received a phone call from the ER doctor. He informed me my daughter Alexis, Lexie, James had died from heart failure. I remember sitting in my car, looking into the lobby of the airport, watching my son and wife, and knowing what I had to do, go tell her mom and brother that Alexis had passed away.

I never gave a second thought to the vehicle Lexie would be taking to their tournament. But I have spent the last 12 months learning everything I could about 15-passenger vans and tire safety, and what I found out stunned me.

These vehicles, which were first introduced in the 1970s and have a long history of single-vehicle rollovers accidents and lack general lack of crashworthiness. They are more prone to roll over than other vehicles and have higher rollover fatality rates than other vehicles. The odds of a rollover for a 15-passenger van increase more than 400 percent when the van is fully loaded. From 1997 to 2006, 15-passenger van crashes caused 1,090 occupant fatalities, and 534 of these people died in preventable crashes.

I have also learned that tires degrade over time and heat exposure, regardless of whether they have been used or have adequate tread. As early as 1990, some manufacturers began warning consumers about the use of older tires more than six years old. Last August, NHTSA submitted a report to Congress on tire aging that affirmed this warning. The agency cited statistics from a large insurance company showing that 27 percent of policyholders were from warm weather States—Texas, California, Louisiana, Florida, and Arizona. But 77 percent of the tire claims came from those States and 84 percent of those claims were for tires over six years old. According to a survey by Rubber Manufacturers Association, 16.4 percent of tires in service are six years old or older.

Most tires will wear out before they “age out.” But there are many circumstances in which older tires end up on vehicles like the one my daughter was in. The most common is the full-size spare that is put into service after many years in the trunk or under the car. Many 15-passenger vans are owned by community groups that don’t use them on a daily or even a weekly basis. If the mileage is low, the possibility exists that the tire could exceed their safe, useful life. Our small scale study that I did with my father-in-law showed that 23 percent of 15-passenger vans surveyed have tires that are 10 or more years old.

I didn’t know any of that before July 17th, 2007, but I have dedicated the last year to informing as many people as I can. In January, my family founded the American Center for Van and Tire Safety to warn the public about these significant dangers.

Perhaps the biggest lesson I have learned is that 15-passenger van rollover crashes are the most extreme and horrifying example of what is missing in our current rollover occupant protection regulations and that tire age is something most people, including tire service professionals, are not aware of.

In any crash, it isn’t just one thing that saves the driver or the passenger from injury or death. It isn’t one thing that keeps the crash from happening in the first place. It is a lot of elements working together. As I sit before you today, on July 16th, 2008, knowing everything I know, there are still many pieces missing in our Federal safety regulation to prevent and reduce the harm from rollover crashes.

We have taken a few steps forward. Many Federal safety standards for passenger vehicles and light trucks have been expanded to include new 15-passenger vans. The SAFETEA-LU bill of 2005 requires NHTSA to issue a report on tire aging. The agency has begun to upgrade the roof crush standard and, last month, it issued a consumer advisory that included some information about aged tires.

But the roof crush standard has stalled. The final tire aging report with rulemaking recommendations remains in the agency’s hands. It is still near impossible for the average person, or even a service technician, to read a tire date code or learn about the consumer advisory.

Our goal now is to push for improvements to 15-passenger vans, to eliminate aged tires from our fleet, and keep these issues in front of the public.

But my family and our organization cannot do it alone. So I would like to close my testimony with a little bit of automotive history and a challenge.

Forty-three years ago, almost to this day, there was another congressional hearing on the effectiveness of NHTSA's programs. The hearings continued over a week in mid-July. The witnesses included executives from all major American auto manufacturers.

The centerpiece of Ford Motor Company's testimony was a short movie demonstrating the crashworthiness of a 1961 Comet.

Picture, if you will, a grainy black and white film of a white sedan heading for a ramp. The ramp tips and the passenger side wheels and the Comet rolls over twice. The cameras inside of the car show the seat-belted dummies in the front bounced by the crash force, but otherwise unharmed. When the Comet comes to rest upright, the roof is intact and dummies are still in their seats.

I am not sure how many automakers today would show such a thing to Congress. I do, though, know in 1965 manufacturers were on the path to building vehicles that offered significant occupant protection in rollovers. But in the absence of regulatory standards, we have strayed far from the path. We have spent decades building vehicles that are more prone to rollovers instead of less, with weaker roofs instead of stronger, and restraint systems that do not work in the moment when our lives depend on it.

Lexie died before she grew up and made her own way in the world, but that does not mean she cannot leave a lasting legacy. With your help, it can be done and that will spare others the pain of knowing that a loved one died in a crash that they could have survived.

Despite the improvements to 15-passenger van design required by SAFETEA-LU, as of July 2006, there were still more than half a million 15-passenger vans on our roads. These vans are not equipped with the latest safety features. In fact, they are based on 30-year-old technology and they are used by schools, daycare centers, churches, and our elderly, our athletes and our choirs. It is not enough to launch another education and awareness campaign. These messages work their way slowly to the public's consciousness. Consider that NHTSA has already issued three consumer advisories warning the public about the dangers of 15-passenger vans, when Alexis died in one.

My challenge to the industry is this: help send these older vans and very dangerous vehicles to the scrap yard. Fifteen-passenger vans are the only vehicles in our fleet that cannot be used safely as intended. The irony would be merely absurd if the consequences of it weren't so tragic. Automakers should work to offer financial incentives to the community groups that need their vans, but lack the resources to replace them with safer transportation.

As for the regulators, NHTSA and their overseers, the honorable members of Congress, we ask you to conduct a national survey on aged tires in 15-passenger vans and warn consumers about this fatal combination. Ultimately, we would like to see expiration dates clearly printed on the outside sidewalls of every passenger vehicle or the use of current technologies like radio frequency identification to ensure a quick and easy read of a tire's age.

I urge you to get to work on a standard for a dynamic rollover occupant protection test. NHTSA is absolutely right to approach each rollover-related rulemaking as a part of a system. But the system is still missing a critical element: How will the driver and the passenger actually fare in a rollover? We need a standard that requires instrumented dummies to measure what happens to people in rollovers, not just metal and glass.

What good is it to test one side of the roof with a metal plate if the front seat passenger's head is going to be crushed in a crash along with the B-pillar? We need to know that the seat belts and whatever anchors them in a vehicle are going to withstand with impacts of a rollover, so that the 10-year-old girl in that seat belt is going to withstand it too. If we don't seek the answers to these questions, then what exactly are we accomplishing?

Manufacturers have resisted a dynamic rollover testing standard for decades. It can't be done, they say. And NHTSA has retreated. But if Ford can showcase its rollover testing to Congress in 1965, if GM can parade the \$10 million rollover testing center two years ago for the television cameras, then it can be done. And instead of fighting a standard, it should be supporting it and offering the agency the benefits of their years of such testing.

I know that protecting people in rollover crashes is a complex challenge, but Americans are actually good at solving complex problems. Sometimes I think we forget that. We are up to the challenge. It is time to do the right thing for Alexis, for all of us.

Thank you for the opportunity to speak to you today.

Mrs. NAPOLITANO. Mr. James, thank you for your very touching testimony. We totally agree that there needs to be some additional focus on tire safety, and maybe that is one of the things the NHTSA could add to their checkpoints and check tire wear, especially on vans carrying youngsters, and maybe address it in that way. Thank you, sir.

We move on to Ms. Laura Dean Mooney, President of Mothers Against Drunk Driving. Welcome.

Ms. MOONEY. Madam Chair, Ranking Member Duncan, and members of the Subcommittee, thank you for the opportunity to testify on the important topic of improving highway safety.

Madam Chairman, I am pleased to report that progress has been made to reduce drunk driving, with a 44 percent reduction in alcohol-related fatalities since 1980 when MADD was founded. This reduction would not be possible without the hard work of law enforcement, prosecutors, NHTSA, State highway safety offices, and others. MADD thanks them as well as you and the members of this Committee for your leadership on this issue. This truly has been a team effort.

For more than 16 years, I have worked as a volunteer to try and advance MADD's mission at the local, State, and national levels.

I became involved with MADD after my husband, Mike Dean, shown in this picture, aged 32, was killed in Texas by a drunk driver, leaving me to raise our eight-month-old daughter alone. Mike was killed on November 21st, 1991, when a drunk driver, going the wrong way on a Texas highway, met Mike's car head-on, killing him instantly.

The offender, who also died at the crash scene, had a BAC of .34 and was driving with an almost empty bottle of Jim Beam whiskey in the vehicle.

The crash happened exactly one week before Thanksgiving.

Madam Chairman, as you know, this must not be tolerated. In 2006, there were 13,470 fatalities involving a drunk driver or a motorcycle operator with at least a .08 BAC, and nearly half a million injuries due to alcohol-related traffic crashes. This costs the United States an estimated \$114.3 billion annually. The sad news is that while your efforts, along with those of MADD and other groups, have made drunk driving socially unacceptable, it is still tolerated.

Statistics collected by NHTSA should frighten all of us. Californians share the road with 310,971 drivers with three or more DUI convictions, and 44,210 drivers with five or more DUI convictions. Arkansas is home to the single worst drunk driving offender in the Nation, with one individual accounting for 40 DUIs.

In response to the ongoing tragedy of drunk driving, MADD launched the Campaign to Eliminate Drunk Driving on November 20th, 2006. The Campaign consists of four parts: support for high-visibility intensive law enforcement; full implementation of current alcohol ignition interlock technologies for all first-time convicted drunk drivers; exploration of advanced vehicle technologies through the establishment of a Cooperative Research Agreement between NHTSA and leading automakers that is assessing the feasibility of a range of in-vehicle technologies intended to prevent drunk driving; mobilization of grassroots support led by MADD and its more than 400 affiliates and our partners to make the elimination of drunk driving a reality.

Mr. Chairman, the time for widespread adoption by States of ignition interlock laws for all convicted drunk drivers has come. Anyone who violates the public trust 27 years after everyone knows the consequences has earned the right for an alcohol ignition interlock device to be installed on their car. Multiple studies on interlocks for both first-time and repeat offenders show a decrease in repeat offences up to 65 percent while the ignition interlock is on the car.

The more exciting results, however, are that alcohol-involved crashes are down 30 percent, injuries are down 32 percent, and fatalities are down 22 percent as a result of New Mexico's first offender program. Currently, only eight States have ignition interlocks for all first-time convicted drunk drivers. MADD uses the phrase "first time convicted" because the most conservative studies say that impaired drivers have actually driven drunk an average of 87 times before they are ever caught.

MADD also respectfully asks Congress to consider supporting increased funding for the 402 program and law enforcement in the next traffic safety reauthorization bill. We also believe increased Federal funding is needed to help with the Cooperative Research Agreement between the automotive industry and the Federal Government to support those new technologies that may eventually prevent a vehicle from being started by a drunk driver. MADD does not support any mandates of this new technology, and we believe it is best pursued on a voluntary, market-driven basis over the next decade.

Mr. Chairman, in closing, we wish to bring another important issue to the Committee's attention. There are some who continue to advocate lowering the drinking age back to 18. Data is unequivocal that the earlier youth drink, the more likely they are to become alcohol-dependent later in life and then drive drunk. Because of the 21 minimum drinking age, 25,000 families somewhere will never know the tragedy of the call that comes at 2:00 a.m. or, in my case, 7:15 p.m. that says their husband, son, daughter, or loved one is not coming home. I know this tragedy firsthand and I will work with MADD to continue the fight so that others will not experience my tragedy.

Mr. Chairman, again, I thank you and would like to thank the members of the Committee for the opportunity to testify. MADD looks forward to working with you and this Committee as you look to improve highway safety on our Nation's roadways. Thank you.

Mr. DEFAZIO. [Presiding] Ms. Jill Ingrassia, Managing Director, Government Relations & Traffic Safety Advocacy, of the AAA, Washington, D.C. Ms. Ingrassia.

Ms. INGRASSIA. Chairman DeFazio and members of the Subcommittee, thank you for inviting me here today to share AAA's perspective on roadway safety.

As you may know, AAA is a federation of independent motor clubs in the United States and Canada, serving over 51 million members. Our members are prime users of the Nation's transportation system; they are commuters, leisure travelers, pedestrians, and users of mass transit. So transportation plays a vital role in their lives.

In the time I have today, I would like to reinforce three messages from the more detailed testimony that I submitted for the record. First is the importance of developing a new vision and purpose for the overall transportation program and engaging the public in the lead-up to this next bill; second is the challenge of changing behavior and creating a traffic safety culture; and, finally, I will mention a couple of key recommendations for improvement.

As you prepare for the upcoming reauthorization of SAFETEA-LU, in addition to the challenges of actually writing a new bill, an added challenge will be getting the public's buy-in regarding the importance of transportation and what needs to be done. We have found in recent surveys that the public knows we need transportation improvements, but they don't believe current resources are being invested effectively and they are skeptical about paying more.

If we fail to understand the amount of mistrust the public has in our ability to deliver recognizable transportation improvements and be good stewards of the motorists' dollar, we will fail in reducing fatalities, fail in cutting commute times, and fail to grow our economy in ways that will keep us globally competitive. We simply won't have the public support and the resulting political will we need to get the job done.

Turning to safety, behavior change is arguably the greatest challenge we face in reducing the over 42,000 deaths and over 2 million injuries resulting from motor vehicle crashes each year. These figures should ring alarm bells nationwide for an urgent call to ac-

tion. Yet, our society seems to have come to accept this sort of death toll with motor vehicle crashes. This has to change.

An important step is changing the way we view traffic crashes. They should be recognized as a public health threat and treated as such. That means rethinking how we communicate traffic safety, as well as increasing our focus on collaboration between government agencies, transportation and health professionals, communicators, law enforcement, and criminal justice professionals to name a few.

A common theme in all of the traffic safety challenges outlined in my testimony is the need to communicate differently and develop new ways to affect behavior change. On many issues we have made progress on the traditional four Es: engineering, education, enforcement, and emergency services. We believe it is time to add four Cs: communication, coordination, collaboration, and culture. I mention culture because it seems the public is not getting the message about the impact of motor vehicle crashes. They are not changing behavior or demanding urgent action from elected officials.

To that end, the AAA Foundation for Traffic Safety has initiated a long-term research project to assess and hopefully, eventually, transform the traffic safety culture in this Country. To give you a sense of the challenge, our recent AAA Foundation survey of public attitudes, behaviors, and beliefs on traffic safety found that, to a large degree, Americans practice a “do as I say, not as I do” approach. They certainly agree that engaging in distracted behavior while driving is dangerous; yet, they admit to doing it, and they firmly believe the driver of the other vehicle is the real source of the problem.

Speeding, aggressive, impaired, and distracted driving, seat belt use and pedestrian/cyclist safety are just some of the issues that can benefit from an improved traffic safety culture. My written testimony includes perspectives on some of these issues, along with a focus on teen drivers, child passenger safety, and senior mobility.

I would like to finish by just briefly highlighting a couple of our recommendations for your consideration as you evaluate existing programs and look for new opportunities to improve transportation safety.

The first is data. We need to increase focus on results and metrics in order to properly evaluate current safety programs so that we invest in projects and programs that are truly having an impact. Data systems must be improved and money should be provided for necessary upgrades. Developing a common definition for serious injuries should also be a priority. Collecting data on deaths and serious injuries would provide a more robust metric and afford greater statistical validity of any analyses done.

The second is accountability. In order to move to a performance-driven outcome-based system, new performance metrics are needed. As you have already heard, NHTSA and GHSA are working to develop comprehensive performance metrics for safety programs, and we support this effort. Uniform performance standards will reveal to each State what its own data collection needs are and will help each State evaluate its current safety programs.

With respect to strategic highway safety plans, AAA encourages Congress to strengthen the requirement for States to develop col-

laborative strategic highway safety plans that are based on data. There should be oversight and evaluation to ensure the programs are actually accomplishing the defined goals, as well as requirements to update them. It is important that NHTSA and State highway safety offices be actively engaged in the development and evaluation of these plans.

In conclusion, AAA recognizes that the challenges before you are not easy. Making significant strides in safety will likely involve more than incremental improvements and providing a bit more money to carry on business as usual. We look forward to working with you on the important task of improving transportation safety in the next reauthorization bill.

Thank you for the opportunity to testify today, and I look forward to answering any questions you may have.

Mr. DEFAZIO. Thank you.

Ms. Jacqueline S. Gillan, Vice President, Advocates for Highway and Auto Safety. Ms. Gillan.

Ms. GILLAN. Good morning, Mr. Chairman. My name is Jacqueline Gillan and I am Vice President of Advocates for Highway and Auto Safety, and I appreciate the opportunity to testify this morning on such an important topic.

During the SAFETEA-LU authorization time frame, it is expected that more than 200,000 people will die on our highways and nearly 13 million more will be injured. This will occur despite the largest surface transportation investment in our Nation's history.

The number of highway deaths and injuries have essentially flatlined. In recent years, the National Highway Traffic Safety Administration has been unable to meet a number of its announced safety performance goals for reducing deaths and injuries. Instead of changing their plans and programs to meet the challenge, the agency simply moves the goalpost.

As this Subcommittee begins deliberations on the next reauthorization bill, let me briefly recommend some of the key areas where real safety gains can be achieved.

First, there is an urgent need for a primary enforcement seat belt law in every State. Today, only 26 States and D.C. have this law. Primary enforcement seat belt laws save lives and result in higher usage rates. SAFETEA-LU provided more than \$500 million in incentive grant money to encourage States to pass primary enforcement seat belt laws. In 2006, three States acted. In 2007, only Maine passed a law. And in 2008, we do not expect a single State to adopt a primary enforcement seat belt law. At this glacial pace, it could be 2032 or later before every State has this essential law.

In the area of impaired driving, we are not making sufficient progress. Many States still don't have some of the most fundamental and basic impaired driving laws. Additionally, we need to expand the use of technology to prevent impaired driving. Advocates strongly supports and is working with MADD to promote adoption of mandatory interlock laws for first-time offenders in every State.

One of the major factors contributing to overall highway fatalities is the dramatic increase in motorcycle deaths in the last 10 years. Since 1997, motorcycle deaths have more than doubled. Helmet use is the most effective measure to protect motorcyclists in a

crash from death and disabling brain injury. However, while motorcycle deaths are climbing, lifesaving all-rider helmet laws are under attack in State legislatures. In fact, more State legislatures considered repealing their laws than enacting them.

The increase in teen drivers on our roads is also a safety problem with a sensible solution. In 2006, about 8,000 deaths involved young drivers. Graduated driver licensing or GDL programs introduce teens to driving by phasing in driving privileges over time and in less risky situations. While many States have a few of the essential components of an optimal GDL law, only Delaware has all five recommended by Advocates. As a result, there is a patchwork quilt of teen driving laws across the Nation similar to the blood borders that existed in the 1970s and 1980s when States had different minimum drinking ages for alcohol.

Congress solved that problem with enactment of the 21 drinking age sponsored by the late Chairman of this Committee, Representative Jim Howard. This law gave States three years to adopt a uniform drinking law or be penalized Federal aid highway funds. As a result, every State complied. No State lost a single dollar of highway funds, and over 25,000 lives have been saved; a remarkable achievement. It is now time for Congress to step in to protect every teen in every State through the uniform adoption of optimal GDL laws.

There is also a pressing need to address the rapidly increasing population of older drivers. NHTSA estimates that by the year 2030 there will be 71 million drivers over 65 years old. Not enough attention is being given to adopting countermeasures in our highway and vehicle safety designs for older drivers in anticipation of this.

Now let me briefly turn to the issue of speed. In 2006, speed was a factor in about a third of all traffic fatalities. Congress may have repealed the national maximum speed limit in 1995, but it did not repeal the law of physics. It is important to note a 1984 study where the National Academy of Sciences documented that the speed limit lowered both the lives lost and also conserved fuel. Conditions may once again be ripe for Congress to consider a new version of the national speed limit law. One bill has already been introduced in the House and Advocates supports the reconsideration of a national speed limit as a policy option in order to save lives and protect our Nation.

In conclusion, many of the safety priorities outlined in Advocates' testimony today can be realized by expending minimal Federal dollars while achieving maximum gains in saving lives and preventing deadly injuries. There are really no acceptable excuses for delaying any longer the adoption of proven safety measures that will significantly reduce our Nation's death and injury toll, and we look forward to working with you during the consideration of reauthorization.

Again, Mr. Chairman and members of the Subcommittee, thank you for the opportunity to testify.

Mr. DEFAZIO. Thank you.

The Honorable Bob Letourneau, State Senator, New Hampshire.
Mr. Letourneau.

Mr. LETOURNEAU. Good afternoon, Chairman DeFazio and Mr. Boozman, members of the Highways and Transit Subcommittee. Thank you for inviting me here today to testify on behalf of American Motorcyclists.

For the record, my name is Senator Bob Letourneau, and I am here representing Motorcycle Riders Foundation, which is a coalition of States riders motorcycle rights organization and individual members representing about 275,000 motorcyclists. I also serve as the Chairman of the New Hampshire Senate Transportation Committee and am a member of the State Motorcycle Advisory Committee. In addition to that, I am a member of the Governors Motorcycle Safety Task Force of the New Hampshire Highway Safety Agency, and I have been a motorcycle rider for 41 years.

I want to thank Chairman DeFazio for his wisdom to hold this motorcycle safety hearing on National Ride to Work Day.

With reference to the 2010 funds, I appreciate the opportunity to provide your Subcommittee with some thoughts that the MRF has on highway safety programs administered by NHTSA. We hope that the next reauthorization not only keeps Federal section 2010 funds as a priority and expand this program exponentially.

Consider this: Under the current SAFETEA-LU law, the Federal Government spends about \$1.00 per motorcyclist per year. Then ask yourself, do you think that is enough? I want to give you some personal perspective as my experience as a member of the Motorcycle Safety Task Force of New Hampshire, whose responsibility it is to use these funds, is very positive.

We have been able to purchase new training bikes for our fleet, opening up new training possibilities for riders. We were able to purchase 220 new helmets to replace the current helmets, most of which were 18 years old. Additionally, we were able to provide the MSF Intersections training video to all our driver training schools, providing valuable education to our new drivers about the issues that motorcyclists face on the road daily. This was possible because of 2010 grants; your tax dollars truly at work.

In reference to accident prevention, past legislation that this Committee has crafted included language that specifically directs NHTSA to focus on accident prevention over occupation protection when addressing motorcycle safety. Accident prevention saves societal costs, reduces injuries, and reduces property damage. We ask that you continue to promote outcome-based accident prevention solutions.

Again, from my personal perspective, on July 5th, 2008, putting my money where my mouth is, I took and passed the advanced Skilled Rider Course because I know it saves lives, and, yes, I did learn that I have rider skills that I was not using properly. However, more importantly, when people ask me if I have taken the course, I can answer yes, and it works.

HOV lanes. When considering future highway design, it is important to include motorcyclists on HOV lane access, as this Committee has done in the past. For that, 6 million American motorcyclists thank Congress.

Motorcycle Advisory Council. Also included in SAFETEA-LU was language that created an advisory council to provide the wisdom to the Secretary of Transportation on motorcycles and the design of

the highway infrastructure. I am pleased to tell you the initial two-year charter passed by Congress has been so successful that the Secretary recently decided to extend the Council for another two years.

Another personal note. In light of increased motorcycle fatal accidents during the 2005 riding season, Representative Packard, who was the Chair at the time of the House Transportation Committee, and myself, as Chairman of the Senate Transportation Committee, requested that the Governors Highway Safety agency form a task force to come up with solutions to this increasing problem. You will see from the document that I have provided the Committee that in light of augmented motorcycle registrations, we were able to find ways to decrease the fatality problem through awareness, improved rider education programs, and new legislation, which both Representative Packard and myself introduced and passed.

Green vehicles. We ask Congress to promote motorcycling as a means of reducing energy consumption and reducing traffic congestion.

International efforts. Last month, the MRF participated in a meeting held by the Organization for Economic Cooperation and Development and its 30 member countries in conjunction with the International Transit Forum and Joint Transportation Research Centre in Lillehammer, Norway to develop a global list of the top 20 motorcycle safety priorities. You have our list of that, and priorities one, three, and four all stress proper riding training. Priorities six and seven emphasize awareness programs. Two areas that the American motorcycle rights community has been promoting for decades.

And last but not least, rising fatalities. According to the June 2008 survey of State motorcycle safety programs by the Governors Highway Safety Association, motorcycle registrations have more than doubled since 1997 and new motorcycle sales have quadrupled since then. Surely, when the population is increased, one must expect the crash numbers to climb as well. It is simple statistics.

The same report stated that this explosion of motorcycle sales from 356,000 in 1997 to 1.1 million today is crippling the rider education programs across the Country. Twenty-nine States and D.C. have capacity problems and often have wait times for training for more than 12 weeks. This is another reason why Congress needs to invest more money in motorcycle rider education through Section 2010 grants.

One last personal observation, in New Hampshire, during our first 15 years of our motorcycle education program, we trained over 23,000 riders. Only one of those 23,000 riders was involved in a fatality. Education is the key to successfully reducing motorcycle fatalities, and our experience is proof positive.

On behalf of the MRF and the American motorcyclists, I thank you for this opportunity to present our concerns and views to you in considering safety issues in the development of the National Transportation System, and I welcome any questions from the Committee.

Mr. DEFAZIO. Thank you.

I will turn first to Mr. Boozman who wants to recognize a couple of witnesses and has a quick question. We are going to try and

move quickly through questions because we won't have time to come back.

Go ahead.

Mr. BOOZMAN. In the interest of time, Mr. Chairman, we would like to submit some questions potentially, but I want to thank Mr. James and Ms. Mooney for coming and giving your testimony. It is very difficult, and yet it really is very helpful to hear personal stories.

My wife was in an accident a month or so ago, and my daughter. It was a very complicated intersection. She broke several ribs, had a collapsed lung and stuff, but it was really the Lord taking care of her in the sense that she could have been injured much, much worse.

So this is something that we are all very, very aware of, and we really do appreciate your advocacy, and it really does make a big difference. Thank you to all the panelists. We appreciate your being here.

Mr. DEFAZIO. Thank you and I likewise met with Mr. James last fall in my office and Ms. Mooney. Sometimes maybe in our lives the only we can make sense out of horrible tragedies is to try and prevent that from happening to other people, and we appreciate what you are doing there.

A couple of quick questions, Mr. James. How would you envision a national system for endorsement on driving 15-passenger vans? Have you kind of thought how we would establish the standards?

I mean, generally, we have left that issue to the States to some extent, although are some Federal standards about commercial truck drivers, for instance.

Mr. JAMES. Very similar, like motorcycles, there, you have to have an endorsement to drive a motorcycle. If we do this, it will be the awareness that there is 500,000 of these vans without even the latest technology on the road, that everybody agrees that have rollover, very high rollover risk.

We have been using the motorcycle endorsement as our example that we would like to see.

Mr. DEFAZIO. So, essentially, we would just set a national objective, perhaps provide some small amount of funds in the next authorization to the States and say, you have to develop a system to certify the people. We wouldn't try and have it as a Federal standard or license but just leave that up to the States to determine what additional training or testing would be necessary.

Mr. JAMES. Correct.

Mr. DEFAZIO. Okay. All right. Thank you.

Ms. Mooney, I have a question. I don't understand about the \$60 to \$80 a month to monitor the interlock. Why does it cost that?

Ms. MOONEY. Well, the offender has to pay all the costs, the initial cost to acquire the interlock device, about \$150 to \$200. Sixty dollars a month is to maintain the device. They actually have to drive back to the facility where it was installed and have it calibrated and dump the data that it has collected. So that is where the cost comes in.

Mr. DEFAZIO. Isn't technology moving? I mean where we have technology, we can monitor prisoners remotely with ankle bracelets. It just seems to me like a high recurring cost. I mean is there

a technology breakthrough coming where we can remotely monitor these devices and not have to bring them in?

Do they have problems with failure or why do they have to be recalibrated so frequently, monthly, it seems?

Ms. MOONEY. Well, I guess we would have to have an ignition interlock provider that knows the technology a little more exactly than I do.

But our feeling is \$60 to \$80 is not very much really, a month, when you think about that is the cost of one drink a day.

Mr. DEFAZIO. No. I understand that, but it just kind of stuck out to me. I am thinking put the devices in and make it so they can't circumvent them, but I was just wondering about the recurring cost with it. In many cases, it is probably going to be borne by taxpayers since a lot of the people may not have the wherewithal to pay that.

Ms. MOONEY. I was just reminded it also prevents the tampering too if they go in and see that it is actually still installed in the car, and they are able to check it for various things. That is my understanding, limited understanding of that.

I think an interlock provider would be able. I would be happy to get that information and get that to you.

Mr. DEFAZIO. Yes. No. I mean I think the devices are an excellent way to prevent reoccurrence.

Now why so few States have adopted it for first time offenders? Why? What is the resistance you are sensing or hearing?

Ms. MOONEY. Perhaps it is mostly education, educating State legislators about exactly what an interlock device is and what the purpose of it is. Even law enforcement officers, judges don't know very much about them from my personal experience in visiting with those types of folks.

Once they see it, they usually get it. They usually understand this is something that is really effective. It is going to allow the offender to keep going to their job and drive their kids to school. They simply can't drive drunk.

Primarily education and having them understand what it does.

Mr. DEFAZIO. Okay. Anybody else want to comment on interlocks?

All right. I will see if other members have questions because we don't have much time. I don't know who was here first.

Mr. Brown?

Mr. BROWN. Thank you, Mr. Chairman, and I really do appreciate the witnesses coming and giving their testimony.

I was just going to ask one question, maybe make a comment to the Senator, Mr. Letourneau.

I know that in South Carolina, we just passed a bill where when you come to a traffic light on a motorcycle and it doesn't trip the mechanism. So the State Legislature actually now allowed the motorcycle to proceed across the red light if there is nobody coming. I just wondered if that has been an initiative for you all.

Mr. LETOURNEAU. I did see that legislation, and there is an issue with some traffic lights. I know as a rider I have run into that problem myself. I am just a little leery of going through any red lights. On a motorcycle, you don't have much protection.

Mr. BROWN. Well, you certainly drive at your own risk, and yet you can tell whether the traffic is coming or going or not. I know that we had a lot of folks that were just waiting at the traffic light for a car to come up, so they could trigger it to get access to the change of the light.

But I didn't know, since you rode motorcycles, whether that would be of any interest to you or not.

Anyway, thank you, Mr. Chairman. I know we have votes on the floor, and I will yield back.

Mr. LETOURNEAU. Thank you.

Mr. DEFAZIO. Mr. Poe.

Mr. POE. Thank you, Mr. Chairman.

I have some written questions I am going to have you answer, hopefully. But, Mr. James and Ms. Dean Mooney, thank you for especially your testimony.

My grandfather was killed by a drunk driver when he was working with the Texas Highway Department, laying asphalt on now Interstate 35. Then my eight year old, when Kim was eight, was hit by a drunk driver riding her bicycle home from school and never rode a bicycle again, even to this day.

Specifically, Ms. Dean Mooney, I want to thank you and MADD for what you have done. There are thousands of people today who are alive because of MADD, thousands. You have done a wonderful job in the last 20 years. We cannot forget that.

I want to question you about interlock devices. I used them as a judge. It is the law in States, but judges don't follow the law. They don't enforce the law and require interlock devices, and so I have two questions for you. You can submit an answer in writing.

Do you think that if we required that first time offenders have an interlock device, of drinking and driving, and some stipend to States that enforced that, if that would help?

Second, what do you think about repeat offenders, the judge ordering the confiscation of the license and registration of the vehicle, the license plate and the registration of the vehicle for a period of time, if that would help in solving this problem or not?

So those are my questions. I would like some written answers.

Mr. Chairman, I will yield back the balance of my time.

Mr. DEFAZIO. Thank you. I would also be interested in the answers to those questions because I think particularly on the first one, maybe the Feds need to provide a little more direction on the first time offenders particularly States. I think you suggested 0.08.

Ms. MOONEY. Thank you, Judge Poe. We will make sure we get those to the Committee.

Mr. DEFAZIO. Thank you.

Mr. Chairman, there are some votes coming up, but if you have a couple of questions that would be great.

Mr. OBERSTAR. Well, thank you.

I thank this panel very much for your testimony. I had to be out of the room while you were delivering, but I did read through your submissions prior to the hearing.

I want to join with Mr. Poe in complimenting MADD for their service to the public. He put it very well. People are alive today because of the work of MADD, and we need to pursue those goals,

those initiatives that MADD and all the other members of this panel have advocated and raise our standard and save more lives.

I said it, Mr. Chairman, before the previous panel, while you were at the aviation issue, that the European community has reduced fatalities from 53,000 a year to 43,000 in 5 years. We ought to be able to do as well in the United States through a combination of initiatives that the European community has undertaken.

Certainly with half of our fatalities associated with alcohol, we ought to attack behavior.

We have done a good job, I believe, in this Country of changing the traveled way, removing tank traps such as those huge concrete posts for lights, highway lighting systems. You would drive into it, and the driver and passenger are killed. We now have breakaway light poles.

The Jersey barriers, instead of running into a concrete wall or running through something and going into the opposite traveled way and killing more people, we have the Jersey barrier.

We have the bridge piers that are angled away from the traveled road surface itself so that people aren't driving into those.

The guard rails that are now angled into the ground, before that work was done, our Committee found that drivers crashed into the end of the guard rail which would slide over the hood of the car and decapitate driver and passenger.

But we haven't done as well—we haven't done as well—on the behavioral side, on the passenger side, which is why I questioned the previous panel on national driver register. We need to get bad drivers off the highways. We need to keep people who are impaired, not handicapped but impaired by alcohol or drugs, off the traveled roadway.

I know you addressed this previously, Ms. Ingrassia, Ms. Gillan. We had quite a debate in the previous transportation bill as well as in TEA-21 over whether incentives for States to comply with 0.08 or penalties for noncompliance were better. What is your experience?

We wound up with incentives. You get a bonus to the State if they establish that and for seatbelt compliance.

Ms. GILLAN. Mr. Chairman, there is no question that sanctions work and that incentive grants without sanctions are not as effective.

In my testimony, I talked about the primary seatbelt incentive grant program. Only three States passed a primary enforcement seatbelt law in 2006. Maine did it last year. There will be no State this year that will pass a primary enforcement safety belt bill.

When we look at the 21 drinking age, when we had blood borders and the former Chairman Jim Howard passed that legislation, all States within 3 years had a 21 drinking age, no State lost a single dollar, and 25,000 lives have been saved.

It worked on 0.08. It worked on zero tolerance BAC laws for youth, and that is the approach we should consider in the next bill when we look at the lack of some of the most fundamental safety laws in the States such as primary enforcement, motorcycle helmets, teen driving laws.

Advocates is not ashamed to say that the research shows that sanctions work and that that is an approach this Committee has

to look at if we ever want to make a significant drop in the number of deaths and injuries on our highways.

Mr. OBERSTAR. That was my view in the previous Congress. I see time has expired on the vote on the House floor.

I have to run. I know other members have their questions.

Mr. James, I know you have had a very personal, searing experience, and I sympathize with you, offer my heartfelt prayers and solidarity with you in your experience.

I am so appreciative of all the work that MADD has done, that the Advocates have done.

You heard our hearing previously on big trucks and small cars. We are going to do a much bigger job, a much better job, a much more intensive focus on highway safety in the next transportation bill. I assure you that.

Thank you very much for your participation.

Mr. DEFAZIO. The Committee stands adjourned.

[Whereupon, at 12:00 p.m., the Subcommittee was adjourned.]

Subcommittee on Highways and Transit

**Hearing on “Improving Roadway Safety: Assessing the
Effectiveness of NHTSA’s Highway Traffic Safety Programs”
Wednesday, July 16, 2008**

Statement – Congressman Jason Altmire (PA-04)

Thank you, Chairman DeFazio, for calling today’s hearing to discuss the issue of roadway safety. I would like to begin by thanking the witnesses who have joined us here today. Their professional and personal experiences should prove invaluable to this Committee as we continue to prepare for next year’s reauthorization of the Safe, Accountable, Flexible, Efficient Transportation Equity Act.

Each year, tens of thousands of Americans are killed – and millions more are injured – in motor vehicle crashes. Unfortunately, many of these deaths and injuries could have been avoided. A report released by the National Highway and Traffic Safety Administration states that in 2006, 51 percent of individuals killed in motor vehicle crashes were not wearing their safety belt. The report goes on to state that over 40% of individuals killed in 2006 died in alcohol-related crashes.

While these statistics are shocking, it is important to note that we have made progress in reducing the number of deaths and injuries on our roadways. From 1966 to 2006, the number of fatalities per 100 million vehicle miles traveled (VMT) was reduced from 5.5 to 1.42. This reduction points to the fact that past efforts have been effective. we must continue to supports ways to reduce the number even further.

Chairman DeFazio, thank you again for holding this hearing today. I look forward to hearing from each of our witnesses.

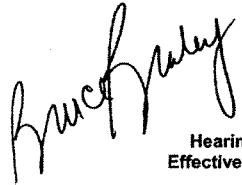
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CHAIRMAN, CONTRACTS AND
TECHNOLOGY SUBCOMMITTEE



**Congress of the United States
House of Representatives
Washington, DC 20515**

July 16, 2008

**Representative Bruce Braley (IA-01)
Statement for the Record**

**Subcommittee on Highways and Transit
Hearing on "Improving Roadway Safety: Assessing the
Effectiveness of NHTSA's Highway Traffic Safety Programs"**

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Thank you, Mr. Chairman, for holding this hearing today on the effectiveness of the National Highway and Traffic Safety Administration's (NHTSA) highway safety programs in addressing roadway safety. An evaluation of our roadway safety programs is very important as we prepare for our next reauthorization of the nation's federal transportation programs.

With human error causing 93 percent of motor vehicle crashes, behavioral safety programs are critical to helping bring down the number of crashes and related fatalities. NHTSA's behavioral highway safety programs represent a partnership between states and the federal government, as the programs provide grants to states to implement highway safety projects. While states are charged with carrying out the safety programs, the state's plan must be approved by the Secretary, and there is a certain amount of oversight by NHTSA.

I am supportive of many of the goals of these NHTSA programs, including expanding seatbelt usage, improving child passenger protection education, decreasing drunk driving, and decreasing reckless driving and speeding. I am also hopeful that the Congress, the Department of Transportation, and the states can find ways to decrease roadway accidents and make our roads safer. However, I also hope to ensure that all DOT-approved plans are truly focused on

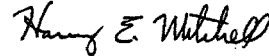
driving safety, and that funds intended to decrease roadway crashes and fatalities are not being diverted to unrelated programs..

Like many federal-state partnership programs, we must also ensure that room is made for states to implement stricter and stronger safety standards than the minimums established by the federal government. While oversight of federal funds through a federal approval process is essential to maintaining the integrity of these safety programs, we must make sure that the Department of Transportation is not the sole arbiter as questions arise regarding the effectiveness of NHTSA programs. It is essential to our roadway safety that states be allowed to implement tougher standards if they choose, and that a fair, objective judicial process is utilized if questions arise regarding state and federal safety standards.

I am hopeful that this hearing results in a better analysis of the challenges faced in decreasing roadway accidents and making our roads safer. I also look forward to continuing to take a comprehensive look at roadway safety, from prevention of accidents to the laws on the road to the remedies provided when accidents occur.

Thank you, Mr. Chairman.

Statement of Rep. Harry Mitchell
House Transportation and Infrastructure Committee
Subcommittee on Highways and Transit
7/16/08



Thank you, Mr. Chairman.

Today we will discuss the effectiveness of the National Highway and Traffic Safety Administration's (NHTSA) highway safety programs in addressing roadway safety.

Highway safety is a critical issue. According to the National Surface Transportation Policy and Revenue Commission, 94 percent of fatalities and 99 percent of injuries on the Nation's surface transportation system result from highway travel.

What is particularly upsetting is that according to the Commission, 93 percent of all motor vehicle crashes are due to human behavior.

NHTSA's behavioral highway safety programs aim to reduce human error by targeting issues such as seat belt usage and drunk driving.

The need to reduce drunk driving is critical. Arizona has one highest rates in the country of fatalities due to drunk driving accidents, and according to NHTSA, this rate has only continued to climb despite an avid awareness campaign.

I look forward to hearing more from our witnesses on what we can do to reduce drunk driving accidents and increase highway safety.

I yield back.

STATEMENT OF
THE HONORABLE JAMES L. OBERSTAR
HEARING ON IMPROVING ROADWAY SAFETY: ASSESSING THE EFFECTIVENESS OF THE
NHTSA'S HIGHWAY TRAFFIC SAFETY PROGRAMS
COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE
SUBCOMMITTEE ON HIGHWAYS AND TRANSIT
JULY 16, 2008

- I want to thank Chairman DeFazio and Ranking Member Duncan for holding this hearing on such a critical issue as the safety of our nation's roadways. Addressing this issue will be a top priority for this Committee in the authorization of the next surface transportation bill.

- Every year tens of thousands of Americans are killed on our nation's roadways. However, the costs of these numbers cannot be measured simply in dollars and cents or statistics. These numbers represent brothers and sisters, sons and daughters, mothers and fathers, and friends and family members.

- Today, this Committee will hear from a number of witnesses about the effectiveness of NHTSA's various safety programs in addressing this problem. To be able to truly assess this progress, we must be realistic about the current state of safety on American roads.

- In 2006, 42,642 people lost their lives in motor vehicle crashes. That is the equivalent of 82 fully loaded 747s crashing. If that many people were dying

annually in plane crashes, the public would be terrified and outraged. Yet, for too long we have accepted traffic fatalities as a regular occurrence.

- I strongly favor the vision of making roadway safety a priority, and preventing the tragic loss of life and injuries that occur every day on our roads.

- In SAFETEA-LU we took a number of steps to address issues related to safety in our federal transportation policy. Looking forward to the next surface transportation program authorization, we must do even more on the issue.

- Our nation is not alone in facing the terrible consequences of roadway fatalities. This issue impacts every nation; rich or poor. Our partners across the Atlantic have begun to take serious steps towards addressing the problems that contribute to roadway safety, and we here in the United States must tackle this issue with the same level of commitment as the Europeans have shown.

- In 2001, the European Commission issued its Transport Policy White Paper. Improving road safety is a major aspect of the issues addressed in the White Paper. The report highlights the conflicting needs for greater mobility and greater awareness regarding road safety in the European Union.

- The Commission set a goal of cutting the number of roadway fatalities in half by 2010. At the time the White Paper was published in 2001, there were 50,394 deaths on European Union roads annually. In 2004 that number was reduced to 43,000, a decrease from 112 fatalities per million inhabitants in 2001 to 95 fatalities per million in 2004.

- A look at data for individual member states demonstrates the impact of placing a priority on safety.
 - France has seen a decrease in fatal road accidents of 12 percent from 2005 to 2006 and a decrease of 5 percent in injuries from accidents. Since 2001—when the EU set its goal of halving road fatalities—until 2004, France has seen a decline in fatalities of over 30 percent.
 - Portugal saw a 22 percent drop in road accident deaths and a 6 percent decline in injuries from 2005 to 2006. One factor behind this was a newly passed law making it a crime to use a cell phone while driving.

- Over this same period, the U.S. fatality rate has remained relatively flat. In 1990, our nation's roadways saw 44,599 roadway fatalities. In 2000, that number was 41,945. However, by 2006 we saw that number reach almost 45,000.

- Clearly we as a nation need to make a new commitment to saving lives and sparing countless individuals and their loved ones from the pain that comes in the wake of traffic crashes.

- Addressing this troubling number of fatalities on our roadways will require a comprehensive approach to highway safety. We as policy makers must work to ensure that all aspects of roadway safety—vehicle safety, human factors, and roadway environment—remain a priority as we rewrite our nation’s surface transportation programs.

- The Subcommittee on Highways and Transit will continue to conduct a series of hearings throughout this year and into 2009 to examine policy choices and develop legislation to build the future multimodal surface transportation system. Evaluating the safety needs of the system, the programmatic structure necessary to meet those needs, and institutionalizing the mechanics for increased accountability will be fundamental to that process.

- I look forward to hearing from the witnesses and members of this Subcommittee on this critical issue.



**ADVOCATES
FOR HIGHWAY
AND AUTO SAFETY**

**STATEMENT OF JACQUELINE S. GILLAN
VICE PRESIDENT
ADVOCATES FOR HIGHWAY AND AUTO SAFETY**

**IMPROVING ROADWAY SAFETY:
ASSESSING THE EFFECTIVENESS OF NHTSA'S
HIGHWAY TRAFFIC SAFETY PROGRAMS**

**BEFORE THE
HOUSE SUBCOMMITTEE ON HIGHWAYS AND TRANSIT
COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE**

July 16, 2008

Good morning. My name is Jacqueline Gillan and I am Vice President of Advocates for Highway and Auto Safety (Advocates) a coalition of consumer, health and safety and major insurance companies and agents organizations working together to support adoption of laws and programs to reduce deaths and injuries on our highways. Advocates is a unique organization. We focus our efforts on all areas affecting highway and auto safety – the roadway, the vehicle, and the driver. Founded in 1989, Advocates has a long history of working with the House Committee on Transportation and Infrastructure advancing public health and safety in surface transportation legislation. We appreciate the opportunity to testify at this morning's hearing addressing strategies and solutions for achieving safety gains that will reduce deaths and injuries on our highways.

Although our nation's highway system has created mobility opportunities that are the envy of the world, it has resulted in a morbidity and mortality toll that is not a source of pride. Motor vehicle crashes are the leading cause of death for all Americans between the ages of 4 and 34. Every day 117 people are killed on America's highways and 7,000 more are injured.¹

During the five-year authorization time frame of the Safe, Accountable, Flexible, Efficient, Transportation Equity Act: A Legacy for Users (SAFETEA-LU), it is expected that more than 200,000 people will die on our highways and nearly 13 million more will be injured. This will occur despite the largest surface transportation investment in our nation's history.

Any progress in achieving significant reductions in motor vehicle deaths and injuries will require Congress to address these realities. Currently, too many states have too few of the most successful, cost-effective traffic safety laws that have been proven to save lives, prevent serious injuries and reduce the expenditure of billions of dollars in medical, government and other economic costs. Additionally, federal motor vehicle and truck safety standards that have the potential to save thousands of lives year after year continue to languish at the U.S. Department of Transportation (DOT) or are issued with only minimal, weak requirements. At the same time, highway deterioration and potential catastrophic bridge failures across the country threaten the safety of motorists while trucking interests continue to prod state legislatures and Congress to again increase the size and weight of big trucks.

Highway Safety is Stuck in Neutral

Let me begin by providing a brief overview of where we are and where we are headed in efforts to address this public health epidemic.

In 2006, the last year government figures are available, 42,642 people were killed in motor vehicle crashes and over 2.5 million were injured at a cost to society of more than \$230.6 billion. This amounts to a "crash tax" of about \$820 for every person in the United States.²

More than half of passenger vehicle occupants killed in 2006 were unrestrained, unchanged from 2005. Yet, only 26 states and the District of Columbia have enacted primary enforcement seat belt laws.³

Motorcycle deaths in 2006 increased for the ninth year in a row to a total of 4,810, an astonishing 127 percent increase from 1997.⁴ Helmet use is the most effective measure to protect motorcyclists in a crash from death or disabling brain injuries. At present, however, only 20 states and the District of Columbia require all motorcycle riders to wear a helmet.⁵ This year, 12 states attempted to repeal this lifesaving law while only four states considered, yet failed, to enact an all-rider helmet law.

The map attached to this testimony indicates how few states have adopted both life-saving primary enforcement seat belt and all-rider motorcycle helmet laws.

In 2006, 41 percent of all fatal crashes were alcohol-related. This has essentially remained the same for the past 13 years.⁶ Despite strong public opinion in support of tough measures to get drunk drivers off our streets and roads, many states still lack open container and repeat offender laws that meet federal requirements, as well as other basic impaired driving laws.

In the past 10 years the number of truck crash deaths has remained essentially the same, about 5,000 fatalities each year. Ineffective public relations campaigns, flawed research, weak safety rules and inadequate enforcement efforts have all contributed to the lack of progress by the Federal Motor Carrier Safety Administration (FMCSA) to achieve significant safety gains. The agency continues to ignore Congressional mandates, issue flawed safety regulations that are routinely overturned in scathing court decisions, and fails, by any measure of success, to achieve its safety goals.

Driver Demographics are Changing, Safety Laws and Regulations Are Not

In the next reauthorization, Congress must address changing surface transportation priorities. There is also an urgent need to acknowledge and adapt our laws and safety regulations to the changing profile of highway users, particularly more teens and older citizens who will be driving.

Approximately 8,000 people were killed in crashes involving young drivers ages 16 to 20 in 2006. Although graduated driver licensing (GDL) laws have been proven to be effective in saving lives, only the state of Delaware has all five elements of an optimal teen driving law.⁷

Older citizens are overrepresented in motor vehicle crashes as drivers, vehicle occupants and pedestrians. Older vehicle occupants represent 14 percent of vehicle occupant fatalities, and 15 percent of all pedestrian fatalities involved people over the age of 70.⁸

DOT Changes Missed Goals, But Can't Change Reality

In recent years, the National Highway Traffic Safety Administration (NHTSA) has been unable to meet a number of its announced safety performance goals. Instead of improving its performance, the agency has simply moved the goal posts.

Some years ago, NHTSA switched from using total fatalities as a measure of agency performance to relying on the overall fatality rate. Although NHTSA set a goal of achieving a fatality rate of 1.0 fatalities per 100 million vehicle miles of travel (MVMT) by 2008, the agency has now admitted that it cannot achieve that goal and has raised its 2008 goal from 1.0 to 1.37 fatalities per 100 MVMT. The goal of reducing the fatality rate to 1.0 has now been put off until 2011. Even this deferred performance goal is wishful thinking since it will require a decrease in the fatality rate in the next five years, from 1.41 (2006) to 1.0 by 2011, that is four times the drop in the fatality rate that NHTSA achieved in the previous five-year period (2001-2006). But even as NHTSA touts marginal reductions in the fatality rate, the U.S. has lost ground compared to other industrialized nations, falling from first to ninth in terms of highway safety.⁹

NHTSA also changed its traditional method of measuring the motorcycle fatality rate. After years of providing motorcycle fatality rates using the traditional exposure measure for surface transportation, that is, miles driven or 100 MVMT, NHTSA recently announced that motorcycle mileage data is flawed and can no longer be used to determine the fatality rate. The 2005 motorcycle fatality rate, based on mileage, was nearly 44 deaths per 100 MVMT. NHTSA had planned to issue a new fatality rate based on deaths per 1,000 registered motorcycles, which would have yielded an artificially low fatality rate 0.73 fatalities, less than one fatality, for every 1,000 vehicles. This was seen as an attempt to downplay the significance of the motorcycle fatality problem. The agency has instead decided to report the motorcycle fatality rate based on 100,000 registered motorcycles, which yields a fatality rate for 2006 of just under 72 deaths per 100,000 registered vehicles.

With regard to the truck fatality rate, FMCSA has engaged in a more subtle change to dilute the impact of the data by combining truck VMT with bus and passenger vehicle VMT so that truck fatalities will be divided by a much larger pool of vehicle miles of travel to yield a dramatically lower fatality rate for big trucks. As a result, instead of truck fatality rates being correctly reported as much higher than the overall highway fatality rate, the revised FY 2008 rate for large truck and bus crashes is an artificially and misleadingly low figure of just 0.171 fatalities per 100 MVMT. In comparison, the truck crash fatality rate in 2005 per 100 MVMT only using truck mileage was 2.12 fatalities per 100 MVMT, a significantly larger number indicating a serious safety problem.

This raises the concern that our federal safety agencies, NHTSA and FMCSA, instead of focusing on saving lives and decreasing the number of people who are killed and maimed in traffic crashes, are expending resources on public relations efforts intended to give the appearance of progress where there is none.

Enactment, Education and Enforcement are Key to Improving Safety

Changing human behavior, especially of a large and diverse population, is an enormous task. Most often, positive changes in safety behavior are not effective if predicated on educational efforts alone. For instance, efforts to convince people to use seat belts solely through “education, exhortation, or persuasion have had little success.”¹⁰ Research conducted by the Insurance Institute for Highway Safety (IIHS), among others, indicates that educational messages, such as public service announcements, brochures and similar attempts at behavior modification do not yield long lasting results. This has been shown repeatedly in research studies on social behavior, especially in the context of traffic safety.¹¹

Experience teaches that behavior modification in traffic safety is most effective when an educational message is combined with a legal requirement such as a state or federal law or regulation that is underscored by a real possibility of the imposition of a penalty (summons, fine, points, etc.) through adequate enforcement. “Most demonstrable improvements in driver behavior come from traffic safety laws.”¹² The underpinning of a state legal requirement, and the accompanying potential penalty, makes the need to change behavior more tangible than simply providing an educational message.

The “Click-It or Ticket” seat belt enforcement campaign is a role model of how this combination is effective. The original program was developed in North Carolina in 1993 as a means of promoting higher seat belt use rates and was launched to test the potential effectiveness of combining widespread publicity, with strong enforcement, in a state with a primary enforcement seat belt law. The educational message was integrally related to the intent of the new law, including consequences for its violation and specific information about fines, as well as the promise to fully enforce the law. The North Carolina campaign paid immediate dividends, with belt use increasing from 65 percent statewide before the effort, to 84 percent statewide approximately six months later. North Carolina now has a statewide seat belt use rate of nearly 89 percent (2007), placing it in the top-tier of states with the highest seat belt use rates.¹³

Because the Click It or Ticket program has been so successful, it has since been used in numerous other states. In addition, in the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users, Pub. L. 109-59 (Aug. 10, 2005) (SAFETEA-LU), Congress provided NHTSA with \$29 million each year (2006-2009), to conduct Click It or Ticket-type high visibility enforcement campaigns to reduce alcohol-impaired or drug-impaired driving and to increase seat belt use.¹⁴ NHTSA has used this funding to run a nationwide enforcement effort supported by a \$7.5 million advertising campaign focused on raising nighttime driving seatbelt use rates among teens.¹⁵

The problem, however, is that the NHTSA campaign cannot truly be a nationwide effort since not all states have primary enforcement seat belt laws. The message is not as effective in states with secondary enforcement laws.

Bold Action and Leadership are Necessary in the Next Reauthorization Legislation

Proven public health solutions to significantly reduce highway deaths and injuries are known. However, political will and executive branch leadership to advance and implement programs and policies are lacking. Many states and communities already have enacted traffic safety laws and employ ideas and programs that are resulting in important reductions in deaths and injuries. Extensive research and experience show the benefit of strong safety standards, regulations and laws. Unfortunately, much more needs to be done as a nation to ensure that every person, in every state, on every trip is adequately protected by safe roads, safe vehicles and safe driving.

Let me briefly identify some of the key issues that must be addressed in next year's reauthorization in order to achieve any real progress in reducing motor vehicle deaths and injuries.

A Primary Enforcement Seat Belt Law is a Primary Need

When you fly into any airport in any state across the country one has to wear a seat belt for landing and take-off. That's not the case when you and your family are driving across the country. At present, only 26 states¹⁶ and the District of Columbia allow primary enforcement of their seat belt law.

Research shows that lap/shoulder seat belts, when used, reduce the risk of injury to front-seat passenger occupants by 45 percent and the risk of moderate-to-critical injuries by 50 percent. In a crash, one of the most serious and deadly events that can occur to passengers is to be ejected from the vehicle. In fatal crashes in 2006, 75 percent of passenger vehicle occupants who were totally ejected from the vehicle were killed.¹⁷

Seat belts save lives and help to keep occupants in the vehicle. In states with primary enforcement laws, belt use rates are higher. A study conducted by the IIHS found that when states strengthen their laws from secondary enforcement to primary, driver death rates decline by an estimated seven percent.¹⁸ Use levels are typically 10 to 15 percentage points higher in these states than in states with weaker enforcement laws. Needless deaths and injuries that result from a lack of seat belt use cost society an estimated \$26 billion annually in medical care, lost productivity, and other injury-related costs. NHTSA estimates that in 2006, among passenger vehicle occupants over age 4, seat belts saved an estimated 15,383 lives. If all passenger occupants over age 4 had worn seat belts, 20,824 lives could have been saved or an additional 5,441 lives.¹⁹ NHTSA also estimates that, had seat belt use rates been 100 percent over the years, more than 350,000 additional lives would have been saved.²⁰

Congress, in SAFETEA-LU, provided more than \$500 million in incentive grant money to encourage states to pass primary enforcement seat belt laws. In 2006, three states acted. In 2007 only Maine passed a law. This year not a single state has adopted a primary enforcement seat belt law. At this glacial pace, one state a year, it likely will be 2032 or later before every state has this essential lifesaving law.

Impaired Driving - Stagnation After Years of Progress

The number of annual deaths on our nation's highways due to alcohol-related crashes dropped steadily from more than 26,000 in 1982 to under 17,000 from the mid-1980s through the mid-1990s. Since 2000, the number of persons killed in alcohol-involved crashes fell below 17,000 only once, in 2004, but has otherwise been climbing, reaching a new recent high of 17,602 in 2006. This indicates a reversal of the decline in impaired driving fatalities and a disturbing trend toward annual increases in deaths resulting from impaired driving.

The earlier decrease in fatalities was in large measure due to a wave of enactment of state anti-impaired driving laws, more serious enforcement of impaired driving laws, and educational efforts by Mothers Against Drunk Driving (MADD) and others to raise awareness of the problem. However, over 25 years after MADD began its campaign, there is still a patchwork of laws intended to prevent impaired driving across the nation. In fact, only two states have adopted all seven optimal laws identified by Advocates as essential to deterring and preventing impaired driving and the fatal and other injury crashes that result. Only 14 other states have adopted at least six of these laws.²¹ That means that most states, 34 and the District of Columbia, have enacted only five or fewer of these life-saving legal requirements.

Advocates recommends that a renewed emphasis be placed on efforts to prevent impaired driving through adoption of key anti-impaired driving laws. This would result in all states and the District of Columbia maintaining similar legal requirements regarding violators with extremely high blood alcohol concentration (BAC) levels; child endangerment by operating motor vehicles while impaired; open containers and repeat offender laws; sobriety checkpoints; and BAC testing for drivers involved in fatal crashes regardless of whether they survive the crash or not.

Additionally, the use of technology has been burgeoning in motor vehicles in recent years. Modern technology is used not just to provide drivers with vital safety information but also to allow internet access and entertainment and business communications that can interfere with the driving task. There is no reason that technology should not be used to prevent impaired drivers from operating motor vehicles. An effort led by MADD is already underway to urge states to adopt a mandatory interlock system to prevent persons convicted of impaired driving from starting their vehicle when they are, again, impaired. Advocates supports this effort.

Advocates also believes that more can be done through on-board technology to limit the ability of impaired drivers to start and operate motor vehicles. NHTSA should determine how sensor technology can be used to ensure that when impaired drivers get behind the wheel of a motor vehicle the vehicle is "smart" enough to prevent the driver from starting the ignition, getting on the road, and threatening the lives of others.

Motorcycle Deaths are Climbing and Helmet Laws are Under Attack

NHTSA estimates that 80 percent of motorcycle crashes injure or kill a rider. In 2006, 4,810 motorcyclists were killed and 88,000 were injured. This is more than double the motorcycle fatalities in 1997 and a level not seen since 1981.²² At present, motorcycles make up less than two percent of all registered vehicles and only 0.4 percent of all vehicle miles traveled, but motorcyclists account for 11 percent of total traffic fatalities, 13 percent of all occupant fatalities, and 4 percent of all occupants injured.²³ NHTSA estimates that helmets saved the lives of 1,658 motorcyclists in 2006 and that if all motorcyclists had worn helmets, an additional 752 lives could have been saved.²⁴

Today, only 20 states and the District of Columbia require helmet use by all motorcycle riders. This year 12 of those state laws were under attack by repeal attempts. In 2007, the National Transportation Safety Board recommended that all states adopt an all-rider helmet law. Research conclusively and convincingly shows that all-rider helmet laws save lives and reduce medical costs. While helmets will not prevent crashes from occurring, they have a significant and positive effect on preventing head and brain injuries during crashes. According to NHTSA, almost 50 percent of motorcycle crash victims have no private health insurance, so their medical bills are paid by taxpayers.²⁵ In 1992, California's all-rider helmet law took effect resulting in a 40 percent drop in its Medicaid costs and total hospital charges for medical treatment of motorcycle riders.²⁶

Finally, in a 2008 report by NHTSA guiding states on highway safety actions that work, a state all-rider motorcycle helmet use law was the only countermeasure rated as "Proven" in the "Effectiveness" category.²⁷

Strong, Uniform Teen Driving Laws Will Save Lives

After declining for 15 years, the number of teens is on the rise, growing at a faster rate than the overall U.S. population. In 1995, there were about 29 million people aged 12 to 19 in the United States. The teen population will continue to expand through the year 2010, as the children of baby boomers bring the total number of 12-to-19-year-olds to 34.9 million.²⁸

Based on estimated miles traveled annually, teen drivers ages 16 to 19 have a fatality rate four times the rate of drivers ages 25 to 69. In 2006, 3,406 young drivers aged 15 to 20 were killed in motor vehicle crashes and an additional 4,569 people, including teen passengers and others, were killed in these crashes. In all, nearly 8,000 died in crashes involving young drivers.²⁹

Graduated driver licensing (GDL) programs introduce teens to driving by phasing in full driving privileges over time and in lower risk settings. Based on research showing the effectiveness of GDL laws, Advocates recommends five components for an optimal teen driving law:

- a minimum six-month holding period for the learners permit;
- a minimum of 30 to 50 hours of supervised driving;
- intermediate stage restrictions on nighttime driving;

- intermediate stage restrictions on the number of non-family teenage passengers; and
- restrictions on non-emergency cell-phone use during both the learner's and intermediate stages.

Despite the proven success of comprehensive GDL laws in lowering the risk of a crash for teen drivers, there is a patchwork quilt of laws throughout the nation. Adoption of GDL laws has been a priority in some states but most have taken a piecemeal approach adopting one or two GDL components, but not the others. Adjacent states frequently have different rules for teen drivers concerning limits on nighttime driving, passenger restrictions and cell phone use.

This is similar to the "blood borders" problem in the 1970s and early 1980s when adjacent states had different minimum drinking ages for alcohol. Teens would drive across state borders, drink, and then drive impaired back home, killing and injuring themselves and others. This common occurrence was a catalyst for Congress to act and the Administration to concur. In 1984, President Reagan, at the urging of then-Secretary of Transportation Elizabeth Dole, signed into law a legal minimum drinking age of 21 sponsored by the late chairman of this Committee, Rep. James J. Howard (D-NJ), former Rep. Michael Barnes (D-MD) and Sen. Frank Lautenberg (D-NJ). That law gave states three years to adopt a common, uniform drinking age of 21 or be penalized federal-aid highway funds. As a result of that federal law every state complied, no state lost any federal funds and over 25,000 lives have been saved³⁰ – a remarkable achievement. It is now time for Congress to step in to protect teens and reduce deaths and injuries in every state through the uniform adoption of optimal GDL laws.

No Country for Older Drivers

The proportion of the population over age 65 is also growing significantly. In the past 10 years the number of older licensed drivers has increased by 18 percent, to 30 million in 2006.³¹ Although the proportion of older drivers in the population in recent years is about 15 percent, NHTSA estimates that this will rise to over 19 percent by the year 2030, with over 71 million drivers age 65 or older.³²

Older citizens can be expected to have problems as drivers and as pedestrians, given well-documented changes in their perceptual, cognitive, and psychomotor performance. The result is that drivers above age 65 have a higher overall crash rate than any other age group.³³ Older drivers as a group are involved in fewer fatal crashes than younger drivers, but their susceptibility to both severe, disabling injury and death in a traffic crash, either as vehicle occupants or as pedestrians, is several times that of a person in their 20s, according to NHTSA. Nevertheless, NHTSA still has many safety regulations that do not meet the safety needs of older occupants. One example is NHTSA's proposed rule on side impact protection which includes injury criteria that might be adequate for vehicle occupants through middle age, but will not adequately protect older occupants. The result will be avoidable severe injuries and deaths among older vehicle occupants in side impact crashes.

The rapidly increasing population of older drivers, vehicle occupants, and pedestrians also presents daunting challenges to transportation engineers, who must ensure safety while attempting to maintain mobility on highways and streets. Studies have shown that a driver age 75 needs more than 30 times the amount of illumination compared to a 21-year old driver to see the signs and other traffic control devices without difficulty,³⁴ and that older drivers often take double the amount of time to recognize a hazard or react to a traffic control device than a young driver. This is especially crucial with respect to the amount of time and distance needed to brake quickly to avoid a collision or to reduce the severity of an impact. In addition, a higher percentage of older drivers have varying problems with vision that occur normally with aging, yet NHTSA some years ago weakened its standard for headlamp illumination so low-beam lamps provide less illumination of overhead highway signs and objects at the roadside.

Not enough attention has been paid to adopting countermeasures in our highway and street designs for older drivers. Most guidelines and recommendations concerning the need to accommodate older drivers in government publications issued both by FHWA and NHTSA, consist of voluntary rather than mandatory actions.³⁵ The pace with which traffic engineering changes are adopted is exceptionally slow, with compliance periods for the states often set at 10 years and more. In addition, shortages of adequate highway funding at all levels of government erode the possibility of timely attention to highway and street design and traffic engineering changes that will make vehicle operation by older drivers measurably safer.

These same problems also afflict older and disabled pedestrians. Most intersections in the U.S., even when signalized, are treacherous to negotiate safely for any pedestrians, but especially for older and disabled pedestrians. Traffic engineers are reluctant to extend pedestrian crossing times to increase safety because they argue that this impedes the flow of traffic and may cause backups. Only recently have there been efforts to slow crossing times at signalized intersections, and only from 4.2 feet to 3.5 feet per second.

These brief observations make it clear that older and disabled Americans are being shortchanged on traffic and vehicle safety. DOT is not taking a systems engineering approach to the problem that combines countermeasures involving highway and traffic engineering design and operation with vehicle crashworthiness design in order to protect occupants of all age groups.

Speeding Wastes Lives and Fuel

In 2006, 13,543 speeding-related traffic fatalities occurred on U.S. roadways, approximately 32 percent of all traffic fatalities that year.³⁶ This percentage for speed-involved fatal crashes has held steady, year after year. Of those fatalities, more than a third (5,587) took place on roadways posted at 55 miles per hour or higher. Although the National Maximum Speed Limit was revoked in 1995 to permit states to post higher speed limits, that did not eliminate vehicle speed and speeding as a critical factor in fatal crashes, by any means. Congress may have repealed the national maximum speed limit but it did not repeal the laws of physics.³⁷

The National Maximum Speed Limit was designed to address the need to conserve fuel in the wake of the 1973 oil crisis and gasoline shortage.³⁸ The National Academy of Sciences documented the fact that the lower, uniform national speed limit saved fuel, estimating a total savings of about 167,000 barrels per day.³⁹ From the safety perspective, the National Academy study also revealed that the national speed limit was a life saving policy. “[T]he slower speeds and more uniform pace of travel . . . accounted for 3,000 to 5,000 fewer highway fatalities.”⁴⁰ Even years after the oil crisis had passed, that national speed limit was still saving between 2,000 and 4,000 lives and preventing between 2,500 and 4,500 serious and 34,000 and 61,000 minor and moderate crash injuries.⁴¹

The National Academy study estimated that raising speed limits on rural interstate highways would result in about 500 more deaths annually.⁴² Other studies have documented that the trend to higher posted speed limits has resulted in those increased fatalities and higher fatality rates.⁴³

There are few policy measures that can compete with the safety benefits provided by a national maximum speed limit. Conditions may once again be ripe for Congress to consider a new version of the national speed limit law. One bill calling for a dual limit of 60 mph on urban highways and 65 mph on rural portions of the National Highway System has already been introduced in the House.⁴⁴ Advocates supports the consideration of a reformulated national speed limit as a policy option in order to save lives and protect the nation.

Conclusion

The quality of life for all Americans depends on a safe, reliable, economical and environmentally sound surface transportation system. However, transportation solutions involve not only costs, but safety.

As previously mentioned, highway crashes are costing our nation more than \$230 billion annually. This is money that could be better spent on addressing surface transportation needs. Many of the top priorities outlined in my testimony today can be realized by expending minimal funds from the Highway Trust Fund while achieving maximum gains in saving lives and preventing costly, disabling injuries. The health and safety community knows what works. There are no acceptable excuses for delaying any longer the adoption of proven safety measures while the death and injury toll continues to grow.

Thank you and I am pleased to answer any questions.

Endnotes:

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- ¹ *Traffic Safety Facts 2006*, DOT HS 810 818, NHTSA (2007) (*Traffic Safety Facts 2006*); and, *2008 Roadmap to State Highway Safety Laws*, Advocates for Highway and Auto Safety (Jan. 2008) (2008 Roadmap Report).
- ² *The Economic Impact of Motor Vehicle Crashes 2000*, DOT HS 809 446, NHTSA (May 2002).
- ³ 2008 Roadmap Report, p. 7.
- ⁴ *Motorcycles*, Traffic Safety Facts 2006 Data, DOT HS 810 806, NHTSA (Mar. 2008).
- ⁵ AL, CA, GA, LA, MD, MA, MI, MS, MO, NE, NV, NJ, NY, NC, OR, TN, VT, VA, WA and WV.
- ⁶ Traffic Safety Facts 2006, p. 32.
- ⁷ 2008 Roadmap Report, p. 22.
- ⁸ *Pedestrians*, Traffic Safety Facts 2006 Data, DOT HS 810 810, 2008, NHTSA (Mar. 2008).
- ⁹ *Once the World Leader in Traffic Safety, U.S. Drops to No. 9*, Nov. 27, 2003, NYTimes, available at: <http://query.nytimes.com/gst/fullpage.html?res=9D00E1D6173AF934A15752C1A9659C8B63>.
- ¹⁰ Williams, A.F., Wells, J.K., The Role of Enforcement Programs in Increasing Seat Belt Use, 35 *Journal of Safety Research* 175-180 (2004) (references omitted).
- ¹¹ See, e.g., Education alone won't make drivers safer, *Status Report* 36:1-7, IIHS (2001).
- ¹² Importance of traffic safety laws: with publicity and education, laws change behavior, *Status Report* 36:5-6, IIHS (2001).
- ¹³ *Seat Belt Use in 2007 – Use Rates in the States and Territories*, Traffic Safety Facts, DOT HS 810 949, NHTSA (May 2008).
- ¹⁴ SAFETEA-LU, Sections 2001 & 2009, Title II, Highway Safety.
- ¹⁵ NHTSA Click It or Ticket webpage, available at: <http://www.nhtsa.gov/portal/site/nhtsa/menuitem.ce4a601cdf97fc239d1711cba046a0/>.
- ¹⁶ AK, AL, CA, CT, DE, GA, HI, IL, IN, IA, KY, LA, MD, ME, MI, MS, NJ, NM, NY, NC, OK, OR, SC, TN, TX and WA.
- ¹⁷ *Occupant Protection*, Traffic Safety Facts 2006 Data, DOT HS 810 807, NHTSA (2007).
- ¹⁸ 2008 Roadmap Report, p.13.
- ¹⁹ *Occupant Protection*, Traffic Safety Facts 2006 Data.
- ²⁰ *Ibid.*
- ²¹ 2008 Roadmap Report.
- ²² *A Highway Safety Countermeasures Guide for State Highway Safety Offices*, DOT HS 810 891, p. 5-4, NHTSA (3d ed., Jan. 2008) (NHTSA Safety Countermeasures Guide).
- ²³ 2008 Roadmap Report, p. 15.
- ²⁴ *Motorcycles*, Traffic Safety Facts 2006 Data, DOT HS 810 806, NHTSA (Mar. 2008).
- ²⁵ 2008 Roadmap Report, p. 15.
- ²⁶ *Ibid.*

²⁷ NHTSA Safety Countermeasures Guide, p. 5-4.

²⁸ U.S. Bureau of Census (1999).

²⁹ 2008 Roadmap Report, p. 24.

³⁰ Traffic Safety Facts 2006, back cover.

³¹ *Older Population*, Traffic Safety Facts 2006 Data, DOT HS 810 808, NHTSA (Mar. 2008).

³² See, NHTSA Safety Countermeasures Guide, chapter 7.

³³ See, Owsley, C., *Visual Information Capabilities of Older Drivers*, NHTSA (2001).

³⁴ *Older Drivers: A Literature Review*, No.25, United Kingdom Department for Transport (2001).

³⁵ For example, see, *Guidelines and Recommendations to Accommodate Older Drivers and Pedestrians*, FHWA-RD-01-051, Federal Highway Administration (2001).

³⁶ Traffic Safety Facts 2006.

³⁷ Sec. 205(d)(1)(B), Title II, National Highway Designation Act, Pub. L. 104-59, (Nov. 28, 1995).

³⁸ The national maximum speed limit was originally an emergency measure enacted as part of the Emergency Highway Conservation Act, Pub. L. 93-239 (Jan. 2, 1974), and was made permanent in Sec. 114(a), 1974 Federal-Aid Highway Amendments, Pub. L. 93-643 (Jan. 4, 1975).

³⁹ *55: A Decade of Experience*, Transportation Research Board Special Report No. 204, p. 110, National Research Council, National Academy of Sciences (1984).

⁴⁰ *Id.* at p. 2.

⁴¹ *Id.* at p. 3.

⁴² *55: A Decade of Experience*, p. 176.

⁴³ See for example Baum, et al., 1989, Baum et al., 1991; and NHTSA and FHWA, 1998.

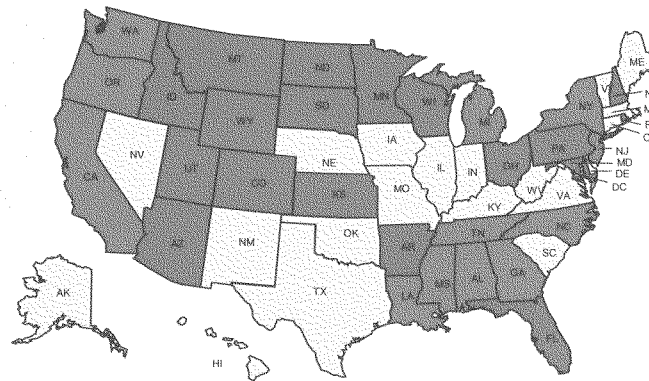
⁴⁴ H.R. 6458, was introduced on July 10, 2008 by Ms. Speier of California.



ADULT OCCUPANT PROTECTION

Primary Enforcement Seat Belt Laws

All-Rider Motorcycle Helmet Laws



- State has both a primary enforcement seat belt law and an all-rider motorcycle helmet law
- State has either a primary enforcement seat belt law or an all-rider motorcycle helmet law
- State has neither a primary enforcement seat belt law nor an all-rider motorcycle helmet law



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**Testimony of
Jill Ingrassia
Managing Director, Government Relations & Traffic Safety Advocacy
AAA**

**Before the U.S. House Subcommittee on Highways and Transit
Committee on Transportation and Infrastructure
"Improving Roadway Safety: Assessing the Effectiveness of
NHTSA's Highway Traffic Safety Programs"
July 16, 2008**

Chairman DeFazio, Ranking Member Duncan, and Members of the Subcommittee, thank you for inviting AAA to be here today to share our perspective on roadway safety.

As you may know, AAA is a federation of motor clubs in the U.S. and Canada serving over 51 million members. Our members are prime users of the nation's surface transportation system. They are commuters, leisure travelers, pedestrians, and users of public transportation. Transportation plays a vital role in their lives and, of course, underpins the economic well-being of this nation.

AAA's interest in the transportation system has always been focused on safety and personal mobility. We face serious challenges with the number of crashes, injuries and deaths on our roadways, and the increasing congestion that disrupts our daily lives and economic activity. As you prepare for the upcoming reauthorization of SAFETEA-LU, I would also suggest that an added challenge will be getting the public's buy-in regarding the importance of transportation and what needs to be done. If we fail to understand the amount of mistrust the public has in our ability to deliver recognizable transportation improvements and be good stewards of the motorist's dollar, we will fail in reducing fatalities, fail in cutting commute times, and fail to grow our economy in ways that keep us globally competitive.

In my testimony today, I would like to spend a little time outlining in greater detail some of the many challenges we face in transportation safety, particularly on the behavioral side, and then offer some recommendations for your consideration.

A thorough examination of behavioral safety and NHTSA's programs is appropriate. Behavior change is arguably the greatest challenge we face in reducing the staggering number of fatalities and must be a critical component of future programs. In a time of limited resources, we need to determine what works, which approaches and interventions provide the biggest return on investment, and focus those limited resources where they will provide the greatest public good.

In cases where we have already identified countermeasures that work, what is most needed is the political will to act.

A lot of good work is being done to think about how best to reform federal transportation programs, including traffic safety. AAA agrees that moving toward performance-driven, outcome-based programs is the way to go. We recognize that's easier said than done, but an effort must be made to change the status quo.

There has been significant debate about combating congestion, improving freight mobility and expanding transportation options. This committee certainly has heard some of that debate. Transportation advocates on all sides have called for abandoning the status quo and developing a new vision and purpose for the federal program. They've also talked about the need for more resources. There has been little public discussion, though, about the role of safety in the federal transportation program. This hearing is a promising start to launch that dialogue and AAA is especially pleased to be a part of it. We'd suggest the creativity and energy being applied to mobility and congestion solutions should also be applied to doing things better for traffic safety.

Public Health Challenge

Part of "doing things better for traffic safety" is changing the way we view traffic crashes. They are not random occurrences. There are reasons they happen and things can be done to prevent them and reduce their impact. They should be recognized as a public health threat and treated as such.

You are all familiar with the statistics – over 42,000 people die each year in the U.S. as a result of motor vehicle crashes. That's about 117 deaths per day, and nearly 5 every hour. Millions more are injured each year. While concern over the high number of fatalities on our roadways seems to be strong among safety organizations, the research community and in all levels of government, we seem to be stalled in our efforts to save lives. Annual deaths have remained stuck above 40,000 for many years. This should ring alarm bells nationwide for an urgent call to action. Yet our society seems to have come to accept this sort of death toll with car crashes. This has to change.

Earlier this year, AAA joined with Cambridge Systematics to conduct a first-of-its kind study of the societal costs of crashes as compared to congestion. The report calculates the costs of crashes for the same metropolitan areas covered by the well-known *Urban Mobility Report* conducted by the Texas Transportation Institute. We found the societal cost of crashes is a staggering \$164.2 billion annually in the urban areas studied, nearly two and a half times greater than the \$67.6 billion price tag for congestion.

In every metropolitan area studied, from very large to small, the results showed crash costs exceeded congestion costs. For very large urban areas (more than 3 million), crash costs are nearly double those of congestion. Those costs rise to more than seven times congestion costs in small urban areas (less than 500,000) where congestion is less of a challenge. The \$164.2 billion cost for crashes equates to an annual per person cost of \$1,051, compared to \$430 per person annually for congestion. These safety costs include medical, emergency and police services, property damage, lost productivity, and quality of life, among other things. This analysis wasn't done to downplay the need to reduce congestion and apply new resources to improving mobility; instead, AAA wants similar concern, attention, and resources to be brought to safety improvements.

Safety Culture

Fatality, injury and cost figures provide ample evidence as to the impact of traffic crashes on our society, but the public is not getting the message, changing its behavior or demanding action from elected officials. To this end, the AAA Foundation for Traffic Safety has initiated a long-term research initiative to assess and eventually transform the “traffic safety culture” in this country. When we speak of traffic safety culture we envision a society where everyone would value safety, do their part, engage in serious public dialogue to seek ways to continually improve traffic safety, and demand that all other members do as well.

To give you a sense of the challenge, a recent AAA Foundation survey of public attitudes, beliefs and behaviors toward traffic safety found that, to a large degree, Americans practice a “do as I say, not as I do” approach. They agree, for example, that engaging in distracting behavior while driving is dangerous, yet they admit to doing it, and firmly believe the driver in the other car is the real problem. The survey found that over 80 percent believe distraction is a serious problem, yet over 50 percent said they had talked on a cell phone and 14 percent said they texted while driving in the last 30 days.

Speeding, aggressive driving, impaired driving, distracted driving, seat belt use, and pedestrian and cyclist safety are just some of the issues that can benefit from an improved safety culture on our roads.

Safety Challenges

Let me briefly share AAA’s thoughts on some of the issues just cited, highlighting three age groups of road users – child passengers, teen drivers, and seniors – where AAA has focused its efforts during recent years.

We’ve made substantial progress improving child safety seat use for infants and toddlers. Some loopholes remain to be closed in state laws, but usage rates are high and death rates have fallen considerably through the work of AAA, SafeKids, the Children’s Hospital of Philadelphia, NHTSA, and others. Yet, more often than not, we see these seats being misused. Booster seat usage and laws remain uneven across the states and socioeconomic groups. Much can still be done to save lives and reduce injuries to our youngest passengers by improving state booster seat laws and implementing effective behavior change programs that target populations with low usage.

Fast forward a decade to when those booster seat age kids reach driving age. AAA, the Insurance Institute for Highway Safety, NTSB, and others have been working for more than a decade to successfully expand graduated driver licensing (GDL) for teen drivers from just 8 states in 1998 to all 50 in 2005. Recent AAA Foundation research shows that states with robust GDL systems have seen a 38 percent drop in fatality rates and a 40 percent drop in serious injury rates, yet just one state – Delaware – has all the GDL components that AAA and other safety advocates call for. Teen drivers continue to crash and die at rates more than double their share of the driving population. Car crashes far and away remain the leading killer of teens. Here, too, more can be done. States need to improve their GDL programs. We need to find ways to engage parents in the development of their new teen drivers. We need to figure out how driver education can better produce safe teen drivers. Significant work is being done by the AAA Foundation and others to improve driver education, but more resources are needed.

On the other end of the age spectrum, senior drivers pose a looming challenge for both traffic safety and mobility. It's estimated that by the year 2025, 25 percent of licensed drivers will be age 65 or older. We know that many of them will drive, and that many of them will be safe drivers. AAA, AARP, and others are developing programs to reach seniors and help them gauge their driving abilities and find ways to stay mobile as they age. Yet as this population grows and expects more out of their golden years, there will be more need for ways to assess driving ability, to adapt their vehicles to fit their changing bodies, and provide supplemental transportation programs to keep them mobile once their driving days have passed. While most of this work will be done at the state and local level, federal involvement is important to provide leadership and guidance on licensing policies (NHTSA) and support for mobility options (DOT).

Alcohol-impaired driving continues to be a huge problem with over 14,000 alcohol-involved drivers in fatal crashes in 2006. AAA has worked with MADD, the Century Council, NHTSA, and others to improve laws and reduce drunk driving. Yet the challenge of repeat offenders, high BAC offenders, and drunk driving among young adults remains. AAA suggests that a systematic approach to addressing the problem is required. This includes focusing on improving existing procedures and processes, like taking a collaborative, cross-discipline approach to substance abuse issues; increasing criminal justice education in drunk driving; encouraging physician screening for alcohol abuse; stiffening BAC-test refusal penalties; evaluating effectiveness of specialized prosecutors and DWI courts; and building and evaluating model initiatives to reduce recidivism rates.

Distracted driving has garnered perhaps the most attention with media, the public, and state legislators and poses challenges for safety advocates. Five states and the District of Columbia have enacted laws to ban handheld cell phone use by drivers and there are now four states that have passed laws to ban text messaging by drivers. Yet there's little evidence that these laws have changed behavior or crash rates so far. You can't legislate away the myriad distractions both inside and outside the vehicle. Laws can provide one tool for police and prosecutors. They also serve as a device for communicating safety priorities to drivers. Distracted driving is a challenge for legislators, researchers, engineers, and others, but for motorists, it probably fits best into the need to improve our safety culture.

AAA Recommendations for Change

AAA offers the following recommendations for consideration as you evaluate existing programs and look for new opportunities to improve transportation safety:

- **Data** – We need an increased focus on results and metrics in order to properly evaluate current safety programs so we invest in those projects and programs that are truly having an impact. Without good data, we can't measure what's working. A recent GAO report found the quality of state data systems was inconsistent. Data systems must be improved and money should be provided for necessary upgrades. Developing a common definition for serious injuries should also be a priority. Collecting data on deaths and serious injuries would provide a more robust metric and afford greater statistical validity of any analyses done.
- **Accountability** – In order to move to a performance-driven, outcome-based system, new performance metrics are needed. In the behavioral arena, NHTSA and GHSA are working to develop comprehensive performance metrics to evaluate all federal program expenditures for traffic safety and we support this effort. Uniform performance standards will reveal to each

state what its own data collection needs are and will help each state evaluate its current behavioral safety programs. Absent these measures, it is extremely difficult for a state to determine exactly how best to apply the most effective solutions. Performance standards should be a prerequisite for any new system providing additional flexibility to state and local authorities.

- Funding – In order to do the types of program evaluations and data collections that will be required to make significant strides in safety, more money is needed. Discussions in other countries and among international development organizations like the World Bank have focused on a goal of ensuring at least 10 percent of all transportation investments are dedicated to safety. AAA believes this funding target warrants consideration here in the U.S.
- Communication – The transportation safety community needs to develop more effective ways of getting the public to understand the impact of traffic crashes, the need for effective countermeasures, and the role their own behavior plays in safety.
- Collaboration – Increased collaboration among traffic safety professionals, public health specialists, and health communications experts is needed to incorporate the best available science on behavior modification. We also need to escape our current silo-mentality and coordinate inter-agency and inter-disciplinary communications more effectively.
- Cooperation and joint planning at all levels of government between health, transportation, and criminal justice system professionals will help restore trust, create accountability, and deliver success.
- Strategic Highway Safety Plans – AAA encourages Congress to continue and strengthen the requirement for states to develop collaborative strategic highway safety plans that are based on data. Once in place, there should be oversight to ensure that programs are actually accomplishing the plans' goals. It's important for NHTSA and state highway safety officers to be actively engaged in the development and evaluation of these plans.
- Road Assessment Programs – Further testing and implementation of a road risk assessment tool, e.g., U.S. Road Assessment Program (usRAP), should be encouraged to ensure dollars are spent on roads and bridges with the greatest safety problems. Understanding road safety risks will help state DOTs focus on solutions that will have the greatest safety benefits and should result in broader public support for needed improvements.¹

One final suggestion is for Congress to consider an ambitious federal grant program for safety that is akin to what the Department of Transportation has been promoting for congestion relief. Just as the DOT's Urban Partnership program has encouraged local governments to compete for large grants to address congestion issues, so, too, could a federal grant program offer larger pots of money to individual states or cities for properly-evaluated safety programs. Making significant strides in safety will involve more than incremental improvements or providing a bit more money to carry on "business as usual." The federal role can include helping state and local safety professionals try dramatically different, large scale programs and rigorously evaluate them for lessons that can be applied across the country and to other safety issues.

¹ The U.S. Road Assessment Program (usRAP) is a pilot program of the AAA Foundation for Traffic Safety, built upon successful programs already established in Europe (EuroRAP) and Australia (AusRAP). usRAP produces color-coded risk maps that display the crash rates and crash densities of roads, derived from historical crash data and traffic volume data, and also "star ratings" that communicate the relative safety of the physical characteristics and safety features of the roads, which are assessed through physical inspection of the roads. By the end of 2008, usRAP will have been successfully piloted in eight states and the AAA Foundation is prepared to initiate implementation of a nationwide system in 2009.

Perhaps a state could significantly reduce drunk driving through a comprehensive program aimed at monitoring and treatment of offenders, coupled with additional resources for law enforcement and the judiciary. Another state might be able to significantly improve teen driver safety through a major overhauling of its teen licensing system, engaging parents, and providing innovative driver training using simulators or other technology. This type of grant program could let us take ambitious steps to address some of the great safety challenges our nation faces and adopt effective solutions.

This wouldn't mean ending high visibility enforcement programs for seat belts and drunk driving. It wouldn't dry up funds provided to states for other safety programs. But it would be focused on measurable results directly linked to safety using new performance metrics. It's no longer enough for a program simply to raise awareness of a safety issue – it must lead to real crash reductions or related behavior change. The cause of safety is best served by focusing money on programs proven to accomplish real safety goals.

Conclusion

AAA recognizes that the challenges before you are not easy. The prospect of completely reforming the federal transportation program in one year's time makes the challenges associated with getting SAFETEA-LU passed seem minor. But this re-examination is long past due and is imperative if we want the public's buy-in going forward. We look forward to working with all of you over the next 18 months to accomplish the important task of improving transportation safety in the next transportation reauthorization bill.

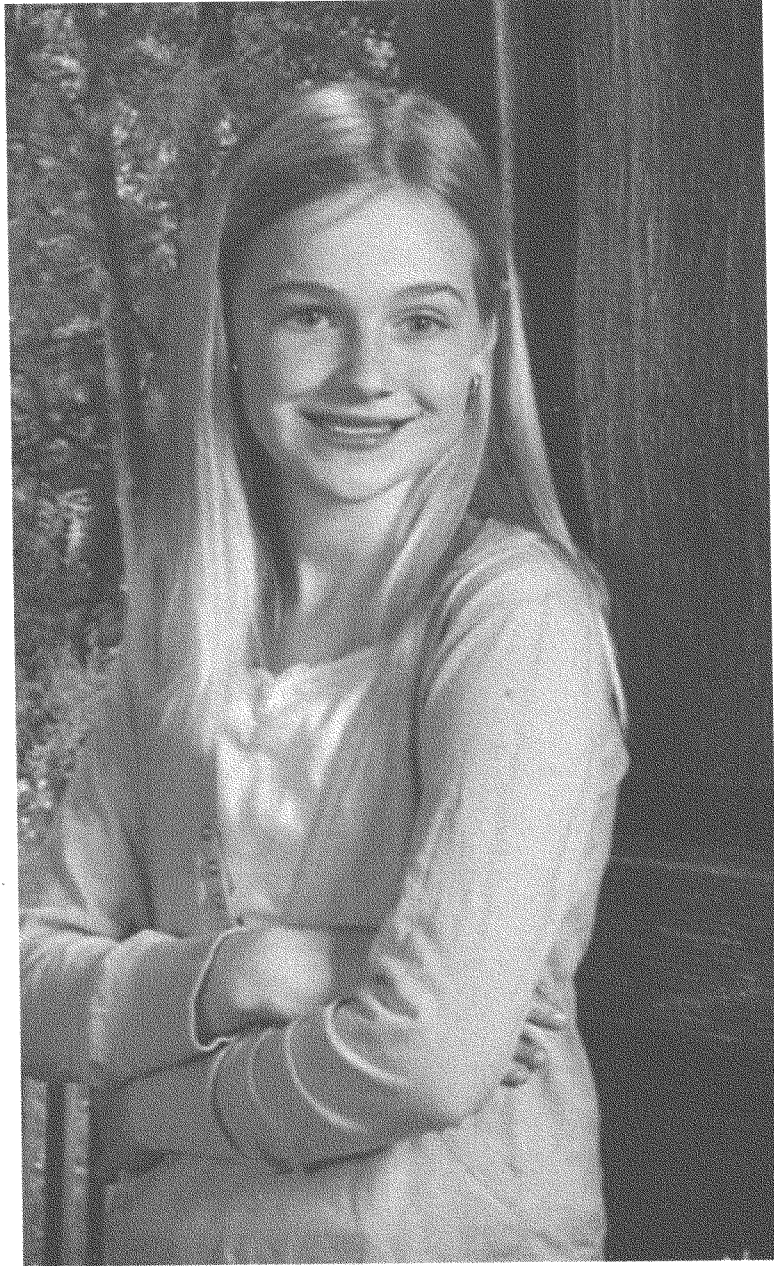
Thank you for the opportunity to testify today and I look forward to answering any questions you may have.

American Center

for

**Van and Tire
Safety**

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Alexis James
1997-2007

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Statement by Patrick James
July 16, 2008

Good morning, my name is Patrick James and I am here with my wife Kelli and son Austin to talk with you about the deadly combination of 15-passenger vans, aged tires and vehicles that are rollover prone and lack occupant protections.

I am testifying before this committee one year to the day that I last talked with my daughter. She was excited about going to play with her old softball team in a tournament in Savannah Georgia the following day. Twenty-four hours later my family and many friends' lives were changed forever. At 12:30 PM on July 17th, 2007 we started receiving phone calls from friends informing us that Alexis had been in an accident. The vans' left rear tire had ample tread and looked like new. But it was 13 years old. And when it failed on a highway in South Carolina, the van rolled over and my daughter was ejected—even though she was wearing her seat belt. I was pulling into the airport parking lot when I received a phone call from the ER doctor. He informed me that my daughter, "Lexie" James had died from heart failure. I remember sitting in my car looking into the lobby of the airport watching my wife and son, and knowing what I had to do—go tell her mom and brother that Alexis had passed away.

I never gave a second thought to the vehicle Lexie would be taking to her tournament. But I have spent the last 12 months learning everything I could about 15-passenger vans and tire safety. And what I found out stunned me.

These vehicles, which were first introduced in the 1970s and have changed little since, have a long history of single-vehicle rollover accidents and a general lack of crashworthiness. They are more prone to rollover than other vehicles and have higher rollover fatality rates than other passenger vehicles. The odds of rollover for a 15-passenger van increase more than 400 percent when the van is fully loaded. From 1997 to 2006, 15-passenger van crashes caused 1,090 occupant fatalities. 534 of these people died in preventable crashes.

I have also learned that tires degrade over time and heat exposure, regardless of whether they have been used or have adequate tread. As early as 1990, some auto manufacturers began warning consumers about the use of tires older than six years. Last August, NHTSA submitted a report to Congress on tire aging that affirmed this warning. The agency cited statistics from a large insurance company showing that 27 percent of its policy holders were from the warm weather states of Texas, California, Louisiana, Florida, and Arizona. But 77 percent of the tire claims came from those states and 84 percent of these claims were for tires over 6 years old. According to a survey by the Rubber Manufacturers Association, 16.4 percent of tires in service are six years old or older.

Most tires will wear out before they "age out." But, there are many circumstances in which older tires end up on vehicles. The most common is the full-size spare that is put into service after many years in the trunk or under the car. Many 15-passenger vans, are owned by community groups that don't use them on a daily or even a weekly basis. If the annual mileage is low, the possibility exists that the tires could exceed their safe, useful life. Our small-scale study found that about 23 percent of 15-passenger vans surveyed have tires that are ten or more years old.

I didn't know any of that before July 17, 2007. But I have dedicated that last year to informing as many people as I can about these facts. And in February my family founded the American Center for Van and Tire Safety, to warn the public about these significant dangers.

Perhaps the biggest lesson I learned is that that 15-passenger van rollover crashes are the most extreme and horrifying example of what is missing in our current rollover occupant protection regulations and that tire age degradation is something most people, including tire service professionals, are unaware of.

In any crash, it isn't just one thing that saves the driver or the passenger from injury or death. It isn't one thing that keeps the crash from happening in the first place. It's a lot of elements working together. And as I sit before you now, on July 16, 2008 – knowing everything I know – there are still many pieces missing in our federal safety regulations to prevent and reduce the harm from rollover crashes.

We've taken a few forward steps. Many federal safety standards for passenger vehicles and light trucks have been expanded to include new 15-passenger vans. The SAFETEA-LU bill of 2005 requires NHTSA to issue a report on tire aging. The agency has begun to upgrade the roof crush standard. And, last month, it issued a consumer advisory that included some information about aged tires.

But the roof crush standard has stalled. The final tire aging report with rulemaking recommendations remains in the agency's hands. It's still near impossible for the average person – or even a service technician – to read a tire date code or learn about the consumer advisory.

Our goal now is to push for improvements to 15-passenger vans, to eliminate aged tires from our fleet and to keep these issues in front of the public.

But my family and our organization cannot do it alone. So, I'd like to close my testimony with a little bit of automotive history and a challenge. Forty-three years ago, almost to this very day, there was another Congressional hearing on the effectiveness of NHTSA's programs. The hearings continued over a week in mid-July. The witnesses included executives from all of the major American automakers.

The centerpiece of Ford Motor Company's testimony was a short movie demonstrating the crashworthiness of a 1961 Comet.

Picture – if you will – a grainy black-and-white film of a white sedan heading for a ramp. The ramp tips the passenger-side wheels and the Comet rolls over twice. The cameras inside of the car show the seat belted dummies in the front, bounced by the crash forces, but otherwise, unharmed. When the Comet comes to rest upright, the roof is intact and the dummies are still in their seats.

I'm not sure how many automakers today could show such a film to Congress. I do know that in 1965, manufacturers were on the path to building vehicles that offered significant occupant protection in rollovers. But in the absence of regulatory standards, we have strayed far from that path. We have spent decades building vehicles that were more prone to rollovers – instead of less – with weaker roofs – instead of stronger – and restraint systems that do not work in that moment when our lives depend on them.

Lexie died before she grew up and made her own way in the world. But that does not mean she cannot leave a lasting legacy. With your help, it can be one that will spare others the pain of knowing that a loved one died in a crash that they should have survived.

Despite the improvements to 15-passenger van design required by SAFETEA-LU – as of July 2006 – there were still more than half-a million 15-passenger vans on our roads. These vans are *not* equipped with the latest safety features. In fact they are based on 30-year-old technology. And they are being used by schools, churches and day care centers to transport our elderly, our children, our athletes and our choirs. It is not enough to launch another education and awareness campaign. These messages work their way slowly into the public's consciousness. Consider that NHTSA had already issued three consumer advisories warning the public about the dangers of 15-passenger vans, when Lexie died in one.

My challenge to industry is this: help send these older and very dangerous vehicles to the scrap yard. Fifteen-passenger vans are the only vehicles in our fleet that cannot be used safely as intended. That irony would be merely absurd, if the consequences of it weren't so tragic. Automakers should work to offer financial incentives to the community groups that need their vans, but lack the resources to replace them with safer transportation.

As for the regulators – NHTSA, and their overseers, the honorable members of Congress, we ask you to conduct a national survey on tire age in 15-passenger vans and warn consumers about this fatal combination. Ultimately, we'd like to see expiration dates clearly printed on the outside sidewall of every passenger vehicle tire or the use of current technologies like Radio Frequency Identification (RFID) to ensure a quick and easy read of a tire's age.

I urge you to get to work on a standard for a dynamic rollover occupant protection test. NHTSA is absolutely right to approach each rollover-related rulemaking as a part of a system. But the system is still missing a critical element – how will the driver and the passengers actually fare in a rollover? We need a standard that requires instrumented dummies to measure what happens to *people* in rollovers – not just metal and glass. What good is it to test one side of the roof with a metal plate, if the front seat passenger's head is going to be crushed in a crash along with the B-pillar? We need to know that the seat belts and whatever anchors them in a vehicle are going to withstand the impacts of a rollover – so that the 10-year-old girl in that seatbelt is going to withstand it, too. If we don't seek the answers to these questions, then what, exactly, are we accomplishing?

Manufacturers have resisted a dynamic rollover testing standard for decades. It can't be done, they say. And NHTSA has retreated. But if Ford can showcase its rollover testing to Congress in 1965; if GM could parade its 10-million-dollar rollover testing center two years ago for the television cameras, then it *can* be done. In fact, manufacturers *are* doing it and *have* been doing it. And instead of fighting a standard, they should be supporting it and offering the agency the benefits of their years of such testing.

I know that protecting people in rollover crashes is a complex challenge, but Americans are actually good at solving complex problems. Sometimes, I think we forget that. We are up to the challenge. It's time to do the right thing – for Lexie. For all of us.

Thank you for the opportunity to address this committee.

American Center for Van and Tire Safety

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Desired actions ...

1. NHTSA to complete the study on tire aging and issue appropriate standards, rules and guidelines in 2009. The goal of American Center for Van and Tire Safety is to have appropriate expiration dates clearly printed on the outside sidewall of all passenger vehicle tires.
2. Obtain federal funding for a "National Van and Tire Safety Awareness Week" as part of the federal highway bill in 2009.
3. Commission NHTSA to conduct a nationwide study of 15-passenger van annual mileage and tire age in 2009. If the study shows a high percentage of tires over six years old (as was the case in the Knoxville Study done by American Center for Van and Tire Safety in 2008), issue a consumer warning to all owner/operators of 15-passenger vans nationwide.
4. Include 15-passenger vans in NCAP front impact and side impact star ratings.
5. Develop and implement a more comprehensive system/procedure for distribution of NHTSA and NTSB consumer advisories and alerts to insure the advisories and alerts reach the intended target population.
6. Challenge the auto manufacturers (Ford, GM and Chrysler) to offer a "buy back" program for older 15-passenger vans that don't have the safety features of today's vehicles ... Offer could include a generous credit for a new 15-passenger van or better yet a small bus.
7. Include 15-passenger vans in all appropriate future Federal Motor Vehicle Safety Standards and/or revisions of current standards. Standards that apply to SUV's, minivans and related multi-passenger vehicles should also apply to 15-passenger vans.
8. Require all occupants of 15-passenger vans to wear seat belts/restraints in all states.
9. Require a disclosure statement (NHTSA advisory) to be attached whenever a 15-passenger van title is transferred (new or used).
10. Require a disclosure statement (NHTSA advisory) to be attached whenever a 15-passenger van insurance policy is issued or renewed.
11. Require an "endorsement" (similar to the "motorcycle endorsement" required in most states to operate a motorcycle) on driver's license for operation of 15-passenger van. The endorsement is to be based on training and testing on the safe operation of 15-passenger vans. In addition, all operators of 15-passenger vans in commercial service must have a commercial driver's license (CDL).
12. Require all rental/leasing agencies to attach a disclosure statement (NHTSA advisory) to all lease/rental agreements for 15-passenger vans.

13. Commission NHTSA to determine the distribution of ownership of 15-passenger vans. Monitor the ownership of these vans to determine ownership trends. If ownership is shifting from companies/organizations to individuals issue a consumer warning to those individuals.

14. Include tire TIN in the FARS database to obtain better data on the scope and relationship of "aged" tire failures to fatal accidents.

15. Expand inspection procedures, in the states that require vehicle inspections, to include tire age and load rating in addition to tread depth.

July 9, 2008

American Center for Van and Tire Safety

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Mission Statement

To reduce the number of fatalities in accidents involving 15-passenger vans and/or “aged” tire failures by ...

- Bringing awareness of the dangers of 15-passenger vans and the dangers of “aged” tires to as many of the general public as possible
- Developing and promoting guidelines for safer operation of 15-passenger vans and to reduce the risk of “aged” tire failures
- Working with legislators and NHTSA to improve and enhance the design, performance, testing & reporting requirements and safe operation of 15-passenger vans and tires

Dedication

This company is dedicated to Alexis “Lexie” James and to all of those who have lost their lives in vehicle accidents ... especially those who have died in 15-passenger van single vehicle rollover accidents caused by the massive failure of an “aged” tire.

Motto

“And in the end, it’s not the years in your life that count. It’s the life in your years.”

- Abraham Lincoln -

Patrick James & Roderick Koehler
January 2008

American Center for Van and Tire Safety

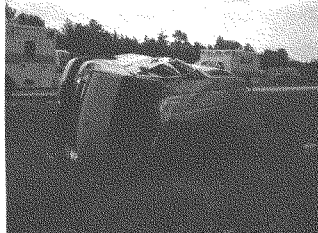
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My name is Patrick James. This is a picture of my ten year old daughter, Alexis James. She was killed July 17, 2007 in a 15-passenger van accident in South Carolina. The accident resulted from the failure of the left rear tire. When the tire failed the van rolled over and my daughter was ejected from the vehicle, even though she was wearing her seat belt. It was a lap belt only, 3-point lap/shoulder belts were not required in this van when it was manufactured in 1994. According to the accident report, the weather was clear, all were wearing their seat belts and the van was being operated within posted speed limits. No citations were issued. At the time, she was traveling with close family friends from Greenville, SC to Savannah, GA on I-26. She was an avid softball player and was on her way to play in a tournament in Savannah with her team. She was the only one ejected from the vehicle and the only one to have fatal injuries. Four others were in the van ... two adults and two additional children ... they all received minor injuries.



After the accident I did some research into 15-passenger vans and found that they have experienced significant rollover problems since they were first introduced in the early 70's. Further, they have not been subjected to the same federal safety standards and test requirements as have been applied to similar multi passenger vehicles such as SUVs and minivans.

This is a picture of the van in which my daughter was riding. This shows the damage to a 15-passenger van that can be expected when a rollover occurs while traveling at legal interstate highway speed.



Over the years there have been numerous fatal, single vehicle rollover accidents with these 15-passenger vans. Many of these resulted from rear tire failures virtually identical to the accident that killed my daughter and have been documented by the National Transportation Safety Board (NTSB) and the National Highway Traffic Safety Administration (NHTSA).

According to the NHTSA, from 1997 through 2006 there were 1,090 fatalities of van occupants resulting from crashes involving these 15-passenger vans. Of the 1,090 fatalities, 534 resulted from largely preventable single vehicle rollover crashes of the 15-passenger vans. The propensity for rollovers of these vans have been well known by the government and the manufacturers for years and until recently nothing more than consumer advisories have been issued by NHTSA.

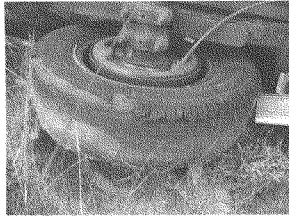
Within the last couple of years NHTSA has enacted new federal safety standards and rules to address a number of problems with these vehicles, as follows ...

1. Lap/shoulder belts are now required in all new vans for all seating positions.
2. All new vans must now be equipped with electronic stability control (ESC) to help reduce the risk of rollover.
3. All new vans must be equipped with tire pressure monitoring system to help reduce the risk of tire failure.
4. Many of the federal motor vehicle safety standards are being expanded to cover 15-passenger vans and to provide better containment and protection of occupants in the event of a rollover.
5. 15-passenger vans must now include rollover risk star rating on the new vehicle sticker.

These changes should improve the safety of new vans, but will do nothing for the estimated 550,000 15-passenger vans on the road.

Since the accident I have also found out that the tire that failed had been put on the van just prior to the fatal trip ... It was identical in size and rating to the original tires on the van... It appeared to be "new" and never used, but inspection of the tire after the accident revealed, from the DOT number, that it was thirteen years old. It was the unused spare tire. It was installed on the van at a tire dealership/shop and no mention was made as to the age of the tire or any possible danger. The accident report said the rear tires "appeared to be in new condition".

I have since discovered that tires "age" over time whether they are actually used on the road or not. It is a slow oxidation process that breaks down the internals that hold the tire together. In many cases there are no outward signs of this deterioration ... Because of numerous accidents and wrongful death law suits, many car and tire manufacturers are now recommending that tires (including the spare) be replaced after six years, regardless of the amount of tread. Various consumer groups have for years tried to get "expiration dates" on tires. To date, this effort has been successfully resisted by the tire manufacturers. They are required to show the date of manufacture on tires ... but no expiration date ... unfortunately, the date of manufacture is embedded in the DOT code and frequently only on the inward sidewall making it difficult to read.



This is a picture of the tire that failed and caused my daughter's accident. Had an expiration date been on that tire, it would not have been installed on the van and the accident likely would never have happened.

Since the accident I have met with numerous legislators in Washington DC to investigate the safety of these vans. I have also had a meeting with NHTSA and communicated with NTSB to find out what they're doing to improve the safety of these vans. As mentioned above, much has been done to improve the safety of new vans being manufactured ... but ... more needs to be done to improve safety for both the new vans and the estimated 550,000 15-passenger vans currently on the road !

I believe there is a lack of public awareness of the dangers of these vans and the danger of "aged" tires. As a result, I have formed this non-profit company with the mission of bringing awareness of the dangers of these vans and of "aged" tires to as many people as possible in hopes that this effort will save lives. I plan to dedicate my life to this effort in honor of my daughter.

Although I would prefer that all 15-passenger vans be taken off the road, I realize this won't happen. ... so I'm asking that if you must drive a 15-passenger van or ride in one, please, please be aware of the dangers and follow the attached safety guidelines. I don't want another family to go through the pain I've experienced since Lexie's accident.

Please contact me if you have questions or comments.

Patrick James
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Knoxville, TN

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15-Passenger Van Safety Guidelines

1. When a 15-passenger van is not full, passengers are to sit in seats that are in front of the rear axle.
2. Never allow more than 15 people to ride in a 15-passenger van.
3. Require all passengers and the driver to wear proper safety restraints (seat belts - preferably 3-point lap/shoulder belts) any time the van is in motion. Inspect seat belts regularly ... replace any missing, broken or damaged belts and/or buckles.
4. Inspect the tires, including the spare ... determine the date of manufacture of each tire from the DOT code (may only be on the inboard sidewall). The DOT code will end with either 3 numbers or 4 numbers ... if three numbers, the tire was manufactured in the 90's, the last number is the year and the first two are the week in that year ... example "168" would be the 16th week of 1998. If four numbers, the tire was manufactured in 2000 or later ... the first two numbers are the week and the last two numbers are the year ... example "2303" would be the 23rd week of 2003.
5. Replace all tires that are more than six years old. It is critical to remember that low mileage doesn't mean tires are safe. Tires deteriorate with time whether they are used or not ... And, unfortunately, dangerously deteriorated tires cannot always be detected by visual inspection alone. When buying new tires be sure to get the date of manufacture of each tire. If they are more than a year old, do not buy them. Remember they have a six year life from the date of manufacture not from the date they are installed on your van.
6. Be sure all tires are the proper size and load rating for the van. Recommended tire size and load rating should be in the owner's manual.
7. Inspect the tires before each use. Examine tires for uneven wear, cracks, and other damage. Replace any damaged tires.
8. Check tire pressure before each use. Beware ! ... required front and back tire pressures may be very different and are likely higher than required for car tires ... typically van tires must be inflated to 50 lbs. for the front tires and 80 lbs. in the rear tires. The manufacturer's recommended pressure is usually provided on the driver's doorsill or in the owner's manual.
9. Do not overload the van. See the owner's manual for maximum allowable total weight of passengers and cargo.
10. Do not strap any cargo onto the roof or back of the van.
11. Do not tow anything behind the van.
12. Be certain the driver has a valid driver's license for the state where they reside (a commercial driver's license is preferred). Be aware that van drivers need additional training since these vans handle differently than other vehicles, especially when fully loaded. Allow no one under the age of 21 to drive the van. Select one or two drivers to drive the van on a regular basis. Insist that a new driver get experience driving the van alone before driving with others in the van. Remember a 15-passenger van is substantially longer and wider than a car, thus it ...
 - Requires more space and additional reliance on the side-view mirrors for changing lanes.
 - Does not respond as well to abrupt steering maneuvers ... such as might occur with a blowout or dropping off the edge of the pavement.
 - Requires additional braking time.

13. Limit drive time to 8 hours per driver per 24 hours. Ban driving from midnight to 6 a.m. ... the van is dangerous enough without fatigue and poor visibility.
14. Be absolutely certain the driver is not under the influence of alcohol or drugs.
15. The driver is to be well rested and attentive to driving. Prohibit use of a cell phone by the driver while the van is in motion. Limit conversation with other passengers.
16. Drive at a safe speed based on driving conditions ... never more than the speed limit ... and with a maximum of 60 mph regardless of the conditions and speed limit. Always slow down if the roads are wet or icy.
17. Keep the gas tank as full as practically possible. A full tank of gas lowers the center of gravity and reduces the risk of rollover.
18. Remove the last row of seating. Do not stow cargo in the van any higher than the bench level of the seats.

American Center for Van and Tire Safety

June 2008

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Facts supporting the need for an awareness program for owners and operators of 15-passenger vans

1. From 1997 through 2006 there were 1,090 fatalities of van occupants resulting from crashes involving 15-passenger vans. Of the 1,090 fatalities, 534 resulted from largely preventable single vehicle rollover crashes of the 15-passenger vans¹.
2. 15-passenger vans are more prone to rollover. In 2005, 59% of the fatalities in 15-passenger van crashes occurred in single-vehicle rollover crashes². This rate is higher than the rollover fatality rates for any other passenger vehicle type³.
3. The odds of rollover for a 15-passenger van increase more than 400 percent when the van is fully loaded compared with a driver traveling alone. This increase is significantly higher than the percentage increase in any other type of passenger vehicle⁴.
4. 15-passenger vans require special driver skills. They are larger, with high centers of gravity making them less stable than vehicles such as cars. Adding passengers increases the center of gravity causing them to be increasingly difficult to handle and less stable⁵.
5. The death rate for all occupants was higher for 15-passenger vans than for other passenger vehicle types combined. During the period 2001-05 the death rate for 15-passenger vans was 250 per million registered vehicles versus 151 for all other vehicles⁶.
6. Impressing upon 15-passenger van drivers the inherent dangers of operating these vehicles, particularly when fully loaded, and educating them about proper handling and control, particularly during emergency situations, can reduce the risk of rollover. Such training can also help dispel the expectation that these vans operate like large passenger cars⁷.
7. Nearly 80 percent of those who died in 15-passenger van rollovers nationwide between 1990 and 2003 were not buckled up. Wearing safety belts dramatically increases the chances of survival during a rollover crash. In fatal, single vehicle rollovers involving 15-passenger vans over the past decade, 91 percent of belted occupants survived⁸.
8. In 2002 only 14% of the 15-passenger van single vehicle fatalities were restrained as compared with 30% restrained in passenger cars⁹. This indicates a much lower use of seat belts by occupants of 15-passenger vans.

¹ Data received from NHTSA's National Center for Statistics and Analysis at a meeting on December 10, 2007.

² Insurance Institute for Highway Safety & Highway Loss Data Institute, Q&A 15-passenger vans – January 2007

³ Id.

⁴ Id.

⁵ Id.

⁶ Id.

⁷ NTSB letter to American Driver and Traffic Safety Education Assoc. dated August 4, 2003.

⁸ NHTSA news release dated May 26, 2005.

⁹ NHTSA report "Analysis of Crashes Involving 15-passenger Vans" (DOT #HS 809 735) dated May, 2004.

9. Recently there have been a number of safety improvements to new 15-passenger vans such as lap/shoulder belts in all seating positions, tire pressure monitoring systems, electronic stability control, expansion of several federal motor vehicle safety standards to now include 15-passenger vans ... all these will improve the safety of new 15-passenger vans but will do nothing for the estimated 550,000 vans currently on the road. Driver education and training, and general awareness of the dangers of these vans are the only viable means of reducing the death rates of these existing vans.
10. Even with all the above mentioned safety improvements, 15-passenger vans have low NCAP rollover ratings. The 2008 Ford E-350 15-passenger van has a two star (out of 5) rollover rating indicating a 30% to 40% risk of rollover¹⁰. The Ford E-350 accounts for approximately 80% of the 15-passenger vans sold annually¹¹. Thus, even with the safety improvements, training for safe operation to reduce the risk of rollover is still needed.
11. According to a 2005 report approximately 74% of all 15-passenger vans had at least one tire misinflated by 25% or more. This compares to 39% of passenger cars with at least one tire misinflated by 25% or more¹². This indicates a lack of training on proper tire maintenance. Over the last ten years tires were a related factor for approximately 20% of all 15-passenger van single vehicle rollover accidents as compared to approximately 3% for all other passenger vehicles¹³.
12. According to a 2008 survey of church and university 15-passenger vans in the Knoxville TN area, the average annual usage of these vans is approximately 6,600 miles per year. Applying this average annual mileage to 15-passenger vans nationally and to the 2006 15-passenger van fatalities, yields a calculated fatality rate per mile driven, for 15-passenger vans, that is 20% higher than for all other passenger vehicles combined.¹⁴
13. These vans have primarily been sold to various schools, universities, churches, day cares and other similar community organizations. As the dangers of these vans have become more apparent and as both federal and state legislation has been passed limiting the use of these vans, many of the vans have been sold by the various organizations to private citizens. In most cases this has been done without disclosure of the dangers these vans pose and the differences in safely operating these vans as opposed to other passenger vehicles. These private citizens purchasing these vans must be made aware of the dangers and precautions to safely operate the vehicles.

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¹⁰ NHTSA's NCAP rating for 2008.

¹¹ North East Region Civil Air Patrol Article dated Aug. 28, 2002.

¹² NHTSA report "12 & 15-passenger Vans Tire Pressure Study: Preliminary Results" dated May, 2005.

¹³ Data received from NHTSA's National Center for Statistics and Analysis at a meeting on December 10, 2007.

¹⁴ Study by R.Koehler & P.James - "Preliminary Study of 15-Passenger Van Mileage and Tire Age in Knoxville, Tennessee" dated April, 2008.

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Facts supporting the need for an awareness program and additional NHTSA study and rule making regarding tire “aging”

1. From 1994 through 2004, NHTSA estimates that about 400 fatalities, annually, may be attributed to tire failures of all types ... current data does not specify the number attributed to tire aging alone, but ... NHTSA states “we do know that tire aging is a significant factor in tire related safety”.¹ In a 2008 Consumer Advisory, NHTSA recommends that motorists should follow their vehicle and tire manufacturer’s recommendations concerning replacement of tires due to age. NHTSA goes on to state that “Old tires are also subject to greater stress, which increases the likelihood of catastrophic failure”.²
2. NHTSA has determined that thermo-oxidative degradation (“aging”) of tires is accelerated with higher temperatures and is a contributing factor for tire failures, such as tread separation.³
3. Traditionally, the end of service life of tires is independent of tire age and is defined as the point when the tread wears down to 2/32 inch. However, tires on some vehicles can be in service for many years and yet accumulate very few miles resulting in little or, in the case of full-size spare tires, no wear. NHTSA estimates that 50 percent of light trucks will still be in service after 14 years of age, and 25 percent after 20 years of age. This prompts concerns about the use of full-size spare tires in these vehicles as few owners replace their full-size spare when replacing the in-service tires.⁴
4. In testing actual “aged” tires, NHTSA has found that ... “An evaluation of the tire and rubber material properties in different areas of the tires confirmed that the tire rubber compounds and the materials that bond them experienced thermo-oxidative degradation during service due to their heat and oxygen exposure over time as well as from service related fatigue. The tires experienced a reduction in peel (adhesion) strength between the steel belts, an increase in hardness of most rubber components, a loss of the rubber components’ ability to stretch, increased crack growth rates, and a reduction in cycles to failure in fatigue tests”.⁵
5. NHTSA’s field study showed structural degradation of tires in terms of internal cracks and separations resulting from the tires being used in service. This internal degradation and damage was nearly impossible to detect from a visual inspection alone.⁶
6. Vehicle manufacturers DaimlerChrysler, Ford, VW/Audi and BMW all recommend a maximum six year service life (from date of manufacture) for tires on their vehicles ... including the spare.⁷
7. In a recent study conducted by North Carolina State University, only 4% of those surveyed identified “aging” as a potential tire problem.⁸

¹ NHTSA Research report to Congress on Tire Aging (DOT HS 810 799) dated August 2007.

² NHTSA Consumer Advisory: Motorists Urged to Check Tires Before Summer Trips – dated June 2, 2008.

³ NHTSA Research report to Congress on Tire Aging (DOT HS 810 799) dated August 2007.

⁴ Id.

⁵ Id.

⁶ Id.

⁷ Id.

⁸ N.C.State University Dept of Psychology “People Do Not Identify Tire Aging as a Safety Hazard” by Jennifer Cowley, Soyun Kim & Michael Wogalter.

8. Spare tires, tires in storage or on a shelf prior to use, or tires that are infrequently used on trailers or recreational vehicles, run the risk of premature aging and may be unsafe even though they may have sufficient amounts of tread or appear "new".⁹
9. A study by Kalsher, Wogalter, Lim and Laughery (2005) suggested that a substantial percentage (26%) of people thought that tires could last 10 years or more. This indicates at the very least, some incomplete consumer knowledge about tire aging.¹⁰
10. In the N.C.State study, approximately half (44.9%) of the participants reported that they have not read the owner's manual for the vehicle they drive. Of those who reported reading the owner's manual, 63.7% reported that they have read less than 50% of the manual.¹¹
11. According to NHTSA approximately 1% of vehicle fatalities are related to tire issues, while in the case of 15-passenger vans, approximately 11% of fatalities are related to tire issues.¹²
12. Tires, like any other rubber product, have a limited service life regardless of tread depth and use. The dangers of "aged" tires is a little known problem outside of the industry and one that is likely the cause of a significant number of tread separation problems. "Aged" tires are often unsuspectingly put into service after having served as a spare, stored in garages or warehouses, or simply used on a vehicle that is infrequently driven. In many instances these tires show no visible sign of deterioration, and absent any visible indicators, tires with adequate tread depth are likely to be put into service regardless of age.¹³
13. Safety Research & Strategies, Inc has documented 159 incidents in which tires that were six years old or older experienced tread/belt separations. These incidents were the cause of 128 fatalities and 168 serious injuries.¹⁴ In a previous study at least a third of these type of incidents involved "aged" spare tires. In most cases these tires were put into service shortly before the accident.¹⁵
14. According to a 2008 survey of church and university 15-passenger vans in the Knoxville TN area, 40% of the vans surveyed had tires that were six or more years old ... over 20% of the vans surveyed had tires that were ten or more years old.¹⁶ This is likely attributed to the relatively low annual use rate coupled with the belief, by most, that tire life is strictly a function of remaining tread depth.
15. The accident that resulted in the death of Alexis James in July, 2007 was initiated by the failure (tread separation) of the left rear tire on a 1994 15-passenger van. The tire has been shown to be 13 years old and was unwittingly installed by a tire dealership/shop approximately one month prior to the accident. The accident report stated that from the remaining tire remnants, it appeared to be in like new condition. The tire was likely the original spare tire.

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⁹ Id.

¹⁰ Id.

¹¹ Id.

¹² Data received from NHTSA's National Center for Statistics and Analysis at a meeting on December 10, 2007.

¹³ Safety Research & Strategies – "Tires: Aging Dangerously" dated 2006.

¹⁴ Safety Research & Strategies letter to NHTSA Nicole Nason dated June 2, 2008.

¹⁵ Safety Research & Strategies letter to NHTSA Nicole Nason dated December 20, 2006.

¹⁶ Study by R.Koehler & P.James – "Preliminary Study of 15-passenger Van Mileage and Tire Age in Knoxville, Tennessee" – dated April, 2008.

Preliminary Study
of
15-passenger Van
Mileage and Tire Age
in
Knoxville, Tennessee

Prepared by: Roderick Koehler
and
Patrick James
April, 2008

Background

Over the years there have been a number of fatal 15-passenger, single vehicle, rollover accidents which were initiated by a failure of one of the tires. In many cases the tire failure was in the form of either complete or partial tread separation causing the driver to lose control of the vehicle and resulting in a rollover. From 1997 through 2006, there were 534 fatalities of 15-passenger van occupants resulting from 312 single vehicle rollover accidents. Of those, tires were identified as a related factor in 61 of the accidents and 95 of the fatalities.¹

In 2007, NHTSA issued a research report to Congress on tire aging (DOT HS 810 799). In that report, they state that "it is difficult to estimate, based on crash statistics currently available, how many crashes are caused specifically by tire aging. However, we know that tire aging is a significant factor in tire related safety".² As a matter of fact, several vehicle manufacturers now recommend a maximum six year service life for tires on their vehicles ... including the spare.³

In a recent study conducted by North Carolina State University, only 4% of those surveyed identified "aging" as a potential tire problem.⁴ Indeed, most people identify "tread depth" as the measure of tire life and safety.

Many 15-passenger vans are owned and operated by Churches, Colleges & Universities, Communities Centers, etc. and are not used on a daily or in some cases even a weekly basis. If the annual mileage is low, the possibility exists that the tires could exceed their safe useful life by age in lieu of loss of tread depth.

According to one set of data from R.L.Polk and Company, there were 517,665 15-passenger vans registered nationally in 2006 ... of those, 9,929 were registered in Tennessee.⁵ Additional data from R.L.Polk and Company indicated that, as of July 1, 2006, there were 557,046 15-passenger vans registered in the US.⁶

This study was undertaken to obtain real data on actual mileage of 15-passenger vans and to obtain data on the age of tires installed on those vans.

Data Collection

From mid February, 2008 through early April, 2008 data was collected from a variety of 15-passenger vans in Knoxville, Tennessee. The method was to randomly drive around the Knoxville area in search of 15-passenger vans. Once a van was found there was an attempt to find the owner to distribute van safety information and to obtain permission to record data from the van. In most cases the van VIN number was recorded along with the mileage and the tire manufacturing date from the tire TIN number. This data was then entered into a spreadsheet for analysis and charting.

¹ Notes from Meeting with NHTSA on December 10, 2007

² NHTSA Research Report to Congress on Tire Aging dated August 2007 – page 5

³ NHTSA Research Report to Congress on Tire Aging dated August 2007 – page 34

⁴ N.C.State University Dept of Psychology "People Do Not Identify Tire Aging as a Safety Hazard" by Jennifer Cowley, Soyun Kim & Michael Wogalter.

⁵ Insurance Institute for Highway Safety, letter to Roderick Koehler from Adrian Lund, Ph.D. dated March 11, 2008.

⁶ NHTSA, E-mail to Roderick Koehler from Rajesh Subramanian dated March 6, 2008.

Data from three vans involved in fatal accidents not in the Knoxville area were also included in the study. Data for two of those vans was obtained from a NTSB Accident Report (NTSB/HAR-03/03) ... "15-Passenger Van Single-Vehicle Rollover Accidents, Henrietta, Texas, May 8, 2001, and Randleman, North Carolina, July 1, 2001". Data for the third van was obtained from the accident report for the 15-passenger van, single vehicle accident that occurred near Columbia, South Carolina that resulted in the death of Alexis James on July 17, 2007.

Data was collected for a total of thirty two 15-passenger vans.

Findings

The distribution of the ages of the vans included in this study are very similar to the overall national average. Thus, a case might be made that the actual data collected may be representative of all 15-passenger vans in the US.

Model Year	Knoxville Study		National	
	Number	% Total	Number	% Total
1993 and older	8	25.0%	165,643	30%
1994-1998	8	25.0%	170,822	31%
1999-2003	10	31.3%	196,857	35%
2004 & newer	6	18.8%	23,724	4%
Total	32	100.0%	557,046	100%

The average age of the vans in this study is 10.5 years vs. a national average of 12.5 years as of 2006.⁷

Tire ages were recorded for 30 of the vans as follows ...

Tire Age	No. Vans	% Total
1-2 yrs	7	23.3%
3-4 yrs	5	16.7%
5-6 yrs	7	23.3%
7-8 yrs	4	13.3%
9-10 yrs	2	6.7%
10+ yrs	5	16.7%
Total	30	100.0%

40% of the vans had tires that were six or more years old. Over 30% of the vans had tires that were eight or more years old while over 20% of the vans had tires that were over ten years old.

Looking at only the vans that are 10+ years old, approximately 60% of these had tires that were eight or more years old while approximately 46% had tires that were ten or more years old.

Mileage was recorded for 28 of the vans. The estimated annual mileage was calculated by dividing the total mileage by the van's age in years based on the model year.

Annual Mileage	
Overall Average	6644
Maximum Average	16250
Minimum Average	2125
Median Average	6353

⁷ Insurance Institute for Highway Safety, letter to Roderick Koehler from Adrian Lund, Ph.D. dated March 11, 2008.

Conclusions

1. Based on the data collected approximately 23% of all 15-passenger vans have tires that are ten or more years old. According to the NHTSA research report on tire aging, ten years is the maximum service life recommended by the tire manufacturers.⁸ Applying this to the total number of 15-passenger vans registered in the US, it can be estimated that approximately 110,000 to 120,000 of the 15-passenger vans on the road today might have tires that are ten years old or older ... this is considered beyond the maximum safe service life by the tire manufacturers and thus at risk of failure by aging.

2. Several of the documented single rollover accidents that occurred in the southern states involved tires that were eight or more years old. It is believed that the higher temperatures in the southern states accelerate the tire aging process.⁹ Southern states, including Florida, South Carolina, Georgia, Alabama, Mississippi, Louisiana, Texas, Arizona, New Mexico, Nevada and California, had a total of 188,000 15-passenger vans registered in 2006.¹⁰ The data collected in this study showed that approximately 33% of all the vans had tires that were eight or more years old. Based on this it can be estimated that approximately 60,000 of all the 15-passenger vans in the southern states listed might have tires that are at possible risk of failure due to aging.

3. The data collected indicates that the general public who own and operate these vans are unaware of the dangers of aged tires. The vast majority believe that safe tire life is based only on tread depth. Thus tires are in service until the tread depth reaches the recommended minimum or until severe cracking or other visible deterioration is evident. The data collected indicated that on average these vans are driven approximately 6,600 miles per year. This is less than half the national average for all passenger vehicles. Most OEM tires have a tread life of at least 60,000 to 70,000 miles. Thus if one only looks at tread depth, it is easy to see that even well meaning, observant van operators could keep tires on their vans for over ten years.

4. Considering the estimated 15-passenger van average mileage driven per year ..., the number of 15-passenger vans registered ... and the number of 15-passenger van occupant fatalities per year, one can calculate the 15-passenger van fatality rate per 100M VMD.

This table shows the results of that calculation for the years 2005 and 2006 and compares those number with the actual numbers for all passenger vehicles for the same two years.

	2005	2006
Estimated 15-passenger van 100M VMD/yr	33	34
15-passenger van occupant fatalities/yr	99	58
15-passenger fatalities per 100M VMD	2.98	1.69
All passenger vehicles fatalities per 100M VMD	1.45	1.41
15-passenger fatalities vs. all passenger vehicles	105%	20%

This indicates that even though the fatality rate for 15-passenger vans has declined significantly, it is still 20% higher than the national average for all passenger vehicles. Thus the 15-passenger vans can still be considered one of the most deadly vehicles on the road today.

⁸ NHTSA Research Report to Congress on Tire Aging dated August 2007 – page 33

⁹ Id

¹⁰ Insurance Institute for Highway Safety, letter to Roderick Koehler from Adrian Lund, Ph.D. dated March 11, 2008

Recommendations

1. Request NHTSA to conduct a nationwide survey to confirm or perhaps to dispute the data collected in this report in the Knoxville area.
2. Based on the outcome of that nationwide survey, request NHTSA to issue an alert to all owners/operators of 15-passenger vans regarding the dangers of tire aging ... include instructions as to how to determine tire age and recommendations for maximum service life.
3. Continue to encourage NHTSA to improve the Federal Motor Vehicle Safety Standards and to continue to extend those standards to 15-passenger vans.
4. Continue to distribute the attached 15-passenger vans Safety Guidelines to the owners and operators of the vans ... and encourage compliance with the Safety Guidelines.

15-Passenger Van Safety Guidelines

1. When a 15-passenger van is not full, passengers are to sit in seats that are in front of the rear axle.
2. Never allow more than 15 people to ride in a 15-passenger van.
3. Require all passengers and the driver to wear proper safety restraints (seat belts - preferably 3-point lap/shoulder belts) any time the van is in motion. Inspect seat belts regularly ... replace any missing, broken or damaged belts and/or buckles.
4. Inspect the tires, including the spare ... determine the date of manufacture of each tire from the DOT code (may only be on the inboard sidewall). The DOT code will end with either 3 numbers or 4 numbers ... if three numbers, the tire was manufactured in the 90's. the last number is the year and the first two are the week in that year ... example "168" would be the 16th week of 1998. If four numbers, the tire was manufactured in 2000 or later ... the first two numbers are the week and the last two numbers are the year ... example "2303" would be the 23rd week of 2003.
5. Replace all tires that are more than six years old. It is critical to remember that low mileage doesn't mean tires are safe. Tires deteriorate with time whether they are used or not ... And, unfortunately, dangerously deteriorated tires cannot always be detected by visual inspection alone. When buying new tires be sure to get the date of manufacture of each tire. If they are more than a year old, do not buy them. Remember they have a six year life from the date of manufacture not from the date they are installed on your van.
6. Be sure all tires are the proper size and load rating for the van. Recommended tire size and load rating should be in the owner's manual.
7. Inspect the tires before each use. Examine tires for uneven wear, cracks, and other damage. Replace any damaged tires.
8. Check tire pressure before each use. Beware ! ... required front and back tire pressures may be very different and are likely higher than required for car tires ... typically van tires must be inflated to 50 lbs. for the front tires and 80 lbs. in the rear tires. The manufacturer's recommended pressure is usually provided on the driver's doorsill or in the owner's manual.
9. Do not overload the van. See the owner's manual for maximum allowable total weight of passengers and cargo.
10. Do not strap any cargo onto the roof or back of the van.
11. Do not tow anything behind the van.
12. Be certain the driver has a valid driver's license for the state where they reside (a commercial driver's license is preferred). Be aware that van drivers need additional training since these vans handle differently than other vehicles, especially when fully loaded. Allow no one under the age of 21 to drive the van. Select one or two drivers to drive the van on a regular basis. Insist that a new driver get experience driving the van alone before driving with others in the van. Remember a 15-passenger van is substantially longer and wider than a car, thus it ...
 - Requires more space and additional reliance on the side-view mirrors for changing lanes.
 - Does not respond as well to abrupt steering maneuvers ... such as might occur with a blowout or dropping off the edge of the pavement.

- Requires additional braking time.
13. Limit drive time to 8 hours per driver per 24 hours. Ban driving from midnight to 6 a.m. ... the van is dangerous enough without fatigue and poor visibility.
 14. Be absolutely certain the driver is not under the influence of alcohol or drugs.
 15. The driver is to be well rested and attentive to driving. Prohibit use of a cell phone by the driver while the van is in motion. Limit conversation with other passengers.
 16. Drive at a safe speed based on driving conditions ... never more than the speed limit ... and with a maximum of 60 mph regardless of the conditions and speed limit. Always slow down if the roads are wet or icy.
 17. Keep the gas tank as full as practically possible. A full tank of gas lowers the center of gravity and reduces the risk of rollover.
 18. Remove the last row of seating. Do not stow cargo in the van any higher than the bench level of the seats.

American Center for Van and Tire Safety

June 2008

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Data Collected

<u>date</u>	<u>location</u>	<u>make</u>	<u>Model</u>	<u>year</u>	<u>mileage</u>	<u>mfg date</u> <u>tires</u>	<u>tire age - yrs</u>
2/20/2008	Church	Dodge	Ram 250 Royal	1984	51,000	358	10
2/20/2008	Church	Dodge	SE	2002	13,000	4607	1
2/20/2008	Church	Dodge	Ram 3500	1986	95,200	367	11
2/20/2008	Church	Dodge	Ram (15-passenger)	1986	69,637	3004	4
2/21/2008	Church	Ford	350 Royal	2000	38,189	0503	5
2/21/2008	Church	Dodge	350	1996	100,000	0707	1
2/21/2008	Church	Dodge	Ram 3500	1985	132,000	???	
2/21/2008	Church	Ford	Ram E350 XL	1999	77,760	1604	4
2/21/2008	Church	Ford	SuperDuty	2005	10,000	4304	4
2/21/2008	Church	Chevrolet	Express	2002	55,000	4301	7
2/21/2008	Church	Chevrolet	Express	1996	104,000	1603	5
2/21/2008	Church	Ford	Club Wagon	1994	60,137	183	14
9/6/2006	Individual	Dodge	Ram (15-passenger)	1993	44,156	???	8
5/8/2001	Church	Dodge	Ram 350 Maxi	1989	74,465	???	8
7/1/2001	Church	Dodge	Ram Maxi	1994	110,282	208	10
3/14/2008	Church	Ford	Club Wagon XLT	1994	105,209	4703	5
3/14/2008	Church	Dodge	RAM LE	1997	74,644	4703	5
3/14/2008	Church	Dodge	Ram 3500	1997	28,948	107	11
4/2/2008	Church	Dodge	Ram 3500	2001	???	1506	2
4/2/2008	Church	Ford	E-350	2006	???	4404	4
4/2/2008	Church	Dodge	Ram 3500	1989	81,451	227	11
4/2/2008	Church	Dodge	Ram 3500	2000	???	509	8
4/2/2008	Church	Ford		1990	87,520	415	13
4/2/2008	Church	Ford		1998	???	1002	6
4/4/2008	University	Dodge	Ram 3500	2002	50,484	0406	2
4/4/2008	University	Dodge	Ram 3500	2002	48,600	???	
4/4/2008	University	Dodge	Ram 3500	2002	39,000	3207	1
4/4/2008	University	Dodge	Ram 3500 (12 pass)	2000	47,000	1406 & 2406	2
4/4/2008	University	Ford	E-350 (12 pass)	2004	46,000	1507	1
4/4/2008	University	Ford	E-350 (12 pass)	2004	37,000	5003	5
4/4/2008	University	Ford	E-350 (12 pass)	2004	36,000	3105	3
4/4/2008	University	Ford	E-350 (12 pass)	2004	65,000	5103	5

Some Recent 15-Passenger Van Rollover Accidents

June 30, 2008 – Pleasanton, TX

A church van traveling on the interstate with 11 occupants including teenagers ... The left rear tire failed ... the van went out of control and rolled over ... one teenager not wearing a seat belt was ejected ... nine people were injured and sent to the emergency room ... no fatalities.

June 23, 2008 – San Antonio, TX

A 15-passenger van on the interstate with 15 family members going on vacation ... A rear tire failed ... the van went out of control and rolled over ... all taken to the hospital ... two fatalities including a 15 year old boy ... the other 13 suffered non-fatal injuries.

June 14, 2008 – Boardman, OR

A 15-passenger van on the interstate with 15 farm workers plus the driver ... none were wearing seat belts ... The left rear tire failed (tread separation) ... the van went out of control and rolled over ... all taken to the hospital ... three were critically injured ... no fatalities.

May 23, 2008 – Louisville, KY

A church van traveling on the interstate ... The left rear tire failed ... the van went out of control and rolled several times ... five elderly women sent to the hospital with injuries ... one was ejected ... no fatalities.

February 24, 2008 – Ocala, FL

A church van traveling on the interstate ... van went out of control and rolled ... cause not reported ... 12 occupants taken to the hospital ... no fatalities.

February 17, 2008 – North Mankato, MN

A church van traveling on the interstate ... high winds cause the van veer off the road ... van went out of control and rolled over ... only minor injuries reported ... all (eight students and two adult leaders) were wearing seatbelts ... no fatalities.

January 12, 2008 – Hanover, NH

A 12-passenger van on the interstate ... van veered off the pavement ... van went out of control and rolled several times ... nine girls sent to the hospital ... they were all members of a collegiate track team ... three sustained serious injuries, including spinal cord, neck and internal injuries ... all were reportedly wearing seatbelts ... no fatalities.

January 18, 2008 – Onawa, IA

A college van on the interstate towing a trailer ... driver attempts to take evasive action to miss a slowing or stopped car ... van skids ... trailer jackknifes ... van goes out of control and rolls ... van was carrying ten members of a college wrestling team and their two coaches ... one wrestler was partially ejected and killed ... he was not wearing a seatbelt ... all other occupants were wearing seatbelts and received only minor injuries.

January 15, 2008 – Phil Campbell, AL

A van transporting workers to place of employment ... the van was traveling on a state road ... van goes out of control and rolls ... eight injured and taken to the hospital ... one person ejected and killed.

January 12, 2008 – Bathurst, New Brunswick

A van transporting members of a boys high school basketball team ... Van was traveling on a two-lane highway ... road was likely somewhat snow covered and slick ... driver lost control ... van skidded into incoming traffic and was hit broadside by a tractor-trailer truck ... seven students and one adult were killed.

January 12, 2008 – Hartford, CT

A 15-passenger van traveling on the interstate ... van veered off the pavement, went out of control and rolled ... cause not reported ... nine occupants injured and hospitalized ... no fatalities.

December 27, 2007 – Prince George, British Columbia

A 15-passenger van with 11 occupants traveling on the highway ... van attempts to pass a vehicle ... goes off edge of pavement, goes out of control and rolls ... all eleven occupants received minor injuries ... no fatalities..

December 1, 2007 – Wingate, IN

A college van carrying members of a hockey team traveling on a state highway ... slick roads with rain and sleet ... van slides, goes out of control and rolls over ... one student is killed and seven are injured.

November 8, 2007 – Round Rock, TX

A church van traveling on the interstate ... van went out of control and rolled ... cause not reported ... three occupants ... two were killed and one was injured.

October 24, 2007 – Alto Bonito, TX

An adult day care van carrying 10 passengers traveling on a U.S. Highway ... van strikes a car that had pulled out of a side road ... van goes out of control and rolls ... seven killed ... three were ejected ... at least four of the seven killed were not wearing seat belts.

October 21, 2007 – Muncie, IN

A church van traveling on the interstate ... The left rear tire failed ... the van went out of control and rolled several times ... five killed including two adults and three children ... eleven injured ... four of the five killed were ejected from the van ...

September 11, 2007 – Bishopville, SC

A church van traveling on the interstate ... The left rear tire failed ... the van went out of control and rolled several times ... van was carrying 16 people ... one killed and others injured ... several were ejected.

July 17, 2007 – Columbia, SC

A former church van carrying members of a youth girls softball team to a tournament ... van was traveling on the interstate ... left rear tire fails ... van goes out of control and rolls ... two adults and two children sustain injuries ... one ten year old is ejected and killed. All were reportedly wearing seat belts.

June 29, 2007 – Daytona Beach, FL

A church-affiliated day-care van was traveling on a county road ... pavement was wet ... van slid off the edge of the road, went out of control and rolled ... ten children injured and one six year old child killed.

April 29, 2007 – Lincoln, NE

A church van traveling on the interstate ... The left rear tire failed ... the van went out of control and rolled several times ... 18 students and 2 adults were riding in the van ... all were hospitalized, three in critical condition ... no fatalities.

November 25, 2006 – Fort Worth, TX

A church van traveling on the interstate ... a tire failed ... the van went out of control and rolled several times ... two adults and eight children injured ... no fatalities.

American Center for Van and Tire Safety

5013 Jade Pasture Lane, Knoxville, TN 37918
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National Highway Traffic Safety Administration
Our Mission: Save lives, prevent injuries, reduce vehicle-related crashes



For Immediate Release
Monday, June 2, 2008

Contact: Rae Tyson
Telephone: (202) 366-9550

CONSUMER ADVISORY: Motorists Urged to Check Tires Before Summer Trips

The risk of a serious crash during hot weather can be heightened by tires that are worn out, under-inflated or too old, the National Highway Traffic Safety Administration said today.

To reduce the risk of a crash, NHTSA Administrator Nicole Nason urged motorists to have tires, including the spare, checked before embarking on a vacation journey.

"Protecting you and your family should be your top priority," said Administrator Nason. "Getting your tires checked will significantly reduce the likelihood of a tire-related crash."

NHTSA research shows that hot weather – and overloaded vehicles – can add significant stress to a tire, especially if it is not properly inflated. Old tires also are subject to greater stress, which increases the likelihood of catastrophic failure.

While tire condition is important for all vehicles, it is especially critical for those more prone to rollover when tires fail. That would include sport utility vehicles (SUVs), pickups or other vehicles with a higher center of gravity.

Consumers can check tire inflation with an inexpensive gauge, using the vehicle manufacturers' recommended pressures, which are found on the driver's side door pillar or in the owner's manual.

The age of the tire can be determined by checking the identification number on the sidewall that begins with the letters "DOT". The last four digits represent the week and year the tire was manufactured.

Some tire and vehicle manufacturers have issued recommendations for replacing tires that range from six to ten years of age. Consumers are advised to check with their tire or vehicle manufacturer for specific guidance.

"Remember that it is vitally important to check your spare tire too," said Administrator Nason. "Your spare can be a real safety hazard if it is old or under-inflated."

For more information on proper tire care, along with NHTSA's tire rating guide, visit www.safercar.gov.



National Highway Traffic Safety Administration
Our Mission: Save lives, prevent injuries, reduce vehicle-related crashes



Close
Window

NHTSA 04-08
Monday, May 12, 2008

Contact: Rae Tyson
Telephone: (202) 366-9550

Nation's Top Vehicle Safety Official Urges 15-Passenger Van Users to Drive with Caution this Summer

New research from the National Highway Traffic Safety Administration (NHTSA) has found June through August to be the deadliest time of year for 15-passenger van occupants, due to rollover crashes. Statistics show that 31 percent of fatal rollovers involving 15-passenger vans occur during the busy summer travel months.

NHTSA Administrator Nicole R. Nason is urging all 15-passenger van users to take appropriate safety precautions when taking to the road during this busy travel season.

"The last thing we want is a summer outing to turn into a tragic memory," Nason said.

NHTSA data shows a significant increase in rollover risk when the van is fully loaded with drivers and passengers. In 2006, 50 percent of occupant fatalities that occurred were in vans that were fully loaded. Fifty-nine percent of those killed were unbelted.

Other factors that contribute to rollover incidents include improperly inflated tires, poor tire condition and inexperienced drivers. Owners should follow manufacturers' recommendations for replacing old tires because tires may become less safe after a certain period of time, even if they have adequate tread and proper inflation.

"For a safe trip buckle up, check the tire pressure and make sure an experienced driver is behind the wheel before heading out on the roads this summer," said Nason.

Overall statistics show the number of deaths in 15-passenger van rollover crashes has been declining steadily since 2001. However, these vehicles still pose a safety risk to occupants, claiming the lives of 58 people in accidents in 2006.

To view the report click here: <http://www-nrd.nhtsa.dot.gov/Pubs/810947.PDF>

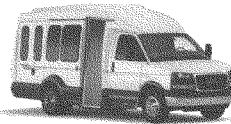
For more information about 15-passenger van safety visit www.safercar.gov

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Options to improve the safety of 15-passenger vans

1. The best and safest option of all is to get a small bus that will meet all federal bus safety standards in lieu of a 15-passenger van. A number of manufacturers offer these vans such as the one pictured here.

These vans are currently available from a number of manufacturers and have a cost from the mid-\$40K. Cost depends on size and options selected.



2. The next best option is to add dual wheels to an existing 15-passenger such as pictured below. With this option tire redundancy is added so the risk of loss of control if a rear tire fails is reduced. It also reduces the load per rear tire by half.



An additional advantage of this option is the added weight of the two additional tires. The wheels and related parts lower the center of gravity of the vehicle by approximately ¼" ... This may not sound like a lot but considering the lower center of gravity and

the increase in the track width of the rear tires, the risk of rollover, as determined by NHTSA's new car assessment risk model, is reduced by about 10 percentage points ... With this change, it's estimated that the nominal baseline risk of rollover is lowered from approximately 30% to approximately 20%.



This modification is available at a number of service garages around the country. Cost of this conversion, including seven new tires (6 in service & 1 spare) is in the \$3,000 to \$4,000 range.


3. If it is not possible to replace your 15-passenger van with a small bus ... or if funds are not available to convert your 15-passenger van to dual rear wheels ... at a minimum, diligently follow the safety guidelines as issued by American Center for Van and Tire Safety ... Just following these guidelines will reduce the number of single vehicle rollover accidents and thus reduce the number of related fatalities. Had these guidelines been in place, the accident that caused Alexis James to lose her life might never have happened.

To: Whom It May Concern

Alexis, as a first grader possessed spunkiness like no other student I have taught. She was curious, always asking why. She wanted to know more than the lesson entailed. Humor was a part of her, making her classmates laugh and feel at ease around her. As a result, she had many friends. Alexis was high-spirited. Her excitement for learning and for having fun was contagious. Peers were often swayed by her enthusiasm and joined into class activities more easily because of Alexis' exuberance.

Alexis, as a big sister to her brother Austin, nurtured with compassion and encouragement. Austin was a first grader and Alexis often checked on him to see if he was ok. It became an everyday occurrence for her to check to see if Austin had a good day behaviorally. If he had stayed on 'green', she tossed him a water bottle. His eyes would light up as if she had given him the greatest gift ever. If he was not on 'green', she gave him a quick hug and whispered, "do better tomorrow." Alexis took the role of big sister seriously.

Alexis will be missed by teachers, friends, and family. Those whose lives might have crossed paths with Alexis will miss out on getting to know a beautiful girl, both physically and spiritually.

Respectfully submitted,

Cindy Crain
First Grade Teacher
Mountain View Elementary School



Motorcycle Riders Foundation

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Statement of

Senator Robert Letourneau

New Hampshire State Senator

Chairman of the NH Senate Transportation Committee

Lifelong Motorcyclist

Representing the Motorcycle Riders Foundation

Before the

Transportation and Infrastructure Committee

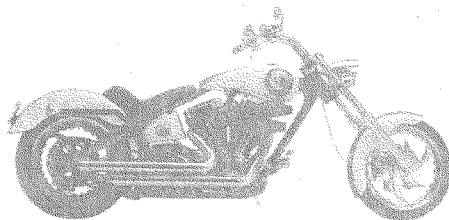
US House of Representatives

Subcommittee on Highways and Transit

July 16th 2008

Regarding

Highway Safety Programs





Motorcycle Riders Foundation

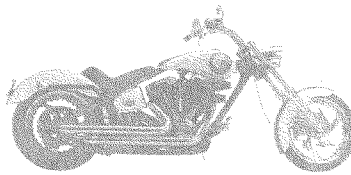
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Chairman Defazio, Mr. Duncan, and members of the Highways and Transit Subcommittee, thank you for inviting me to testify today on behalf of American motorcyclists'. My name is Senator Robert Letourneau and I am here representing the Motorcycle Riders Foundation (MRF) which is a coalition of state's motorcyclists' rights organizations and individual members representing about 275,000 motorcyclists. I also serve as chairman of the New Hampshire Senate Transportation Committee. I also serve as a member of the state Motorcycle Rider Education Advisory Board and the Governor's Motorcycle Safety Task Force of the New Hampshire Highway Safety Agency. Additionally, I have been motorcycle rider for 41 years.

2010 funds

I appreciate the opportunity to provide your subcommittee with some thoughts the MRF has on highway safety programs administered by the National Highway Traffic Safety Administration (NHTSA). The members of the MRF are appreciative that in the SAFETEA-LU legislation section 2010 provided \$25 million specifically for motorcycle safety rider education and motorist awareness of motorcycles. We are in the middle of the second year of disbursements to the 47 states that applied and have seen the money going to extremely worthwhile programs. Funding shortfalls for motorcycle safety are present across the country. Only twenty four (24) states report that safety programs operate from user fees alone. Eighteen (18) states use a combination of user fees, dedicated state funding and federal funds. Three (3) states use only federal funds. Making matters even worse, during this time of budget shortfalls many Governors are raiding the dedicated safety funds generated by licensing fees from motorcycles to pay for non-transportation programs. When states are running a deficit, they often turn to motorcycle safety funds as a piggy bank. We hope that next reauthorization not only keep the federal motorcycle safety grant program as a priority but also expands this program exponentially. Many non profit state motorcycle rights organizations (SMRO's) have implemented share the road campaigns and impaired riding reduction programs with private funding sources. These 2010 funds can be made available to the non profit world to help them continue these important endeavors. We ask that Congress continue this practice set for the in SAFETEA-LU. Consider this, under current SAFETEA-LU law the federal government spends \$1 dollar per motorcyclist per year and ask your self if you think that is enough.

My personal experience as a member of the Motorcycle Safety Task Force of the Governors Highway Safety Agency whose responsibility is the use of these funds is very positive. We have been able to purchase new training bikes adding to our fleet opening new possibilities for riders to train. We were able to purchase new helmets for the program most of which are 18 years old. Additionally we were able to provide the MSF "Intersections" video to all of our driver training schools providing valuable education to our new drivers about the issues motorcyclists face on the road daily. This is possible because of the 2010 grants. Your tax dollars truly at work.





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Accident Prevention

Past legislation this committee has crafted included language that specifically directs NHTSA to focus on accident prevention over occupant protection when addressing motorcycle safety. Occupant protection has been successful with other forms of vehicle design, however the frame geometry and inherent exposure of a motorcycle limits any occupant protection success. Accident prevention saves societal costs, reduces injuries and reduces property damage. We ask that you continue to promote outcome oriented accident prevention solutions.

Again, from a personal perspective, on July 5 2008 putting my money where my mouth is I took and passed the advanced "*Skilled Rider Course*" because I know it saves lives, and, yes, I did learn that I have rider's skills I was not using properly. However, more importantly when people ask me if I have taken the course I can say yes and it works...

HOV Lanes

Another provision of past authorization bills passed by this committee creating a safer riding environment was the access for motorcycles to HOV lanes. This action by Congress has resulted in all federally funded HOV lanes are open to motorcycles. When commuting, motorcyclists are safer in a riding environment that has fewer vehicles and traffic is flowing smoothly rather than in congested stop and go traffic. When considering future highway design it is important to include motorcycles and we ask that this same allowance be assured with HOT lanes and PPP's. HOV lane access provides motorcyclists with a safer commuting environment. For that, 6 million American motorcyclists thank Congress.

Motorcyclist Advisory Council

Also included in SAFETEA-LU was language that created an advisory council to provide wisdom to the Secretary of Transportation on motorcycles and the design of highway infrastructure. I am pleased to tell you the initial two-year charter passed by congress has been so successful that the Secretary recently decided to extend the council for another two years.

Another personal note, in light of increased motorcycle fatal accidents during the 2005-riding season; Rep. Packard and I requested the Governors Highway Safety Agency to form a task force to come up with solutions to this increasing problem. You will see that in light of augmented motorcycle registrations, we were able to find ways to decrease the fatality problem through awareness programs, improved rider education programs and new legislation.





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Incentive funds

The MRF understands the need to incentivize certain actions from the states in order to make the roads as safe as possible. We support incentive programs as long as the funds do not come from much need monies to maintain and improve our roads. We support incentive grants that are performance based on reducing accidents and fatalities. Those two items should be the only criteria. The MRF opposes incentive grants that are issued based on states passing specific laws.

Green vehicles

We ask Congress to promote motorcycling as a means of reducing energy consumption and reducing traffic congestion. One way to achieve a safer highway landscape is to follow some international practices that our world neighbors are implementing such as more motorcycle parking and lane sharing. Allowing motorcycles to trickle through red light traffic to get out of the traffic mix has been extremely successful over seas in reducing crashes as well as congestion.

International Efforts

Last month the MRF participated in a meeting held by the Organisation for Economic Cooperation and Development (OECD) and its 30 member Countries in conjunction with International Transport Forum and the Joint Transportation Research Centre in Lillehammer, Norway to develop a list of the top twenty motorcycle safety priorities. Priorities one, three and five all stress proper rider training. Priorities six and seven emphasize awareness campaigns. Two areas the American motorcycle rights community has been promoting for decades.

Rising fatalities

Others on this panel will tell you that motorcyclists make up 3 percent of the vehicles on the road and 10 percent of the fatalities and they would be correct. That sounds like a major problem. However, what they do not tell you paints a very different scenario.

According to June 2008, survey of the State motorcycle safety programs by the Governors Highway Safety Association motorcycle registrations have more than doubled since 1997 and new motorcycle sales have quadrupled since then. Surely when the population is increased, one must expect the crash numbers to climb as well. Simple statistics.

That same report stated this explosion of motorcycle sales from 356,000 in 1997 to 1.1 million today is crippling the rider education programs across the country. Twenty nine (29) States and DC have capacity problems and often have wait times for training more than 12 weeks. This is another reason why Congress needs to invest more money in motorcycle rider education via the section 2010 grant program





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The last time motorcycle deaths were at the rate they are now was 1986 when motorcycle registrations were just under 5 million. In 2006, almost 6.5 million motorcycles were registered in this country. That is another 1.5 million motorcycles and the same number of fatalities. Maybe the motorcycle fatality rate is not as out of control as some would like you to believe.

A Pennsylvania joint House and Senate committee on legislative budget and finance issued a report on June 25th, 2008 on the fatality trends since PA's modernization of its helmet law in 2003 to allow for riders 21 years or older who have completed a motorcycle safety course or have held a valid motorcycle license for 2 calendar years. The report found that "Due to the substantial increase in motorcycle registration, the rate of crashes per 10,000 motorcycle registrations actually declined from 132.4 in CY (Calendar Year) 2000 to 113.2 crashes per 10,000 motorcycle registrations in CY 2007". The report also showed that helmeted riders involved in a collision dropped from 67% in 2000 to 57% in 2007.

When motorcycle safety is addressed, it almost always revolves around one controversial issue. Helmet laws. All but three States have one version or another of a helmet law on the books. Twenty seven (27) states allow riders to exercise choice when donning personal protective equipment and the remaining 20 require all riders to wear a helmet of some sort. If helmet laws worked there would be a sharp contrast concerning crash data between States that require universal helmet use and those that do not. I am here to tell you that is not the case.

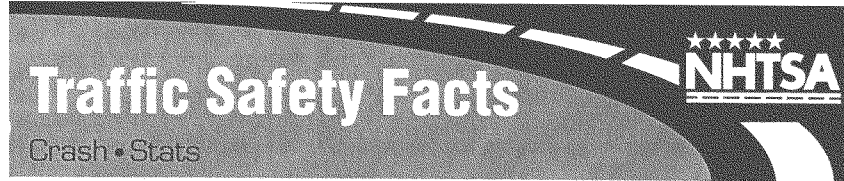
According to a National Highway Traffic Safety Administration August 2007 publication two of the three states that had the largest increase in fatalities from 05-06 have universal helmet laws (AL and CA) and of the three states with single largest decrease in motorcycle fatalities over the year before two states (IL and NH) have no helmet requirement whatsoever and the third (OH) allows for experienced riders to ride without a helmet.

The bottom line is helmet laws do not prevent accidents and as a daily rider, that is the best-case scenario: avoid the crash in the first place. How can we do this? Through proper, affordable rider education offered locally and secondly through widespread motorist awareness campaigns to educate the general motoring public to be aware of motorcycles on the road.

One last personal observation, in New Hampshire during the first 10 years of our motorcycle education program having trained over 23,000 riders only one of those riders was involved in a fatality and we believe that that rider had a medical event. Education is the key to successfully reducing motorcycle fatalities our experience is proof positive.

On behalf of the MRF and Americas motorcyclists', I thank you for this opportunity to present our concerns and views as you consider safety issues in the development of the national transportation system.





DOT HS 810 820

A Brief Statistical Summary

August 2007

Comparison of Motorcycle Rider Fatalities in Traffic Crashes, 2005-2006

Fatalities from motor vehicle traffic crashes declined by 868 (2%) from 43,510 in 2005 to 42,642 in 2006. However, motorcycle rider fatalities increased by 5.1 percent, from 4,576 in 2005 to 4,810 in 2006. Motorcycle rider fatalities as a proportion of overall fatalities increased from 10.5 percent in 2005 to 11.3 percent in 2006. Motorcycle rider fatalities in

the past five years increased by 47 percent, from 3,270 in 2002 to 4,810 in 2006. This data is from the National Highway Traffic Safety Administration's Fatality Analysis Reporting System (FARS). Table 1 shows total fatalities, motorcycle rider fatalities, and motorcycle rider fatalities as percent of total fatalities from 2002 to 2006.

Table 1 Total Fatalities, Motorcycle Rider Fatalities, and Motorcycle Rider Fatalities as Percent of Total Fatalities, by Year

Year	Total Fatalities	Motorcycle Rider Fatalities	Motorcycle Rider Fatalities as Percent of Total Fatalities
2002	43,005	3,270	7.6%
2003	42,884	3,714	8.7%
2004	42,836	4,028	9.4%
2005	43,510	4,576	10.5%
2006	42,642	4,810	11.3%

Source: NCSA, FARS 2002-2005 (Final), 2006 (ARF)

In 2006, 27 States and Puerto Rico had increases and 19 States and the District of Columbia had declines in motorcycle rider fatalities when compared to 2005. There were 4 States with no change in motorcycle rider fatalities from 2005. Of the States that had increases in motorcycle rider fatalities, Florida (94), Alabama (43), and California (37) had the highest absolute increases. The States with the highest percentage increases in motorcycle rider fatalities from 2005 to 2006 were Alaska (125.0%), Kansas (82.9%), and Alabama (69.4%).

Among the States with declines in motorcycle rider fatalities, Illinois (26), New Hampshire (23), and Ohio (20) had the highest absolute declines. Of the States that had decline in motorcycle rider fatality percentage from 2005 to 2006,

New Hampshire (52.3%), Delaware (42.9%), North Dakota (33.3%), and the District of Columbia (83.3%) had the highest declines.

In 2006, the motorcycle rider fatality proportion among overall fatalities was higher than the national average (11.3) in 25 States and Puerto Rico. Motorcycle rider fatality proportion among overall fatalities was highest for Puerto Rico (22.7%) and lowest for the District of Columbia (2.7%). Table 2 shows overall fatalities and motorcycle rider fatalities in the United States in 2005 and 2006, change and percentage change in overall fatalities and motorcycle rider fatalities from 2005 to 2006, and motorcycle rider fatality proportion among overall fatalities in 2005 and 2006 by State.

Table 2: Motorcycle Rider Fatalities in Traffic Crashes by State, Year, Change, Percentage Change, and Motorcycle Rider Fatalities as Percentage of Total Fatalities

State	Motorcycle (MC) Rider Fatalities		Change	% Change	MC Rider Fatalities as Percentage of Total Fatalities	
	2005	2006			2005	2006
Alabama	62	105	43	69.4	5.4	8.7
Alaska	4	9	5	125.0	3.5	12.2
Arizona	138	142	4	2.9	11.7	11.0
Arkansas	63	76	13	20.6	8.6	11.4
California	469	506	37	7.9	10.8	11.9
Colorado	87	74	-13	-14.9	14.4	13.8
Connecticut	43	53	10	23.3	15.5	17.6
Delaware	21	12	-9	-42.9	15.8	8.1
Dist of Columbia	6	1	-5	-83.3	12.5	2.7
Florida	468	562	94	20.1	13.3	16.7
Georgia	144	154	10	6.9	8.3	9.1
Hawaii	30	27	-3	-10.0	21.4	16.8
Idaho	26	36	12	46.2	9.5	14.2
Illinois	158	132	-26	-16.5	11.6	10.5
Indiana	110	110	0	0.0	11.7	12.2
Iowa	45	57	12	26.7	10.0	13.0
Kansas	35	64	29	82.9	8.2	13.7
Kentucky	92	98	6	10.1	9.0	10.7
Louisiana	75	95	20	26.7	7.8	9.7
Maine	15	23	8	53.3	8.9	12.2
Maryland	35	84	49	140.0	13.8	12.9
Massachusetts	56	84	28	50.0	12.7	11.6
Michigan	124	114	-10	-8.1	11.0	10.5
Minnesota	59	67	8	13.6	10.6	13.6
Mississippi	39	55	16	41.0	4.2	6.0
Missouri	31	33	2	6.5	7.2	8.5
Montana	29	26	-3	-10.3	11.2	9.9
Nebraska	29	26	-3	-10.3	11.2	9.9
Nevada	17	18	1	5.9	6.2	6.7
New Hampshire	44	50	6	13.6	13.1	11.6
New Jersey	61	21	-40	-65.6	26.5	16.5
New Mexico	38	37	-1	-2.6	8.2	11.3
New York	162	43	-119	-73.5	7.8	8.9
North Carolina	162	192	30	18.5	11.3	13.2
North Dakota	6	150	144	2400.0	9.8	9.6
Ohio	6	4	-2	-33.3	4.9	3.6
Oklahoma	178	158	-20	-11.2	13.5	12.8
Oregon	77	64	-13	-16.9	9.6	8.4
Pennsylvania	48	44	-4	-8.3	9.9	9.2
Rhode Island	205	188	-17	-8.3	12.7	12.3
South Carolina	44	16	-28	-63.6	16.1	19.8
South Dakota	106	109	3	2.8	9.7	10.5
Tennessee	122	22	-100	-81.9	11.8	11.5
Texas	129	140	11	8.5	10.2	10.9
Texas	354	346	-8	-2.3	10.3	10.0
Utah	23	24	1	4.3	8.2	8.4
Vermont	14	10	-4	-28.6	19.2	11.5
Virginia	69	69	0	0.0	7.3	7.2
Washington	74	80	6	8.1	11.4	12.7
West Virginia	34	38	4	11.8	9.1	9.3
Wisconsin	83	93	10	12.0	11.4	12.8
Wyoming	20	17	-3	-15.0	11.8	8.7
National	4,576	4,810	234	5.1	10.5	11.3
Puerto Rico	90	115	25	27.8	19.7	22.7

Source: NCSA, FARS 2005 (Final), 2006 (ARF)



U.S. Department of Transportation
National Highway Traffic Safety
Administration

Published by NHTSA's National Center for Statistics and Analysis

For questions regarding the above reported data, contact Cherian Varghese, 202-366-1114, or Umesh Shankar, 202-366-5558. This issue of CrashStats and other general information on highway traffic safety may be accessed by internet users at: www.nhtsa.dot.gov/CMSWeb/index.aspx

1200 New Jersey Avenue SE., Washington, DC 20590

Legislative Budget and Finance Committee

A JOINT COMMITTEE OF THE PENNSYLVANIA
GENERAL ASSEMBLY

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<p>SENATORS JOHN R. PIPPY <i>Chairman</i> GERALD J. LAVALLE <i>Vice Chairman</i> JAY COSTA, JR. ROBERT M. TOMLINSON ROBERT C. WONDERLING JOHN N. WOZNIAK REPRESENTATIVES ROBERT W. GODSHALL <i>Secretary</i> DAVID K. LEVDANSKY <i>Treasurer</i> STEPHEN E. BARRAR H. SCOTT CONKLIN ANTHONY M. DELUCA T. MARK MUSTIO EXECUTIVE DIRECTOR PHILIP R. DURGIN CHIEF ANALYST JOHN H. ROWE, JR.</p>	<p>Cyclist Injuries and Fatalities Since the 2003 Repeal of the Mandatory Helmet Law (2008 Update) Pursuant to HR 349 of 2003 June 2008</p>
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Report Summary

Study Background

Effective September 4, 2003, Pennsylvania's 1968 mandatory helmet law was repealed for motorcyclists 21 years of age or older who have either been licensed to operate a motorcycle for not less than two full calendar years or have completed an approved motorcycle rider safety course. Also, any person 21 or older can ride as a passenger without wearing a helmet if the driver meets the above requirements.

These changes resulted from the passage of Act 2003-10, commonly referred to as the Helmet Repeal Law. At the same time, the House of Representatives adopted House Resolution 349 directing the Legislative Budget and Finance Committee (LB&FC) to conduct a study of reported motorcycle crashes and associated injuries and fatalities following passage of the Helmet Repeal Law. Specifically, the resolution requires the Legislative Budget and Finance Committee report to include, but not be limited to, the following:

1.
the number of reported motorcycle crashes for the first two years after the adoption of this resolution and every subsequent two years thereafter;
2.
the number of individuals wearing helmets involved in reported motorcycle crashes; and
3.
the increase, if any, in injuries and fatalities specifically due to head trauma that may be attributed to individuals not wearing helmets.

The LB&FC was to report its findings to the Transportation Committee of the House of Representatives within three years of the adoption of the resolution (i.e., by July 1, 2006), and then issue a subsequent report within two years of its initial report (i.e., by July 1, 2008). The Committee issued its first report covering the period CY 2000 through CY 2005 in June 2006. This, the second report required by the resolution, updates the initial report with data from CY 2006 and CY 2007.

Study Results

As shown, the number of crashes involving motorcycles has been trending upward over the eight-year period examined. Such crashes numbered 4,109 in CY 2007, a 44.6 percent increase over the CY 2000 level. At the same time, a substantial growth in motorcycle registrations is evident, increasing by 69.2 percent from 214,629 in 2000 to 363,109 in CY 2007. Due to the substantial increase in motorcycle registration, the rate of crashes per 10,000 motorcycle registrations actually declined from 132.4 in CY 2000 to 113.2 crashes per 10,000 motorcycle registrations in CY 2007.

Legal Background on Pennsylvania's Helmet Use Law Requirements

Between 1968 and September 2003, helmets were required for motorcyclists in Pennsylvania. Section 3525 of the Vehicle Code provided only one exception to this requirement, i.e., those riding in or operating a three-wheeled motorcycle equipped with an enclosed cab were not required to wear a helmet. The Department of Transportation had the authority to approve or disapprove protective headgear and eye-protective devices and had the authority to issue and enforce regulations establishing standards for such devices. The Department was required to publish a list of all headgear and eye-protective devices that were approved by name and type of device. Act 2003-10, commonly known as the Helmet Repeal Law, amended §3525 of the Vehicle Code to repeal the requirement that all motorcyclists wear protective headgear. Specifically, as a result of Act 10, beginning on September 4, 2003, the following persons are no longer required to wear protective headgear:

- A person 21 years of age or older who has been licensed to operate a motorcycle for not less than two full calendar years.

- A person 21 years of age or older who has completed a motorcycle rider safety course approved by the Department of Transportation or the Motorcycle Safety Foundation.

- The passenger of a person exempt if the passenger is 21 years of age or older.

Under Act 10, the Department retains the authority to approve or disapprove protective headgear and eye-protective devices and also the authority to issue and enforce regulations establishing standards for such devices. The Department also continues to be required to publish a list of all approved headgear and eye-protective devices, by name and device type.

Note: This is an excerpt from the full 76 page report available at:
<http://lbfc.legis.state.pa.us/>



ORGANISATION
FOR ECONOMIC
CO-OPERATION AND
DEVELOPMENT



JOINT TRANSPORT RESEARCH CENTRE

WORKSHOP ON MOTORCYCLING SAFETY - SESSION 4 COUNTER MEASURES - 20 TOP PRIORITIES

1.	Training Develop a tiered approach to motorcycle training which builds upon existing standards, focusing on risk awareness and risk avoidance, understand the limits of the rider/motorcycle capacities.
2.	Fundamental - PTW must have a place in transport policy and infrastructure policy/management & shall be considered by default.
3.	Research and evaluation Counter measures need to be based on good quality research in driver and rider behaviours and evaluations should be conducted.
4.	Training Include in general training for all drivers, a component on awareness and acceptance of motorcyclists, appropriate information seeking strategies
5.	Manufacturers should continue to introduce advanced (better) braking systems
6.	Get safety messages to the riders Partner with rider groups to develop and campaign to riders on issues that will impact their communities
7.	Integrated awareness campaigns. Implement regular, targeted campaigns addressing both motorcyclists and other road users that includes protective equipment, mutual respect, speed and alcohol & drug issues, etc., whenever possible these campaigns should be supported by other actions (such as enforcement).
8.	Individual authorities shall develop guidance for accommodating PTWs relative to their jurisdiction's needs, drawing from best practice, in cooperation with each other, and with input from relevant stakeholders.
9.	Portray responsible riding Expect industry to promote and market motorcycling responsibly (advertising/marketing codes) and expect riding communities to promote responsible behaviour codes.
10.	QVD awareness Set up education activities and campaigns from childhood that "road safety = road sharing".
11.	Develop training for road designers, highway & traffic engineers about PTW
12.	Protective equipment Promote and develop standards for protective equipment, taking into account performance, comfort, ergonomics and costs, that are appropriate for the regions where they would be used.
13.	Policy dialogue Formalize meetings between motorcycle stakeholders and policy makers/road authorities (forums, councils, etc.) to exchange views, discuss needs and secure proportionate financing/resources for safety counter measures.
14.	Identification and rectification of roadway improvements (black spot & corridor analysis) include the input of PTW rider organizations & relevant experts
15.	Enhanced awareness of motorcycles should be incorporated in development of vehicle ITS
16.	Innovation Encourage policy makers to work with stakeholders to test and evaluate specific and innovative measures to promote motorcycle safety.
17.	ITS Intelligent speed warning systems should be encouraged
18.	Global Technical Regulations should be the basis of motorcycle minimum performance standards
19.	WORK TOGETHER!
20.	Automatic Headlights On should be standard

New Hampshire Department of Safety STATISTICAL CRASH SUMMARY

	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Fatal Motor Vehicle Crashes	107	125	120	115	131	117	124	117	116	158	156	116	122
Persons Killed (Fatalities)	118	134	125	128	141	126	142	127	127	171	166	127	129
Alcohol Related Fatalities	34	37	47	44	52	41	57	46	47	52	53	44	41
% of Alcohol Related Fatalities	28.8	27.6	37.6	34.4	36.9	32.5	40.0	36.2	37.0	30.4	31.9	34.65%	31.78%
Operator Killed	59	64	64	75	68	67	78	88	71	91	87	75	70
Adult Occupants Killed	20	21	24	20	25	15	26	16	20	28	21	20	9
Child Occupants Killed	10	6	9	3	9	9	6	4	2	7	4	3	8
Adult Pedestrians Killed	8	18	8	10	4	6	8	5	16	14	5	5	11
Child Pedestrians Killed	3	0	3	1	1	1	2	1	4	1	1	1	2
Motorcycle Operators Killed	14	18	12	16	28	24	19	13	9	25	39	18	23
Motorcycle Passengers Killed	2	3	2	1	3	3	3	0	0	2	3	3	2
Moped Operators Killed	1	1	0	1	0	0	1	0	0	0	1	0	0
OHRV Operators Killed	1	0	0	0	2	0	0	0	3	2	2	0	0
Adult Bicyclists Killed	0	0	3	1	1	0	1	0	2	1	2	1	1
Child Bicyclists Killed	0	3	0	1	0	1	0	0	0	0	1	1	2
Total Crashes Reported	28,875	37,066	30,937	33,686	35,558	37,920	39,639	40,190	41,843	39,555	40,885	34,801	33,553
Total Injuries Reported	17,036	21,493	11,651	13,272	14,010	14,440	15,323	15,835	16,486	15,585	15,965	13,712	13,220
Travel in MVM	10,643	10,987	11,202	11,573	11,894	12,021	12,315	12,578	14,251	14,701	14,649	17,078	
New Hampshire Fatal Rate	1.11	1.22	1.11	1.10	1.18	1.04	1.15	1.01	.89	1.16	1.13	.93	
United States Fatal Rate	1.70	1.70	1.60	1.6	1.6	1.5	1.5	1.51	1.48	1.46	1.45	1.41	
Licensed Drivers in New Hampshire	909,139	924,506	899,402	909,620	928,854	940,328	948,863	957,498	979,316	991,796	1,025,782	1,028,636	
Registered Vehicles in New Hampshire	1,105,680	1,127,714	1,169,142	1,165,925	1,224,750	1,231,322	1,307,712	1,363,799	1,410,289	1,464,070	1,312,170	1,439,081	
Population	1,148,000	1,162,000	1,173,000	1,173,000	1,201,134	1,235,786	1,235,786	1,259,030	1,291,573	1,306,000	1,310,000	1,315,000	
Seat Belt Usage (Annual NH Survey)	57.03	56.03	57.7	58.54	55.97	57.98	58.74	59.27	60.18	63.4	58.1	63.5**	63.8
Child Passenger Safety SeatBelt Usage	84.30	89.4	88.73	91.95	84.47	89.13	91.33	90.87	92.40	92.6	94.2		

* Estimated count
 Prior to 1989, an alcohol related fatal crash was one in which an involved driver or pedestrian had a BAC of .06 or greater.
 In 1989 tracking was started at .04 to conform with the CDL.
 **Unlike prior surveys that included only drivers of NH registered vehicles, surveys conducted in 2006 and forward conform to recently adopted NHTSA criteria that measures belt use by drivers and front seat out-board passengers in vehicles regardless of the state in which the vehicle is registered.
 Effective January 1, 1991, a reportable crash was changed from damage in excess of \$1,000.
 Legislation Effective Dates: Open Container 1/1/92, ALS 1/1/93, .08 1/1/94, .02 9/1/95, BAC for Aggravated DWI lowered from .20 to .16 1/1/97, PBT's as Evidence 1/1/02, Seat belts to age 5 6/26/83, Seat belts to age 12 7/28/89, Child restraints for children under the age of 4 1/1/94, Seat belts to age 18 8/18/97, Primary to age 18 1/1/00, Booster Seats up to age 6 or 55 inches tall 1/1/04
 Drinking Age: age 18 - 6/3/73, age 20 - 5/24/79, age 21 - 6/1/85, Alcohol Ignition Interlock 1/1/02, Graduated Licensing 1/1/98, Bicycle Helmets: 1/1/06 Requires Bicycle Helmets up to age 16.



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Statement of Laura Dean Mooney
President
Mothers Against Drunk Driving
Regarding
**“Improving Highway Safety: Assessing the Effectiveness of NHTSA’s Highway
Traffic Safety Programs”**
Subcommittee on Highways and Transit
House Committee on Transportation and Infrastructure
July 16, 2008

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July 16, 2008**

Chairman DeFazio, Ranking Member Duncan, and members of the subcommittee. Thank you for the opportunity to testify before your subcommittee on the important topic of improving highway safety.

Mr. Chairman, I am pleased to report that significant progress has been made to reduce drunk driving, with a 44 percent reduction in alcohol-related fatalities since 1980 when MADD was founded. This reduction would not be possible without the hard work of law enforcement, prosecutors, NHTSA, state highway safety offices, and others. MADD thanks them as well as you and this committee for leadership on this issue. Perhaps most important, MADD would like to thank the American people, who demanded that progress be made. This has truly been a team effort.

Mr. Chairman, MADD would like to thank the committee for recognizing the seriousness of the impaired driving problem by including programs, studies and funding increases in SAFETEA-LU that target this issue. MADD also would like to commend this committee for including language in the recently passed SAFETEA-LU technical corrections bill which allows states to require interlock devices for repeat offenders after 45 days of hard license suspension. This gives more options to legislators, judges and enforcement teams at the state level.

How I Came to MADD

For more than 16 years, I have worked as a volunteer to try and advance MADD’s mission at the local, state, and national levels.

I became involved with MADD after my husband, Mike Dean, was killed in Texas by a drunk driver leaving me to raise our 8-month old daughter alone. On November 21, 1991, Mike left a business meeting in Oklahoma and drove to the Dallas-Fort Worth area to visit his family.

At 7:15 p.m., a drunk driver going the wrong way on a Texas highway met Mike’s car head on, killing him instantly. The offender, who died at the crash scene, had a BAC of .34 and was driving with an almost empty bottle of Jim Beam whiskey in the vehicle.

Mr. Chairman, as you know this must not be tolerated. In the fight against drunk driving, we must be honest with ourselves. Most of the progress on drunk driving occurred by the mid 1990's thanks to the 21 minimum drinking age, zero tolerance laws, the national .08 standard, administrative license revocation, and especially, tireless leadership by law enforcement.

National Statistics

For the past 10 years, we have been able to sustain this progress, but we have made no further progress. In 2006, there were nearly 13,000 fatalities involving a driver or motorcycle operator with at least a .08 blood alcohol concentration (BAC) and nearly half a million injuries due to alcohol-related traffic crashes. In spite of our progress, there are still more than 1,000 families a month receiving a phone call that their loved one is not coming home due to a drunk driver. In total, there were 17,602 people killed in alcohol-related crashes in 2006 – more than the total number of murders and non-negligent manslaughters (17,034) occurring that year. The sad news is that while your efforts along with those of MADD and other groups have made drunk driving socially unacceptable, it is still tolerated. We simply must do better.

Statistics collected by NHTSA should frighten us all.

- Californians share the road with 310,971 drivers with three or more DUI convictions and 44,210 with five or more.
- In Florida, 108,853 are driving with three or more DUI convictions and 13,054 with five or more.
- In Alabama, there are 22,306 DUI offenders with five or more convictions and 54,043 people with three or more convictions. I should point out that Alabama is one of only three states that do not allow for the use of ignition interlocks.
- Arkansas is home to the single worst drunk driving offender with one individual accounting for more than 40 DUIs.

Faced with this dilemma, MADD looked carefully at the numbers -- each representing a precious life -- to decide what could be done to again reduce drunk driving fatalities and injuries. MADD kept in mind that if we continue doing the same things, we shouldn't expect a different outcome.

Campaign to Eliminate Drunk Driving

Following only those solutions proven to work, MADD, alongside Department of Transportation Secretary Mary Peters, was pleased to announce the Campaign to Eliminate Drunk Driving on November 20, 2006. MADD is pleased to have NHTSA Administrator Nicole Nason serve as the honorary chairman of the Campaign.

The Campaign consists of four parts:

1. Intensive high-visibility law enforcement efforts including twice-yearly national crackdowns consisting of paid advertising to increase public awareness of frequent enforcement efforts that include sobriety checkpoints and saturation patrols in all 50 states.
2. Full implementation of current alcohol ignition interlock technologies, including efforts to require interlock devices for all convicted drunk drivers. A key part of this effort will be working with judges, prosecutors and state driver's license officials to stop the revolving door of repeat offenders.
3. Exploration of advanced vehicle technologies through the establishment of a Cooperative Research Agreement between NHTSA and leading automakers that is assessing the feasibility of a range of in-vehicle technologies intended to prevent drunk driving. Ultimately, any technologies put forth for the public must be voluntary, moderately priced, absolutely reliable, unobtrusive to the sober driver, and set at the illegal limit of .08.
4. Mobilization of grassroots support, led by MADD and its more than 400 affiliates, and our partners to make the elimination of drunk driving a reality. MADD is uniting drunk driving victims, families, community leaders, and policy makers in the fight to eliminate drunk driving.

Ignition Interlocks

Mr. Chairman, the time for widespread adoption by states of ignition interlock laws for all convicted drunk drivers has come. Anyone who violates the public trust and drives drunk 27 years after everyone knows the consequences has earned the right for an alcohol ignition interlock device to be installed on their vehicle. The offender has to blow into the device before the car will start. The offender can still go to work, pick up his or her kids from school, or do anything the rest of us can do. They just can't drive after drinking, in violation of their probation.

Multiple studies on interlocks for both first-time and repeat offenders show decreases in repeat offenses (i.e. recidivism) of up to 65 percent while the interlock is on the vehicle.ⁱ For example, New Mexico, even before its new, more extensive first offender interlock program, found a decrease in recidivism by over 50 percent among first offenders who installed interlock devices.ⁱⁱ The more exciting results, however, are that alcohol

involved crashes are down 30 percent, injuries are down 32 percent, and fatalities are down 22 percent as a result of New Mexico's first offender program.

Currently, in addition to New Mexico, Arizona, Illinois, Louisiana, Washington, Nebraska, Colorado, and Alaska require ignition interlocks for all first-time convicted offenders. MADD uses the phrase first-time convicted because the most conservative studies say that impaired drivers have driven an average of 87 times drunk before being caught. New Mexico, who has had the law the longest, is seeing substantial reductions in alcohol-related crashes and fatalities.

MADD applauds the efforts of these states and will continue to work in state legislatures across the country to pass similar bills. This is our highest legislative priority.

I would also like to note that six states require ignition interlocks for drunk drivers convicted with a BAC of .15 and above as well as repeat offenders. This is an important step in the right direction, but interlocks still should be mandated for all offenders.

The committee will appreciate the fact that MADD's model law – similar to what was adopted by eight states – does not cost the taxpayer and instead requires the offender to pay for the interlock devices. The cost is between \$70-100 for installation and \$60-80 a month, or less than the cost of a drink a day, for service. In most cases, an indigent fund has been established to ensure that everyone receives this device. This is a small price to pay for a crime that costs the United States an estimated \$114.3 billion annually.

One of MADD's major concerns, and one that we hope to work with NHTSA to address, is the issue of the judiciary upholding and enforcing the law. MADD can work to pass a mandatory interlock law in all 50 states, but if the prosecutors do not prosecute and the judges do not mandate, then the law will not succeed. This is unacceptable and we must work to make sure that the good laws we pass are properly executed.

MADD supports substantial incentive grants for states that pass legislation requiring interlocks on all first time offenders with a BAC of at least .08. We feel this is the best way to persuade more states to require ignition interlocks to keep convicted drunk drivers from continuing to put the public at grave risk.

We do not support hard or soft sanctions on states for first offense interlocks at .08 for two reasons. Many states are actively considering this important measure already, and to be effectively implemented, the state must be sincerely committed to the overhaul of its judicial and driver licensing systems.

As your committee looks to the next traffic safety reauthorization, you should know that MADD also supports the consideration of transfer provisions or soft sanctions for states that do not have interlock laws for drivers convicted with a BAC of .15 and above and all repeat offenders. We do not support hard sanctions for states on this measure because major progress is being made.

MADD will continue to support hard sanctions for states on laws where the scientific value is overwhelming, the public support is strong, and the need for national uniformity is demonstrated. The 21 drinking age, the national .08 BAC standard, and zero tolerance laws for underage drinkers are excellent examples.

Comments on Current Law

MADD also respectfully asks Congress to consider supporting increased funding for the Governors Highway Safety Program (currently referred to as the 402 program) and law enforcement in the next traffic safety reauthorization bill. Increased funding will ensure sufficient resources for high-visibility law enforcement including enforcement efforts of underage drinking laws.

MADD thanks the committee for creating the new High-Visibility Enforcement Program under SAFETEA-LU. This program funds paid national media campaigns to inform the public of increased traffic safety law enforcement efforts during certain high-risk times of the year. Public awareness of stepped-up enforcement is proven to increase seat belt use and decrease incidence of drunk driving.

We also believe increased federal funding is needed to help with a cooperative research initiative between the automotive industry and the federal government to support new technologies that may eventually prevent a vehicle from being started by drunk drivers. MADD does not support any mandate of this new technology, and we believe it is best pursued on a voluntary, market-driven basis over the next decade. We are pleased that many elements of the auto industry are full participants in this program.

MADD commends the committee for its previous work in funding the Alcohol-Impaired Driving Countermeasures grant program (commonly referred to as the 410 program) which provided \$555 million over five years to states to combat impaired driving. The program encourages states to adopt and implement specific criteria designed to reduce impaired driving. Qualifying states can use the grant funds to implement impaired driving countermeasures.

MADD is pleased that in FY 2007, every state qualified and received 410 program funds. We look forward to working with NHTSA, the Governors Highway Safety Association, and this committee to update and streamline the program during the reauthorization of SAFETEA-LU.

Support for the 21 Drinking Age

Mr. Chairman, in closing, we wish to bring another important issue to the committee's attention. Quite unbelievably, there are some who continue to advocate lowering the drinking age back to 18. Data is unequivocal that the earlier youth drink, the more likely they are to become alcohol dependent later in life and to drive drunk.

There has been some recent debate about the 21 minimum drinking age in the media. I would like to submit for the record, statements from the American Medical Association, the National Transportation Safety Board, and the Insurance Institute for Highway Safety with regard to the science behind this law.

There is no controversy in the science. The science is overwhelming. NHTSA estimates the 21 law has saved 25,000 lives since implementation by the states. To repeal it would be disastrous and we hope that you, Mr. Chairman, and your colleagues in the House would make known your support for current law.

Because of the 21 minimum drinking age, 25,000 families somewhere will never know the tragedy of the call that comes at 2:00 a.m., or in my case 7:15 p.m., and says their husband, son or daughter, or loved one is not coming home. I know this tragedy first hand, and will make sure that MADD continues to fight so that others will not experience my tragedy.

Conclusion

MADD believes the way to save lives and to move forward on drunk driving is through the support of the 21 law, interlock legislation for all convicted drunk drivers, support for law enforcement and eventually new technology that will prevent drunk drivers from driving.

Since 1980, together we have made drunk driving socially unacceptable, but unfortunately still tolerated. With interlocks, drunk driving is no longer tolerated. With advanced technology, it will be impossible. That is the march MADD is on, and one in which we invite the support of all Americans.

Mr. Chairman, again I would like to thank you for the opportunity to testify before your committee. MADD looks forward to working with you and this committee as you look to improve highway safety on our nation's roadways.

Thank you.

ⁱ Willis, C., Lybrand, S., & Bellamy, N. "Alcohol Ignition Interlock Programs for Reducing Drunk Driving Recidivism." *Cochran Database of Systematic Reviews* (2005).

ⁱⁱ Voas, Robert, Paul Marques, and Richard Roth. "Evidence that Interlocks Are Effective with First Offenders." *6th Annual Ignition Interlock Symposium*, 2005.

<http://www.tirf.ca/whatNew/newsitemPDFs/Bob_Voas.pdf>



Health Effects of Alcohol on Children and Adolescents

**Support 21 Coalition
Washington, D.C.
Tuesday, October 9, 2007
10:00 AM**

**Ronald M. Davis, M.D.
President
American Medical Association**

Good morning.

It's an honor to be here on behalf of the American Medical Association to announce our support of this new coalition, and to present information on the health effects of alcohol on children and adolescents.

As physicians, we know all too well the dangers of early alcohol use for children and adolescents. We see the impact of alcohol one patient at a time, one family at a time.

But the collective damage to our children that is caused by alcohol is staggering. The negative consequences of underage drinking cost the United States \$62 billion per year in medical costs, lost productivity, and quality-of-life costs due to motor-vehicle crashes, violence, property crime, suicide, burns, drownings, fetal alcohol syndrome, high-risk sex, poisonings, psychoses, and dependency treatment.¹

Alcohol is a leading contributor to the main cause of death—injury—for people under age 21. About 5,000 deaths related to underage drinking occur annually as a result of motor-vehicle crashes, unintentional injuries from other causes, homicides, and suicides.² Researchers estimate that annually, alcohol use is implicated in more than 1,700 alcohol-related injury deaths

¹ Miller T.R., Levy D.T., Spicer R.S., Taylor D.M., Societal Costs of Underage Drinking. *Journal of Studies on Alcohol and Drugs* 67: 519-528, 2006.

² Faden V.B., Goldman M. (Co-Chairs), NIAAA Interdisciplinary Team on Underage Drinking Research. Alcohol development in youth – a multidisciplinary overview: The scope of the problem. *Alcohol Research & Health* 28(3):111-120, 2004/2005.

among college students aged 18 to 24, while in 2001 nearly 600,000 college students were injured because of drinking and 696,000 were assaulted by another drinking college student.³

If we can stop alcohol use and abuse from starting early, we can help prevent thousands, even millions of alcohol-related nightmares before they ever begin.

A few years ago, the *Journal of the American Medical Association* published a study on underage drinking and addiction. It showed that youth who regularly consumed alcohol before age 14 were at least three times more likely to develop a diagnosable alcohol dependency than those who delayed alcohol consumption to age 21.⁴

Moreover, the problem of alcohol abuse and dependence continues into the college-age years. In one study, 31% of college students met the criteria for a diagnosis of alcohol abuse and 6% for a diagnosis of alcohol dependence in the past 12 months, and more than two of every five students reported at least one symptom of abuse or dependence.⁵

This is a disturbing finding, considering the young ages at which many people drink today. In one study of young people between the ages of 12 and 13, 13% reported drinking beer, 13% reported drinking wine, and 11% reported drinking hard liquor or spirits.⁶ All of these children are at increased risk for alcohol dependency.

The dangers to their health include more than addiction. A growing body of scientific evidence suggests that even modest alcohol consumption in late childhood and adolescence results in brain damage—possibly permanent.

The human brain continues to grow and change throughout adolescence, and those who think young bodies and young brains are resilient to alcohol use are dangerously wrong.

The AMA has compiled and summarized two decades of research on the effects of alcohol use on the maturing brains of young people. Here are just some of the facts detailed in that report.

Young alcohol users are at risk of damaging two key areas of the brain, both of which undergo dramatic changes during adolescence.

The first area is the hippocampus, which manages the learning and memory processes. Childhood drinking has an alarming effect on this key area of the maturing brain. In one study,

³ Hingson R., Heeren T., Winter M., and Wechsler H. Magnitude of alcohol-related mortality and morbidity among U.S. college students ages 18-24: changes from 1998 to 2001. *Annual Review of Public Health* 26:259-79, 2005.

⁴ Hingson, R., Heeren T., Jamanka, A., and Howland, J. Age of drinking onset and unintentional injury involvement after drinking. *Journal of the American Medical Association* 284 (12): 1527-33, 2000.

⁵ Knight, J.R., Wechsler, H., Kuo, M., Seibring, M., Weitzman, E.R., and Schuckit, M.A. Alcohol Abuse and Dependence Among U.S. College Students. *Journal of Studies on Alcohol* 63 (3): 263-270, 2002.

⁶ Parents Resource Institute for Drug Education, 2000-2001 PRIDE Survey.

the hippocampuses of teens who abused alcohol were 10% smaller than in teens who did not abuse alcohol.⁷

Another study showed that individuals who used alcohol as adolescents exhibit a reduced ability to learn, when compared to those who refrained from using alcohol until adulthood. Alcohol shrinks memory signals at a more rapid pace in children than in adults, and it reduces memory acquisition. Adolescents who abuse alcohol may remember 10% less of what they have learned when compared to non-drinking adolescents.⁸

The second area most affected by alcohol abuse is the prefrontal area, which undergoes the most change during adolescence. This area plays an important role in the formation of adult personality and behavior. Some call it the “CEO of the body.” Alcohol abuse has been shown to cause deterioration in this important area.⁹

Given these effects, is it any wonder that adolescent drinkers score worse than non-users on vocabulary, general information, memory, and memory retrieval tests? Or that they perform worse in school and are more likely to fall behind in their work than their temperate peers? Or that they are at greater risk of social problems, depression, unintentional injuries, suicide, and violence?

Yet as terrible as the threat of alcoholism and even brain damage may be, that’s not the only risk taken by children who drink.

All of us are familiar with the danger of untreated high blood pressure. A representative sample of current drinkers aged 12 to 16 showed higher levels of diastolic blood pressure than their non-drinking counterparts.¹⁰

Adolescents who drink heavily also are at increased risk of developing cirrhosis of the liver in adulthood. A study by University of Pittsburgh researchers found that teenagers (ages 14 to 18) with alcohol-use disorders had elevated liver enzyme levels and more abnormalities in physical exams, especially oral exams. The researchers noted that with continued excessive drinking, the teens may develop permanent liver damage.¹¹

Addiction, brain damage, high blood pressure, and liver damage—these are serious health issues—and a frightening number of our nation’s children are at risk.

⁷ De Bellis, M.D., et al. Hippocampal Volume in Adolescent-Onset Alcohol Use Disorders. *American Journal of Psychiatry* 157: 737-744, 2000.

⁸ Brown, S. A., Tapert, S. F., Granholm, E., et al. Neurocognitive functioning of adolescents: Effects of protracted alcohol use. *Alcoholism: Clinical and Experimental Research* 24 (2): 164-171, 2000.

⁹ Crews FT, Braun CJ, Hoplight B, Switzer III RC, Knapp DJ. Binge ethanol consumption causes differential brain damage in young adolescent rats compared with adult rats. *Alcohol Clin Exp Res* 2000; 24:1712–23.

¹⁰ Hanna, E.Z., et al. Drinking, smoking and blood pressure: Do their relationship among youth foreshadow what we know among adults? Paper presented at the American Public Health Association Annual Meeting, Chicago, IL. November 1999.

¹¹ Clark, D. B., Lynch, K.G., Donovan, J. E., and Block, G. D. Health Problems in Adolescents with Alcohol Use Disorders: Self-report, Liver Injury and Physical Examination Findings and Correlates. *Alcoholism: Clinical and Experimental Research* 25 (9): 1350-1359, 2001.

The challenges we face in reducing underage drinking are not easy, and the stakes are very high. But we can and must protect our children and their good health. That's why the AMA is proud to have joined the Support 21 Coalition. Working together we can have a positive impact on the problem of underage drinking, which will vastly improve our children's health.

**Remarks of Mark V. Rosenker, Chairman
National Transportation Safety Board
For the "Support 21" Press Conference
Washington, DC
October 9, 2007**

Thank you, Chuck.

I want to welcome all of you to the National Transportation Safety Board's Board Room. It is in this room that we fulfill our congressionally mandated mission to make safety recommendations that prevent crashes and save lives in all modes of transportation. Unfortunately, today's event is to promote an issue that we thought we had already addressed a quarter century ago, the need for Age 21 drinking laws!

The Safety Board has long recognized the need for laws that prevent alcohol consumption by people under age 21, and we have not identified any new information that merits changing the Board's position.

The National Highway Traffic Safety Administration estimates that since 1975, Age 21 laws have prevented almost 25,000 traffic deaths. Our society should not tolerate the repeal or weakening of laws that have been proven to save teenagers' lives.

When the Board investigated this issue in the early 1980s, drivers under age 21 were disproportionately involved in alcohol-related crashes. An **overwhelmingly high** percentage of fatally injured teen drivers had alcohol in their system.

In 1982, more than 5,300 (or 20 percent) of alcohol-related fatalities involved a teen driver with a positive blood alcohol concentration (or BAC). **Every day**, an average of 14 people were killed in crashes involving a teen driver who had consumed some alcohol.

That year, the Safety Board recommended that States raise the minimum legal age for drinking or purchasing alcohol to 21-years-old. The Safety Board recognized that immaturity, inexperience, and alcohol combine to be a **fatal mixture**, especially when the young driver gets behind the wheel! We watched as more crashes occurred when the legal drinking age was lowered; we knew that raising the legal drinking age back to 21 would help reduce these tragedies.

The impact of the National Minimum Drinking Age Act of 1984 achieved what we had hoped and expected it to achieve, a decrease in the percentage of fatally injured teen drivers legally impaired by alcohol. However, the percentage started to increase again in the late 1980s and early 1990s. The Safety Board revisited the issue in 1993 and determined that a law prohibiting only the sale of alcohol to minors was not sufficient. The Board recommended ways in which States could close loopholes and strengthen

enforcement of this **life-saving** legislation. And we pursued these recommendations with **vigor**, putting them on our list of Most Wanted safety improvements.

As I said, the research and current data do not justify changing the Board's position. In fact, quite the opposite. Motor vehicle crashes remain the leading cause of death for teenagers, and alcohol remains the leading drug of choice. Nearly **one-third** of teen traffic deaths are alcohol-related, and **74 percent** of teen drivers killed in crashes after drinking and driving were unrestrained.

In 2005, teen drivers (age 15 through 20) made up slightly more than 6 percent of the driving population. But although this population is not allowed to drink, almost 11 percent of alcohol-related fatalities (1,800 people) still involved a teen driver with a positive BAC. **Countless dead and injured people are the sad testament to underage drinking and driving!**

Lowering the drinking age once again will not prevent these deaths and injuries; better education, consistent expectation of responsibility, and enforcement of the existing laws will.

The Safety Board remains committed to the campaign against underage drinking! I am pleased that the Safety Board is once again working with our distinguished highway safety partners at MADD, the American Medical Association, and the Insurance Institute for Highway Safety. Together, we will save lives and reduce injuries! We will ensure that more children reach their 21st birthday. They are the future; we cannot allow the future to be wasted.

Thank you to all of our partners here today. And thank you to all those who work tirelessly to make our roads safer!



**Statement of Christopher J. Murphy
Chairman, Governors Highway Safety Association (GHSAGovernors Highway Safety Association)
Before the House Subcommittee on Highways and Transit
House Transportation and Infrastructure Committee
July 16, 2008**

I. Introduction

Good morning. My name is Christopher J. Murphy, and I am Chairman of the Governors Highway Safety Association (GHSA). GHSA is a nonprofit association that represents state highway safety agencies. Its members administer federal behavioral highway safety grant programs that are the focus of today's hearing. They are appointed by their governors to administer these grant programs and implement statewide highway safety programs. Areas of focus include: impaired driving; occupant protection; speeding and aggressive driving; distracted driving; younger and older drivers; bicycle, motorcycle and pedestrian safety; traffic records and highway safety workforce development.

As you know, traffic-related fatalities and injuries continue to be a major public health problem in this country. Although we have made some progress, there were still more than 42,000 fatalities and 2.5 million injuries in 2006 – the last year for which complete statistics are available. Traffic crashes not only cause devastation to families and individuals, but they also cost the nation an estimated \$230 billion annually. Unfortunately, these crashes happen in one's and two's, so there is little public awareness about them and even less public outcry against them.

To address this problem, the federal government must make the reduction of highway fatalities and injuries a national priority and play a strong role in developing highway safety policies and programs. The federal government has played such a role since the enactment of the Highway Safety Act of 1966. This Act solidified the federal leadership position on highway safety while also establishing a partnership with state governments. The Act created the Section 402 State and Community Highway Safety grant program (23 U.S.C. 402) which provided funding to states on a formula basis for developing and implementing state highway safety programs. Over the years, this federal and state partnership has been strengthened with the addition of a number of federal incentive grant programs aimed at rewarding successful state programs in specific high priority areas or encouraging stronger state action in those areas. As the Congress develops the highway safety programs under the next reauthorization, it is important to maintain this strong federal role. Just as the federal government deems it important to prevent tobacco and drug use, underage drinking or obesity, it must also protect the public on the roadways. Without federal assistance and leadership, especially in these difficult economic times, it is unlikely that states would be able to provide the necessary resources to enhance roadway safety and prevent tragic injuries and fatalities.

II. General Recommendations for Reauthorization

As noted above, the federal behavioral highway safety program has grown since the Highway Safety Act was first enacted in 1966. New programs have been added, others dropped. Under the Transportation Equity Act of the 21st Century (TEA-21), five new incentive programs and two penalty transfer programs were added to the existing Section 402 program and the Section 410 (23 U.S.C. 410) impaired driving incentive grant program. Under the Safe, Accountable, Flexible, Efficient Transportation Equity Act – A Legacy for Users (SAFETEA-LU), four of those incentive programs were dropped and five new incentive programs were added. In effect, the federal highway safety program has been developed in a piecemeal fashion, without an overall plan.

It is time, as the National Surface Transportation and Revenue Policy Study Commission recommends, to develop a national highway safety strategic plan with national highway safety goals. Other countries, such as Canada and Australia, have developed national strategic highway safety plans that involved all levels of government and the private sector in the development process. Each state has its own Strategic Highway Safety Plans (SHSP), as required by Section 148 of SAFETEA-LU. The missing component is a national plan. **GHSA supports the development of a comprehensive national strategic highway safety plan involving all levels of government and the private sector.**

GHSA also supports a goal of zero fatalities. The loss of one life is one too. The philosophy of "Every One Counts" should drive future strategic plans and countermeasure selection and implementation. Over time, and with education, enforcement, safety infrastructure improvements, vehicle improvements, and technological advances, such an ambitious goal can be achieved.

Further, GHSA supports the interim goal recommended by the National Surface Transportation Commission and the American Association of State Highway and Transportation Officials (AASHTO) of **halving fatalities by 2030**. This goal would require annual reductions of 1,000 fatalities a year. In 2006, the country nearly reduced fatalities by that amount, demonstrating that yearly reductions of this magnitude are possible.

A summit could be convened to reach consensus on these national goals, identify major issues, and consider a range of countermeasures to address those issues. The national strategies should build upon the strategies identified in state Strategic Highway Safety Plans (SHSP). All relevant constituencies, including representatives of state highway safety offices, should participate in the summit.

The Government Accountability Office (GAO), the U.S. Department of Transportation Inspector General (IG) and the National Surface Transportation Commission have all recommended the federal behavioral highway safety programs become more performance-based. In fact, the behavioral programs are already more performance-based than other federal surface transportation programs. States are currently required to identify their highway safety problems using various data, set annual performance goals for reducing fatalities and injuries, and then report at the end of the year on whether they have reached those goals.

GHSA concurs that the behavioral highway safety programs would benefit from becoming more performance-based and sees that as the next step in enhancing the state planning process. Beginning in 2004, GHSA took steps on its own to enhance state highway safety planning and encourage more performance- and research-based decision-making. The Association developed a template for state Highway Safety Plans and Annual Reports that strengthens the goal-setting and reporting processes. The template identified twelve performance measures for states to use in their annual plans and year-end reports. In 2006, GHSA, with funding from the National Highway Traffic Safety Administration (NHTSA), produced a report summarizing all the current research on effective highway safety countermeasures. The report, *Countermeasures That Work*, has been updated twice by NHTSA and has been used by states to select research-based, effective countermeasures for their annual Highway Safety Plans.

A difficulty of the existing performance-based process is the fact that states use a variety of performance measures to develop their goals and mark progress. To address the concerns raised by GAO and others, NHTSA and GHSA have embarked on a process to identify, by consensus, a common set of performance measures that all levels of government will use in their planning processes. Currently, there are ten outcome measures and one behavioral measure on which there is agreement. Further work will be done to develop five additional measures. A final report on these measures will be issued in August. States will begin to use the first eleven measures in their FY 2010 Highway Safety Plans. A similar consensus process will be undertaken next year to identify a common set of performance measures for traffic records systems.

If Congress concurs that the behavioral highway safety programs should be more performance-based, it must provide the resources to states to collect the necessary performance data. The current Section 408 data improvement program (23 U.S.C. 408), which is primarily focused on improvements to crash data systems, is only funded at \$34.5 million a year. Improvements to traffic records systems are extremely expensive. Pennsylvania's enhancements to its crash data system, for example, cost the state more than \$10 million. The federal government cannot be expected to pay the entire cost of improving state data systems; however, it is clear that funding for the 408 program is woefully inadequate.

Further, states are increasingly funding improvements in the other components of traffic records systems, particularly e-citation systems, DWI information tracking systems and emergency medical services (EMS) information systems. If states are expected to collect performance data such as statewide citation data or more precise injury data, then they need the funding to automate data collection and make other improvements to the data systems that would yield the requisite performance data. **GHSA urges that the funding for the 408 program be increased substantially to \$100 million a year.**

Another concern is the proliferation of incentive grant programs. The problem does not relate to the substantive issues addressed by these programs. Rather, the difficulty is that the funding streams are stove-piped, which causes fragmentation and impedes comprehensive, performance-based planning.

GHSA believes that if Congress wishes to continue separate incentive grant programs, then it must streamline the administration of those programs and give states more flexibility on the use of the funding. Currently, there are different applications and application deadlines for each incentive program. One application is due in February, one in June, three in July, two in August and one in September. Some of the applications are for funding in the current fiscal year, others for funding in the upcoming fiscal year. Half of the incentive funding isn't given out until the end of the fiscal year. States are forced to carry over funding until the next fiscal year, yet they are criticized for having too much carryover money. Such a fragmented approach makes it extremely difficult for states to plan their annual programs effectively.

GHSA strongly recommends that there should be a single grant application deadline as well as a single application and that all of the grant funding should be allocated on October 1. We recognize there will be a transition year in which states that enact certain qualifying legislation won't receive grant funding until the following fiscal year. This is a small price to pay to make the grant process more rational.

GHSA also recommends **greater flexibility between** behavioral grant programs. States should be allowed to move a portion of incentive grant funding from one category to another based upon their demonstrated needs. There is flexibility between the core federal highway construction programs. A similar philosophy should govern the approach to behavioral highway safety programs.

GHSA further recommends states be given the authority to pool their Section 402 funds. Currently, states are not allowed to pool any NHTSA-administered state grants. When an initiative is undertaken on a regional basis with 402 funds (such as the Smooth Operator program in Pennsylvania, DC, northern Virginia and the Maryland suburbs), the participating states must go through a cumbersome process of transferring funds from one jurisdiction to another. A mechanism should be set up to allow states to work together regionally on law enforcement activities, paid media campaigns, and other appropriate activities. States also should be able to pool funds to support specific highway safety research projects, as is allowed with federal-aid highway funding. Similarly, a mechanism should be established to allow states to work together on data improvements. Multiple states, for example, may want to fund specific enhancements to software programs jointly used by those states. Or, they may want to hire a data contractor who can serve all the states in a region. There may be substantial savings by allowing states to pool their funds in this manner.

III. Incentive Program Recommendations

The current incentive grant programs have provided needed funding to states to address a range of highway safety issues. However, refinements should be made in each of these programs. In at least two of the incentive programs, the eligible uses of incentive funds are too restrictive. Once a

state qualifies, it should be allowed to use the funding for any purpose under that incentive category.

While the Section 410 program has been a valuable tool for enhancing state resources to address drunk driving, some of the 410 criteria have proven too difficult to implement (e.g. the BAC testing requirement), and others (e.g. the self-sufficiency requirement) have not spurred state action. GHSA expects that a number of states will fall out of compliance in the last two years of the program. This is counterproductive. GHSA recommends the program be refocused on those countermeasures that are known to be effective (e.g., high visibility enforcement, DUI courts and judicial education) or have the potential to be extremely effective (e.g., interlocks for first time offenders). GHSA supports the Mothers Against Drunk Driving's (MADD) Campaign to Eliminate Drunk Driving. These changes in the 410 program are very much in line with the Campaign and would help to realize the Campaign's goals.

The Section 406 primary seat belt incentive grant program (23 U.S.C 406) has only been modestly successful. Since the program's enactment, only five states have adopted primary seat belt laws. GHSA recommends that the 406 program should be combined with the Section 405 program (23 U.S.C.405) and the Section 2011 child passenger protection program to form a single occupant protection program. Funds should be allocated to states based on a number of criteria, such as seat belt use rates, fatality rates of unbelted drivers, primary seat belt and booster seat law enactment. Funding should be used to support a range of occupant protection activities, such as high visibility and sustained enforcement, paid media, education programs, seat belt usage surveys, child passenger technician training, child restraint usage surveys, and child passenger protection education and enforcement programs.

States that do not have primary belt laws or very high belt usage do not currently qualify for 406 funds. This has put tremendous pressure on their 402 allocations to fund the annual law enforcement mobilization and paid media. If the 406 program were restructured, it would provide a base of funding for occupant protection activities (including the annual high visibility mobilization) while allowing states to use their 402 funding for other safety purposes.

The 2010 motorcyclist incentive grant program is also too restrictive and too small to have an impact. As GHSA's recent *Survey of the States: Motorcycle Safety Programs* showed, many states are no longer able to support their motorcycle safety programs based on licensing and training user fees alone. More federal assistance is needed – funding for the 2011 program should be increased substantially, to \$20 or \$25 million.

NHTSA's National Agenda for Motorcycle Safety (NAMS) has shown that the best way to advance motorcycle safety is to address the problem comprehensively by focusing on such areas as licensing, education and training, protective gear, roadway safety, public information programs on speeding and impairment, conspicuity, enforcement, vehicle improvements, and sharing the road. The current 2010 program does not allow states to address the problem of motorcycle safety comprehensively. Eligible states should be allowed to use the funding for additional purposes such as licensing improvements, helmet education and enforcement programs, and impaired motorcycling programs. States should also be required to designate a lead state motorcycle safety agency and prepare a motorcycle safety strategic plan.

GHSA also recommends that a new incentive grant program be enacted that focuses on speed management. Speeding is a factor in an estimated one-third of all crashes – a figure that has remained unchanged over the last decade. Speeding costs society an estimated \$40 billion annually. According to the NHTSA-funded 2005 Speed Forum report, "speeding dilutes the effectiveness of other priority traffic safety programs, including efforts to reduce impaired driving, increase safety belt use, and improve pedestrian and motorcycle safety. Speeding and speed-related crashes occur on all road types, from limited-access divided highways to local streets. Drivers speed in all types of vehicles. Speeding is a local, state, and national problem." Speeding is one of the three primary factors in fatalities and injuries (along with impairment and failure to

wear occupant protection devices), yet there are no dedicated federal funds to address the problem.

A 2005 study published by the Transportation Research Board (TRB) found that a 1% decrease in travel speed reduces injury crashes by about 2%, serious injury crashes by about 3%, and fatal crashes by about 4%. On a street with an average travel speed of 40 mph, a reduction to 38 mph is a 5% decrease. Crashes would be reduced by about 10%, serious injury crashes by about 14%, and fatal crashes by about 19%. Clearly, a small reduction in speeds can have a big impact.

Reducing speed also saves energy. According to the Department of Energy, aggressive driving (speeding, rapid acceleration and braking) can lower gas mileage by 33% at highway speeds and 5% around town. The agency also estimates that, as a rule of thumb, drivers can assume that each 5 mph they drive above 60 mph is like paying an additional \$0.20 per gallon for gas.

GHSA recommends a new speed management program be authorized to provide incentives to states that undertake speed enforcement, conduct speed management workshops in their states, implement automated speed enforcement programs, or conduct public information campaigns about speeding. In addition, GHSA recommends Congress fund a national campaign to re-educate the public about the dangerous consequences of speeding, a biennial national speed monitoring data collection study to determine how fast the traveling public is actually going, and research into emerging technological applications for measuring and controlling speed.

IV. Program Management, Research and Training

SAFETEA-LU authorized NHTSA to conduct management reviews (MR) of states every three years and programmatic management reviews of underperforming states. NHTSA initiated these processes in 2005 and has been reviewing state programs since then. The Management Reviews and Special Management Reviews (SMR) (the programmatic review) have been helpful to states and have identified issues that need to be addressed by the state highway safety offices.

In 2007, however, GHSA grew concerned about the consistency of the reviews from state-to-state. The Association hired a contractor to review the MR's and identify areas of inconsistency. In June of 2007, representatives from NHTSA and GHSA met to develop a more standardized approach to the MR's. This year, the contractor undertook a similar review of state SMR's. A meeting was held in May to develop a more standardized approach to the SMR's. Both NHTSA and GHSA have established their own quality control task forces to review the MR's and SMR's and ensure that the 2007 and 2008 agreements are being followed.

GHSA has also undertaken its own efforts to enhance the management of state highway safety programs. It has developed a monitoring advisory to help states enhance the monitoring of sub-grantees. It has also developed a model Policies and Procedures Manual covering all of the relevant federal regulations and guidance for federal behavioral highway safety programs. GHSA's consultant will also begin working on a self-assessment protocol so that state highway safety offices can improve their management practices between Management Reviews.

SAFETEA-LU also authorized funding for research under 23 U.S.C. 403. However, the amount of funding devoted solely to behavioral research is small – only about \$7 million a year – and partially earmarked for specific research projects. NHTSA's behavioral research budget has remained unchanged for many years. This means that research on the effectiveness of specific highway safety countermeasures can be undertaken only if and when such research reaches the top of NHTSA's priority research list. In fact, in a forthcoming National Cooperative Highway Research Program (NCHRP) study on the cost-effectiveness of 104 behavioral highway safety countermeasures, the researchers found that only 23 were proven effective and had sufficient research with which to be able to determine cost-effectiveness. Without sufficient research to indicate what works and what doesn't, states are forced to implement best practices rather than

appropriate research-based programs. GHSA recommends that NHTSA's research budget be substantially increased.

Training is another area of concern for GHSA. There is tremendous turnover among the Governor's Representatives and Highway Safety Coordinators who run the state highway safety agencies, particularly as baby boomers retire. It is critical that incoming leaders of state highway safety offices and their staffs receive appropriate training so that they can understand the complexities of highway safety and run effective programs. GHSA endorses the proposal put forth by AASHTO to fund a Highway Safety Center of Excellence. The purpose of the Center would be to implement the recommendations of TRB Special Report 289, *Building the Road Safety Profession in the Public Sector*. In addition, GHSA supports dedicated funding for NHTSA training so that the agency can enhance all of its training, develop distance-based learning, and re-locate its training facility to Arlington, where the Federal Highway Administration and the Federal Motor Carrier Safety Administration provide their safety training.

V. Strategic Highway Safety Plans

Section 148 of SAFETEA-LU requires states to develop Strategic Highway Safety Plans (SHSP). State Departments of Transportation are required to take the lead on plan development but involve a number of constituencies, including the state highway safety office. Every state has completed an SHSP, and state highway safety offices have been actively involved in the development of nearly all of them. GHSA supports continuation of and improvement in the Strategic Highway Safety Plan requirements. GHSA members report that the requirements have helped strengthen relationships with other state and local agencies involved in highway safety and focused limited resources where they are most needed. Since no single agency has ownership of highway safety, the SHSP requirements have encouraged all the relevant agencies to work together more productively.

The Association supports AASHTO's recommendation that states should be required to update their SHSP at least once in between reauthorizations. GHSA wants to ensure that the SHSP is a "living" document that reflects the latest issues, data, and accomplishments—and not a report that sits on a shelf.

GHSA also recommends that the Safe Routes to School (SRTS) program should be more closely tied to the SHSP planning process. SRTS coordinators should be part of the SHSP update process, and the SRTS plans should be coordinated with the SHSP. Conversely, where pedestrian safety is an issue in a state, the SRTS plans should influence the pedestrian policies reflected in the SHSP.

GHSA also strongly recommends that the flexibility provision in the Section 148 Highway Safety Improvement Program (HSIP) must be altered. Under the provision, states may flex up to 10% of their Section 148 funding to carry out safety projects in any other program, provided that the state certifies that there are no unmet rail-grade crossing needs or safety infrastructure needs. The certification has proven to be an insurmountable barrier for most states and a source of frustration for those involved in the state SHSP's. To date, only seven states have flexed a portion of their HSIP for programs other than safety infrastructure improvements. States should be allowed to flex their HSIP money to other programs if they have a demonstrated need to use the funding in those programs. Since the majority of crashes are caused by driver behavior, and since such programs typically have a big and immediate payoff, GHSA would expect to see more funding being flexed into behavioral programs if the changes were made.

VI. Sanctions

In general, GHSA does not support sanctions. The Association believes they are untargeted and counterproductive. Furthermore, states are already subject to seven safety-related sanctions (National Minimum Drinking Age, drug offenders, use of seat belts, zero tolerance for minors,

open container, repeat offender, and .08 BAC). Evidence on the effectiveness of past sanctions is mixed. Sanctions involving impaired driving have been successful, while those involving motorcycles and the National Maximum Speed Limit have not. GHSA believes that incentives are a more effective way to encourage a change in state policies and programs.

While GHSA does not generally support new sanctions, it would vigorously oppose any effort to overturn an existing sanction – the one relating to the National Minimum Drinking Age (NMDA). According to NHTSA, nearly 25,000 teen traffic deaths – an average of almost 1,000 per year – have been prevented since the enactment of the NMDA. Since enactment, the number of teen drivers killed in alcohol-related traffic crashes has been cut in half, self-reported alcohol use by high school seniors has dropped by an estimated 20% and self-reported binge drinking has declined by an estimated 40%.

The Centers for Disease Control (CDC) reviewed more than 100 studies of the impact of the NMDA and found more than 50 which were considered high quality. In its meta-analysis, CDC found that increasing the drinking age decreases fatalities and crashes by 16% and lowering it increases fatalities and crashes by 10%.

The evidence is clear: the NMDA has worked exceedingly well and is one of the strongest policy tools in the state arsenal. Protecting the health of young people – our country's future – should be of paramount importance, more so than the fact that there are in disparities in public policy affecting young people. Lowering the drinking age by eliminating the sanction would be a gigantic and harmful step backward.

Finally, GHSA notes that an administrative problem with the current penalty transfer provisions also needs correction. Currently, states in non-compliance with the Section 154 open container and 164 repeat offender requirements (23 U.S.C. 154 and 164) have 3% of their Interstate Maintenance, Surface Transportation Program and National Highway System funding transferred into the state's 402 program. The state then determines if it would like to spend the transferred funds for impaired driving or Hazard Elimination program (now part of the Section 148 program) purposes. There is no actual transfer of funding to the state department of transportation (DOT) if a state chooses to spend the money for hazard elimination purposes. Instead, the state highway safety office must subcontract with its state department of transportation to expend the funds.

Since the Section 154 and 164 penalty funds are not actually transferred to the state DOT, the state highway safety office bears the administrative responsibility for the transfer funds. The state highway safety office must track the expenditures in the federal grant tracking system and ensure that funds are being spent for the purposes authorized. Further, because of the slow spend out rate for hazard elimination funding, most of the state highway safety offices have substantial amounts of Section 154 and 164 carryover money. It is impossible for the state highway safety offices to reduce their hazard elimination 154 and 164 carryover funds since they have no control over that funding. In effect, the SHSO has all the administrative burdens of the Section 154 and 164 funds that are spent for hazard elimination purposes but none of the benefits of that funding. A simple statutory fix is needed. If a state chooses to use its Section 154 or 164 funding for hazard elimination purposes, then the funding should be transferred to the state DOT and that agency should be administratively responsible for the funds.

This concludes GHSA statement. Thank you for the opportunity to appear before the House Subcommittee on Highways and Transit as it begins deliberations on the next surface transportation reauthorization. GHSA looks forward to working with the Committee on the next surface transportation legislation.

**THE HONORABLE JAMES F. PORTS, JR.
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NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION
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COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE
U. S. HOUSE OF REPRESENTATIVES**

July 16, 2008

Chairman DeFazio, Ranking Member Duncan and Members of the Subcommittee, thank you for inviting me to discuss motor vehicle safety issues. I want to express my appreciation for this Committee's support for highway safety programs. Your leadership and support have made significant contributions to advancing the cause of highway safety and improving the quality of life in communities across the Nation.

Transportation safety is a top priority for Secretary Peters and President Bush, and our mission at NHTSA is very straightforward: to save lives and prevent injuries. In 2005, according to the Centers for Disease Control, once again motor vehicle crashes were the leading cause of death for Americans for every age 2 through 34. In 2006, more than 42,600 people lost their lives on U.S. roadways and 2.6 million were injured in vehicle crashes. The associated financial costs are staggering: over \$230 billion each year.

What makes that situation even more distressing and frustrating is that many of these deaths were preventable. Over 90 percent of crashes are caused by human factors, such as speeding, lack of seat belt use and alcohol impairment. We must aggressively continue to work to change driving behaviors. Advances in new technology, such as Electronic Stability Control, will also play an important role in reducing traffic fatalities in the future.

NHTSA has a multi-pronged approach designed to address behavioral safety factors. We use a comprehensive, data-driven process to identify and break down the problem into its basic elements, then develop and test countermeasure strategies and partner with the States and many traffic safety organizations to implement safety programs.

One of the areas where new advances in technology linked to behavioral programs shows strong promise is in reducing impaired driving crashes. Impaired driving remains one of the leading causes of traffic crashes and fatalities in the U.S.

In 2006, alcohol-impaired driving fatalities accounted for more than 13,400 deaths or 32 percent of all traffic fatalities. Impaired drivers also take a terrible toll on our most precious resource – our children. In 2006, 598 children under the age of 18 were killed in crashes involving an alcohol-impaired driver. Of these, 353 children were killed in a vehicle driven by an alcohol-impaired driver. Another 170 children were occupants of another vehicle involved in a crash with vehicle driven by alcohol-impaired driver and 75 were pedestrians or other non-occupants struck by an alcohol-impaired driver.

NHTSA's approach to reducing these preventable fatalities includes:

- High visibility enforcement campaigns targeting impaired driving, combining the efforts of State and local law enforcement partners with national promotional efforts to increase enforcement and create a general deterrence to drinking and driving.
- Support for the criminal justice system to prosecute and adjudicate impaired driving cases. In particular, we are supporting increased training and education for prosecutors and judges, State Traffic Safety Resource Prosecutors to provide technical assistance to prosecutors handling driving while impaired (DWI) cases, and expanded use of DWI courts. These courts have been shown to reduce recidivism by combining close supervision and mandatory alcohol treatment for DWI offenders and alcohol misuse problems.
- Expanding the use of ignition interlocks and pursuing other advanced alcohol detention technology solutions. Alcohol ignition interlocks have been available for some time, but their use has been relatively limited. There is a growing awareness that they can play an important role in reducing recidivism and States are starting to require their use for first offenders. Drivers with a blood alcohol concentration (BAC) level of .08 or higher involved in fatal crashes were eight times more likely to have a prior conviction for DWI than were drivers with no alcohol in 2006. Studies have shown that convicted DWI offenders with interlocks are more than 60 percent less likely to recidivate than comparable drivers without interlocks.

NHTSA is also working with the automobile industry to fund vehicle-based impairment detection technology research. Vehicle sensors that determine how much alcohol is in a driver's system, and could be offered on a voluntary, market-driven basis, offer the potential for significant future reductions. While much of this technology is still in the developmental stage, NHTSA plays an important leadership role in working with national partners and the private sector to ensure that this research continues full speed ahead.

There are also other behavioral-related technology systems that can improve vehicle safety. Seat belt reminder systems can be helpful in addressing seat belt use. This technology has improved greatly from its earliest versions back in the 1970s. Lack of seat belt use continues to be a major factor in motor vehicle fatalities. Research has shown that belt use is the most effective traffic safety countermeasure available to prevent fatalities and injuries. Seat belts saved an estimated 75,000 lives between 2002 – 2006.

High visibility enforcement campaigns – like our “Click It or Ticket It” campaign – together with strong primary seat belt laws have proven to be the most effective way to get more people to buckle up. However, progress has been hindered by the fact that only 26 States have primary enforcement laws. One State has no adult seat belt law and the other 23 have less effective secondary laws that only allow officers to issue a seat belt citation to a motorist after they stop the driver for another violation.

The effectiveness of primary belt laws shows up clearly when comparing States. The national seat belt use rate in 2007 was 82 percent. But in States with primary seat belt laws, the belt use rate was 87 percent. Indeed, in some States with primary belt laws, such as Hawaii, Oregon and Washington, seat belt use rates are now higher than 95 percent. States without primary belt laws have an average use rate of 73 percent – and the gap between States with and without primary laws is growing every year.

Higher belt use rates translate directly into saved lives. States with primary belt laws have a 9 percent lower passenger vehicle occupant fatality rate – 0.97 per 100 million vehicle miles traveled (VMT) compared to 1.06 – than the other States.

In addition to promoting high visibility enforcement and encouraging States to enact primary belt laws, NHTSA's occupant protection program focuses on high-risk groups, such as rural residents, pickup truck drivers and teens.

We also continue to provide leadership on safety for children. The country has made great strides in increasing occupant protection among young children. Restraint use for children is at an all-time high – more than 98 percent for those less than 1 year old and 96 percent for 1 to 3 year-olds. Much of this success is due to the network of more than 30,000 dedicated child passenger safety technicians across the country that NHTSA has helped develop and nurture over the past 10 years, along with the American Automobile Association and, more recently, Safe Kids WorldWide. These safety advocates work with families to educate parents on the correct use of safety seats. Technology such as the Lower Anchors and Tethers for Children (LATCH) system has also helped to increase the percentage of safety seats installed correctly and we are working to make LATCH even more effective.

Recognizing the importance of LATCH, on January 30, 2008, Secretary Peters and Administrator Nason announced a comprehensive upgrade to NHTSA's Ease of Use child seat rating program. This important consumer information program provides parents with comparative information that they can use when selecting child restraints. The new program includes, for the first time, the use of stars to convey rating information to consumers as well as expanded criteria to better evaluate child restraint labels, LATCH, and child restraint harness designs. We believe that these enhancements will lead to child restraints that are easier to use and continue providing manufacturers with an incentive to distinguish their products based on its ease of use.

However, there is still more work to be done to reach older children. For the 4 – 7 year-old group, restraint use drops to 85 percent. But as more States pass booster seat laws, we anticipate that this number will rise.

One of the most challenging areas we face today is motorcycle safety. The number of fatalities continues to rise. In 2006, 4,810 motorcyclists were killed – an increase of 5 percent over the 2005 number and a 127 percent increase since 1997. NHTSA supports comprehensive efforts to reduce motorcycle-related crashes and injuries, including the use of motorcycle helmets.

In February 2008, legislation was submitted to Congress to allow States to use Section 2010 funding to promote the use of motorcycle helmets. Currently, States are limited to using the funds for motorcycle safety training and motorist awareness programs only. Secretary Peters has proposed legislation that would allow States the flexibility to spend these funds on education concerning the importance of helmet use.

In November 2007, Secretary Peters announced a new Departmental Action Plan to Reduce Motorcycle Fatalities. The plan includes a comprehensive range of initiatives including rider education, tougher standards for helmet certification labeling, law enforcement training, and road designs that consider motorcycle handling dynamics.

The growing number of older drivers also requires attention. The United States is facing a surge in the population of those over age 65. In 2006, there were 30.1 million older licensed drivers – an 18 percent increase from 1996. NHTSA's policy is to promote safe mobility for older road users (age 65 and older), help seniors to drive as long as they can do so safely, and encourage the development of transportation alternatives for those who can no longer drive.

NHTSA developed an Older Driver strategic plan to better target agency programs and resources to address this at-risk and growing population. Key areas of focus include: Screening and Assessment; Licensing; Counseling by Medical Providers; Public Information and Program Promotion; and Other Activities.

Most older drivers are aware of their declining functional abilities and self-regulate by curtailing their driving – they do not drive in poor weather or at night and avoid rush hour. However, some older drivers are either unable or unwilling to recognize their limitations. Better screening and skill assessment devices are needed for these drivers. Improved vehicle and road engineering is also needed to increase crash survivability for older drivers, occupants, and pedestrians.

At the other end of the driving spectrum, NHTSA also has a strategic approach to addressing teen drivers – who are overrepresented in vehicle crashes. In 2006, young drivers, between 15 and 20 years old, accounted for 6.4 percent (13.0 million) of the total number of drivers, but accounted for nearly 13 percent (7,463) of the drivers involved in fatal crashes.

In fact, more teens are killed in motor vehicle crashes than by homicide and suicide combined. To address this challenge, NHTSA has developed a program strategy with several priority areas:

- Encouraging States to enact effective graduated driver licensing laws (GDL). GDL controls for immaturity and inexperience by gradually exposing young novice drivers to the most risky driving situations. While 46 States and the District of Columbia and Puerto Rico have some kind of GDL law, many States need to enhance their GDL provisions to maximize this benefit.
- Focusing on increasing the use of seat belts by teens, who have one of the lowest use rates. In 2006, 64 percent of 15-20 year-old passenger vehicle occupants killed in crashes were not restrained. NHTSA encourages States to put a special emphasis on teen drivers

during seat belt enforcement campaigns, and has developed communication and outreach programs to complement law enforcement activities.

- Limiting youth access to alcohol. Studies have shown that access to alcohol contributes to higher teen crash rates. Strategies to address youth access to alcohol include highly visible enforcement of laws against purchasing or otherwise providing alcohol for youth; and actions directed at youth, including “use and lose” laws that confiscate the driver’s licenses of underage drinkers, law enforcement “party patrols,” peer education, and penalties for using false identification.
- Encouraging parents to take a greater role in supervising their teen drivers. In fact, parents can now monitor their teenage driving children through the use of technology that utilizes global positioning devices.

Vehicle-based technological advances will continue to play a major role in reducing crashes and fatalities. Advances in computers and electronics have opened possibilities that were unimaginable 25 years ago. Examples of innovative current and emerging safety technologies today include:

- Lane departure warning systems that use cameras to help keep the driver in the appropriate lane.
- Forward collision warning systems that use radar to sense traffic ahead.
- Automated crash notification systems that use GPS and wireless technology to instantly alert authorities to the location of a serious crash.
- Electronic stability control technology (ESC) that can help prevent skids and rollovers. ESC will be required on all passenger vehicles starting in 2011. This device alone has the potential to save thousands of lives every year. These systems are second only to seat belts in terms of the potential for saving lives and reducing injuries.
- Tire pressure warning systems that tell a driver when the tires are below the minimum acceptable level of tire pressure are now required on all passenger vehicles starting with the 2008 models.

To help motivate automobile manufacturers to install voluntary safety technology in new vehicles, Secretary Peters announced just last week plans to expand the range of safety technology evaluated in the New Car Assessment Program (NCAP).

But even the best technology cannot always prevent crashes. When crashes do occur, having an effective and coordinated emergency medical services system could literally mean the difference between life and death. NHTSA is focusing on strengthening trauma care and emergency medical services (EMS) by providing national leadership and coordination through the Federal Interagency Committee on EMS and the National EMS Advisory Council. NHTSA supports

comprehensive, data-driven and research-based EMS systems to improve the emergency care provided to patients from motor vehicle crashes and other medical emergencies.

Through these behavioral and technology efforts, NHTSA seeks to reduce the toll of motor vehicle crashes in this country. Many of these crashes and fatalities are preventable, and through greater implementation of proven safety countermeasures, we believe that thousands of additional lives could be saved every year.

Mr. Chairman, thank you for your consideration and this subcommittee's ongoing efforts to improve highway safety. I would be pleased to answer any questions.

United States Government Accountability Office

GAO

Testimony
Before the Subcommittee on Highways
and Transit, Committee on
Transportation and Infrastructure,
House of Representatives

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**TRAFFIC SAFETY
PROGRAMS**

**Progress, States'
Challenges, and Issues for
Reauthorization**

Statement of Katherine Siggerud, Managing Director
Physical Infrastructure



July 16, 2008

TRAFFIC SAFETY PROGRAMS

Progress, States' Challenges, and Issues for Reauthorization


GAO
 Accountability Integrity Reliability
Highlights

Highlights of GAO-08-990T, a testimony before the Subcommittee on Highways and Transit, Committee on Transportation and Infrastructure, House of Representatives

Why GAO Did This Study

Although the number of traffic crashes and the associated fatality rates have decreased over the last 10 years, the number of traffic fatalities has unfortunately remained at about 42,000 to 43,000 annually. To help states reduce traffic fatalities, the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU) authorized funding for the National Highway Traffic Safety Administration (NHTSA) to award traffic safety grants to states and implement a high-visibility enforcement (HVE) program that combines intensive state and local enforcement of safety belt and impaired driving laws with extensive media communication provided by NHTSA. SAFETEA-LU also added requirements for NHTSA to review all states' management of traffic safety grants at least once every 3 years.

This statement is based on recent GAO reports and ongoing work that address (1) NHTSA's progress in administering and overseeing the traffic safety grant and HVE programs, (2) the programs' effectiveness in addressing traffic safety issues, and (3) issues for Congress to consider in reauthorizing funding for the programs when SAFETEA-LU expires in 2009. This statement also discusses older driver safety. GAO's work, which included recommendations, was based on analyses of traffic fatality data; information from selected states; and reviews of legislation, NHTSA guidelines and procedures, and management reports.

To view the full product, including the scope and methodology, click on GAO-08-990T. For more information, contact Katherine A. Siggerud, (202) 512-2834, siggerudk@gao.gov.

What GAO Found

In general, NHTSA has made substantial progress in administering and overseeing the traffic safety grant and HVE programs. For example, in fiscal years 2006 and 2007, NHTSA awarded about \$576 million through five safety incentive grant programs focused on national priorities, such as safety belt use, impaired driving, and motorcyclist safety. In addition, NHTSA has fully implemented the HVE program and evaluated campaign effectiveness. However, NHTSA's campaign evaluations are based on inconsistent and incomplete data and limited performance measures—GAO made recommendations in our recent report to overcome these limitations. Finally, NHTSA has improved the consistency of its management review process and implemented the requirement to conduct a management review of each state at least once every 3 years. However, NHTSA does not systematically analyze the recommendations that result from the reviews and has not nationally tracked the extent to which states have implemented its recommendations.

NHTSA has not yet assessed the effectiveness of the grant programs, but selected state officials told GAO the programs are helping to address key traffic safety issues such as unrestrained driving and alcohol-impaired driving. These officials also identified challenges that limit program effectiveness, such as difficulties in meeting eligibility requirements, separate application processes, and limited flexibility. Additionally, a key indicator of effectiveness at the national level—the number of traffic fatalities annually—has remained essentially constant over the last 10 years, although traffic fatalities per vehicle mile traveled have declined by about 14 percent. During this time, some causes of fatalities have changed. For example, motorcycle fatalities increased 127 percent while child passenger fatalities decreased 31 percent.

The challenges associated with the safety incentive grants, the lack of performance accountability mechanisms to tie state performance to the receipt of grants, and the persistence of substantial numbers of traffic fatalities nationwide raise issues that Congress may want to consider in reauthorizing funding for traffic safety programs when SAFETEA-LU expires in 2009. According to NHTSA officials, the challenges related to the safety incentive grants stem from the structure of the grant programs established under SAFETEA-LU. In addition, state performance in improving traffic safety is not always tied to the receipt of the grants. Furthermore, the plateau in the number of annual traffic fatalities nationwide and the changes in causes of fatalities may indicate that the traffic safety programs, as currently structured, have limited ability to effectively reduce fatalities. Consequently, in 2009, Congress will be faced with deciding whether to redesign the programs to simplify the grant application process, allow states more flexibility in using grant funds, provide different or additional incentives, or focus more specifically on accountability for performance. However, such changes would require improved safety data to enhance states' ability to identify safety issues and a robust accountability system to ensure that states use federal funds appropriately.

United States Government Accountability Office

Mr. Chairman and Members of the Committee,

We appreciate the opportunity to participate in this hearing to discuss the National Highway Traffic Safety Administration's (NHTSA) programs and oversight. This is an urgent issue because the number of traffic fatalities has unfortunately remained at about 43,000 annually over the last decade, although the fatality rate has decreased by 14 percent during that period. The number of crashes during this time period has also decreased by 12 percent. Congress has developed many approaches to help states and communities reduce traffic fatalities, including traffic safety grant programs and a high-visibility enforcement (HVE) program as well as federal oversight of, and technical assistance to, state highway safety programs. The Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU) authorized NHTSA to award nearly \$2.4 billion from fiscal year 2005 through 2009 to states for Section 402 formula grants¹ and safety incentive grant programs which focus on specific national safety priorities—such as safety belt use, impaired driving, and motorcyclist safety—and include eligibility criteria which states need to meet in order to receive the grants. In addition, SAFETEA-LU authorized \$29 million annually for NHTSA to implement an HVE program that combines intensive state and local enforcement of a specific traffic safety law with extensive media communication provided by NHTSA to inform the public about the campaigns: Click It or Ticket (CIOT) to increase safety belt use, and Over the Limit, Under Arrest (OTLUA) to decrease the number of impaired drivers. Finally, to strengthen NHTSA's oversight, SAFETEA-LU added Section 412 to Title 23 U.S.C., which among other things included a requirement that the administration conduct regular management reviews—reviews of states' management of traffic safety grants—for all states at least once every 3 years and make recommendations.

My testimony today addresses (1) NHTSA's progress in administering and overseeing the traffic safety grant and HVE programs, (2) the programs' effectiveness in addressing traffic safety issues, and (3) issues for Congress to consider in reauthorizing funding for the programs in 2009. In addition, this statement provides information on a traffic safety area that

¹In 1966, Congress established a formula grant program—the State and Community Highway Safety Grant Program, commonly referred to as Section 402—that provides core funding to all states to address a range of traffic safety issues.

we expect to become a more serious issue in the future—older driver safety.

My testimony is based on three recently issued reports on (1) NHTSA's Safety Incentive Grants, (2) the HVE campaign programs, and (3) NHTSA's oversight of state traffic safety programs and the approaches currently available to improve safety outcomes.² In addition, we discuss issues raised in last year's report on older driver safety.³ For all four of these reviews, we analyzed traffic fatality data from NHTSA and selected states, visited selected states, interviewed state highway safety officials, and reviewed relevant documents. We interviewed officials from NHTSA and representatives of at least one nongovernmental organization, including representatives of the American Association of State Highway and Transportation Officials, the Governor's Highway Safety Association (GHSA), and the National Safety Council, among others. We also reviewed other relevant documentation, including legislation, NHTSA guidelines and procedures, and all NHTSA management reports developed in fiscal years 2005 through 2007. For the NHTSA oversight review, we analyzed data provided by NHTSA on how states spent highway safety grants from fiscal years 1999 through 2007. We found the data sufficiently reliable for purposes of this testimony. We conducted these four performance audits between April 2006 and July 2008 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained meets these standards.

Summary

In general, NHTSA has made substantial progress in implementing and overseeing the traffic safety grant programs and the HVE program. In fiscal years 2006 and 2007, NHTSA awarded about \$435 million⁴ to states

²GAO, *Traffic Safety: Grants Generally Address Key Safety Issues, Despite State Eligibility and Management Difficulties*, GAO-08-398 (Washington, D.C.: Mar. 14, 2008); *Traffic Safety: Improved Reporting and Performance Measures Would Enhance Evaluation of High-Visibility Campaigns*, GAO-08-477 (Washington, D.C.: Apr. 25, 2008); and *Traffic Safety: NHTSA's Improved Oversight Could Identify Opportunities to Strengthen Management and Safety in Some States*, GAO-08-788 (Washington, D.C.: July 14, 2008).

³GAO, *Older Driver Safety: Knowledge Sharing Should Help States Prepare for Increase in Older Driver Population*, GAO-07-413 (Washington, D.C.: Apr. 11, 2007).

⁴All dollar values are in nominal dollars and not adjusted for inflation.

through the Section 402 grant program, and an additional \$576 million through five safety incentive grant programs focused on safety belt use, child safety seat and booster seat use, impaired driving, motorcyclist safety, and traffic safety information systems. While all states receive Section 402 grant funds, the extent to which states have qualified for the additional incentive grant programs has varied. For example, in 2006, 22 states received the Safety Belt Use grant and 5 states received the Child Safety and Child Booster Seat Use grant because not all states were able to pass the laws that these grant programs required. A majority of states received the other three grants for which states are required to take actions that do not specifically involve passing laws. In addition, NHTSA has fully implemented the HVE program by (1) developing and disseminating advertisements, (2) coordinating advertisement and enforcement activities with all states, and (3) evaluating the effectiveness of the CIOT and OTLUA campaigns. However, NHTSA's evaluations of its HVE campaign have shortcomings—such as inconsistent and incomplete data and limited performance measures—that hinder the administration's ability to assess the overall effectiveness of the campaigns. To improve the evaluations of HVE campaigns, we recommended that NHTSA develop a minimum core set of reporting requirements for states and include additional performance measures in the evaluations. Finally, as we recommended in 2003, NHTSA has improved the consistency of its management review process—one of the administration's key tools for overseeing state management of traffic safety grants—including implementing the Section 412 requirement that the administration conduct a management review of each state at least once every 3 years. Although the recommendations made by NHTSA as a result of the management reviews provide insight into common state challenges—information that NHTSA could use to direct some of its technical assistance and training resources—NHTSA does not currently analyze these recommendations systematically at a national level. In addition, NHTSA has not nationally tracked the extent to which states have implemented its recommendations, which could help the administration assess the impact of its oversight.

NHTSA has not yet assessed the effectiveness of the grant programs, but selected state officials told us the programs are helping to improve traffic safety; these officials also identified challenges that limit program effectiveness. Additionally, a key indicator of effectiveness at the national level—overall traffic fatalities—has not improved over the last 10 years. NHTSA currently does not have sufficient performance measures to assess the grant programs' effectiveness but has begun the process of developing those measures. In addition, insufficient time has passed since the safety

incentive grants were first awarded in 2006 to analyze trends in fatalities that the states' use of the grants might have affected. Nevertheless, officials in selected states told us the traffic safety grant and HVE programs help address key safety issues such as unbelted driving and alcohol-impaired driving. State officials further said that incentive grants complement Section 402 grants by allowing states to expand core traffic safety activities. For example, states have used the safety belt use and impaired driving incentive grants to fund enforcement activities for high-visibility enforcement campaigns. However, state officials also noted several challenges that limit the effectiveness of these programs:

- Despite the availability of incentive grants, some states have faced challenges passing legislation required to qualify for the safety belt use and child safety and booster seat grants.
- Each safety incentive grant has a separate application process, which has proven challenging for some states to manage, especially those with small safety offices.
- Some states also would have preferred more flexibility in using the safety incentive grants; this could become a key issue in the future as emerging issues—such as older driver safety—become more critical in states.

At the national level, a key indicator of the overall effectiveness of these programs—traffic fatalities—has not decreased but rather has remained at about 43,000 for the last 10 years. Traffic fatalities per 100 million vehicle miles traveled (VMT) declined, however, by approximately 14 percent in this time period. Within this overall indicator, some causes of fatalities have changed in the last decade. For example, between 1997 and 2006, annual motorcycle fatalities increased by 127 percent while child passenger fatalities decreased by 31 percent.

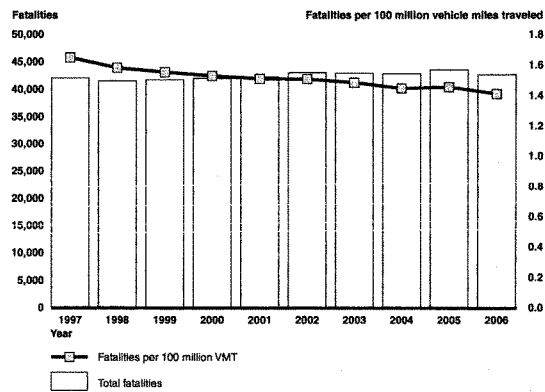
The challenges associated with the safety incentive grants, the lack of performance accountability mechanisms to tie state performance to receipt of grants, and the persistence of substantial numbers of traffic fatalities nationwide as well as changes in causes of fatalities raise issues that Congress may want to consider in reauthorizing funding for the Surface Transportation Program. First, NHTSA officials told us that the challenges related to the safety incentive grants—difficulties in meeting eligibility requirements, separate application processes, and limited

flexibility—stem from the structure of the grant programs authorized under SAFETEA-LU. Second, although NHTSA is developing additional performance measures to evaluate the results of traffic safety grants, state performance is not always tied to the receipt of the grants. Furthermore, the plateau in the number of annual traffic fatalities nationwide and the changes in causes of fatalities may indicate that the current structure of traffic safety programs has limited ability to effectively reduce fatalities and allow NHTSA and states to respond to emerging safety issues, such as motorcycle safety in recent years and potentially older driver safety in the future. Consequently, in 2009, Congress will be faced with deciding whether the programs could be designed differently to simplify the grant application process, allow states more flexibility in using grant funds to address current and emerging safety issues, provide different or additional incentives, or focus more specifically on performance accountability. NHTSA officials noted that the Department of Transportation's (DOT) 2003 reauthorization proposal included features that would address these issues, such as performance-based grants within the Section 402 grant. However, these changes would require improved safety data to enhance states' ability to identify safety issues and a robust accountability system to assure that states use federal funds appropriately.

Background

In 2006, more than 42,600 people were killed in motor vehicle crashes. Overall, the number of fatalities has remained fairly constant over the last decade, although the fatality rate declined by approximately 14 percent, from 1.65 fatalities per 100 million VMT in 1997 to 1.41 in 2006 (see fig. 1).

Figure 1: Trends in Traffic Fatalities and Fatality Rates (1997 to 2006)



The two leading factors contributing to fatal crashes are the failure to use safety belts and alcohol-impaired driving; speeding and motorcycle crashes are also key factors.⁵ Overall, unrestrained fatalities⁶ and alcohol-involved⁷ fatalities have decreased over the last two decades. However, in contrast to the progress made in reducing unrestrained and alcohol-involved motor vehicle fatalities and fatality rates over time, speeding-related fatalities have remained fairly constant, and motorcycle fatalities and fatality rates have increased significantly over the last decade.

⁵According to NHTSA, these factors overlap, in that many of the people killed in alcohol-related crashes were also unrestrained. In addition, speeding-related crashes may involve alcohol, motorcycles, and/or unrestrained driving.

⁶Unrestrained fatalities are those in which the deceased was not wearing a shoulder belt, lap belt, lap and shoulder belt, child safety seat, or other restraint and were occupants (except bus passengers) of motor vehicles (except motorcycles, all terrain vehicles, and snowmobiles).

⁷Alcohol-involved fatalities include all fatalities in a motor vehicle crash where one or more involved drivers, pedestrians, or pedalcyclists in the crash had a blood alcohol content of 0.08 or greater.

While older drivers currently represent about 14 percent of annual traffic fatalities, their safety is an emerging issue that will likely become more serious due to predicted rapid growth in the elderly population. By 2030, the number of licensed drivers ages 65 and older is expected to nearly double to about 57 million. As people age, they may experience declines in physical, visual, and cognitive functions that affect their ability to drive safely. While older drivers experience fewer fatal crashes per licensed driver than younger drivers, they are more likely to suffer injuries or die in crashes.

Through SAFETEA-LU, Congress authorized nearly \$2.4 billion for 5 years, from fiscal years 2005 through 2009 to provide safety grants to assist states' efforts to reduce traffic fatalities. This represents an increase of \$172 million annually from the authorization levels under the Transportation Equity Act for the 21st Century (TEA-21) from fiscal years 1998 through 2003.⁸ The largest portion of these funds—about \$1 billion—was allocated for the continuation of the Section 402 grant program that provides core highway safety funds for all states through a formula based on each state's population and public road miles. States can use Section 402 funding to address a variety of traffic safety issues. SAFETEA-LU also modified or added five safety incentive grant programs, as follows:⁹

- *Safety Belt Use (\$498 million)*—encourages states to enact and directly enforce safety belt use laws. States qualify for this program if they pass primary safety belt laws or achieve and maintain a safety belt usage rate of 85 percent. States can use funds for a range of highway safety activities, including public education programs or construction to improve a hazardous roadway.
- *Child Safety and Child Booster Seat Use (\$25 million)*—encourages states to enact and enforce booster seat laws.¹⁰ States qualify for this

⁸Under TEA-21, Congress authorized approximately \$2.3 billion for 6 years, from fiscal years 1998 to 2003. After TEA-21 expired in 2003, Congress authorized extensions until passing SAFETEA-LU in 2005. We are not including funding authorized by these extensions.

⁹SAFETEA-LU also continued the Occupant Protection grant program (\$100 million) that provides funds for states to adopt and implement programs to reduce deaths and injuries from riding "unrestrained" or "improperly restrained."

¹⁰Booster seats are intended to be used by children weighing more than 40 pounds who have outgrown a child safety seat. The seats serve as a transition to wearing a safety belt.

program if they have in effect a law requiring any child under the age of 8 to be secured in an appropriate child restraint system, unless the child weighs more than 65 pounds or is 4 feet 9 inches or taller. States can use funds for child restraint programs, including enforcing laws or training child safety professionals and parents on the proper use of child safety and booster seats. States may use up to 50 percent of the funds to purchase and distribute child safety and booster seats for low-income families.

- *Alcohol Impaired Driving Countermeasures (\$515 million)*—encourages states to implement enforcement, education, training, and other countermeasure activities to reduce alcohol-impaired driving. States qualify for this grant by: (1) achieving a low alcohol-related fatality rate of 0.5 or less per 100 million VMT, (2) being 1 of the 10 states with the highest alcohol-related fatality rate, or (3) meeting specific programmatic criteria—three in fiscal year 2006, four in fiscal year 2007, and five in fiscal years 2008 and 2009.¹¹
- *Motorcyclist Safety (\$25 million)*—to encourage states to adopt and implement programs to reduce crashes involving motorcyclists. States can use funds for motorcyclist safety training and motorist awareness programs. To qualify, states must meet one of six programmatic criteria in the first fiscal year and two in the second and subsequent years.¹²
- *State Traffic Safety Information Systems Improvement (\$138 million)*—to adopt and implement programs to improve states' safety data systems, which includes data on crashes, vehicles, drivers, enforcement or adjudication, and injury surveillance. States can use funds to improve the timeliness, accuracy, completeness, uniformity, integration, and accessibility of state data to identify national, state, and local highway and traffic safety programs. To qualify in the first year, a state must meet three criteria. To qualify in subsequent years, a state must meet five criteria.¹³ In 2004, GAO reported that state traffic safety data systems vary considerably

¹¹See App. II for the eight programmatic criteria that states can use to qualify.

¹²See App. II for explanation of the six criteria that states can use to qualify.

¹³See App. II for explanation of the criteria to qualify in the first and subsequent years.

in the extent to which they meet recommended criteria used by NHTSA to assess the quality of crash information.¹⁴

SAFETEA-LU also authorized \$29 million annually from fiscal years 2006 through 2009 for NHTSA to implement two nationwide HVE campaigns to increase safety belt use—CIOT—and reduce alcohol-impaired driving—OTLUA. HVE campaigns combine intensive traffic law enforcement with extensive communication, education, and outreach informing the public about the enforcement activity. This combination of media and enforcement is designed to increase the public's perception that people who violate the law will be ticketed, arrested, convicted, or punished, and persuade them to adhere to the law. NHTSA is responsible for developing and disseminating national advertisements, coordinating with states to conduct the campaigns, and evaluating the results. State and local law enforcement agencies provide resources for the campaigns such as officers, cars, and equipment for patrols and checkpoints and can use federal traffic safety grants to support these activities.

NHTSA oversees state traffic safety grant programs by reviewing states' management of these grants and assessing their progress in improving safety outcomes, and in 2003 GAO recommended that NHTSA take steps to improve its oversight. NHTSA oversees states' grant management by monitoring spending and conducting triennial management reviews designed to ensure that states manage grants effectively, efficiently, and in compliance with laws and regulations. NHTSA also assesses states' performance against state-established safety goals and national safety outcomes. NHTSA conducts special management reviews of states with consistently high alcohol-related fatality rates or low safety belt use rates and less than half of the national average improvement in these areas over time.¹⁵ A special management review is an in-depth evaluation of a state's impaired driving or safety belt use program which NHTSA uses to recommend program improvements. In addition, at states' request, NHTSA officials told us that the administration coordinates voluntary technical

¹⁴GAO, *Highway Safety: Improved Monitoring and Oversight of Traffic Safety Data Program Are Needed*, GAO-05-24 (Washington, D.C.: Nov. 4, 2004).

¹⁵To select states for a special management review, each year NHTSA headquarters officials compare state performance in impaired driving and safety belt use over the prior 3 years with average national performance over the same time period. States with alcohol-related fatality rates consistently above the national average or safety belt usage rates consistently below the national average can be selected to receive a special management review.

program assessments conducted by leading independent experts who review state programs in one of seven traffic safety areas and recommend program improvements.¹⁶ In 2003, we found that NHTSA used management reviews and resulting improvement plans inconsistently across the administration's 10 regional offices, which made it difficult to ensure that states used federal funds in accordance with requirements and that they addressed program weaknesses. As a result, we recommended that NHTSA provide more specific guidance to regional offices on when to conduct management reviews and use improvement plans, and how to measure state progress toward meeting safety goals.¹⁷

NHTSA Has Successfully Implemented the Traffic Safety and HVE Programs and Improved the Consistency of Its Oversight Process

Overall, NHTSA has successfully administered the traffic safety grant and HVE programs and improved the consistency of its oversight. In fiscal years 2006 and 2007, NHTSA awarded about \$1 billion to states through the Section 402 program and five incentive grant programs, but some states were unable to meet the eligibility requirements for two of the incentive grant programs—the Safety Belt Use and Child Safety and Booster Seat Use programs—which required states to pass laws. NHTSA has implemented the HVE program by developing and disseminating advertising, coordinating with states, and evaluating the effectiveness of the campaigns. However, NHTSA's campaign evaluations have weaknesses related to data and performance measures that hinder the administration's ability to assess the campaigns' key components and overall effectiveness, and we recommended that NHTSA take steps to address these shortcomings. Finally, as we recommended in 2003, NHTSA has improved the consistency of its oversight process, including implementing requirements added by SAFETEA-LU. Even so, NHTSA does not currently analyze its management review recommendations to identify common state challenges, provide assistance accordingly, and assess the impact of its oversight.

¹⁶These areas include alcohol-impaired driving, occupant protection, occupant protection for children, motorcyclist safety, emergency medical services, traffic records, or standardized field sobriety testing. The Standardized Field Sobriety Test (SFST) is a battery of three tests administered and evaluated in a standardized manner to obtain validated indicators of impairment and establish probable cause for arrest. SFST training programs help law enforcement officers become more skillful at detecting driving while intoxicated (DWI) suspects, describing the behavior of these suspects, and presenting effective testimony in court.

¹⁷See GAO, *Highway Safety: Better Guidance Could Improve Oversight of State Highway Safety Programs*, GAO-03-474 (Washington, D.C.: Apr. 21, 2003).

NHTSA Has Awarded Traffic Safety Grants to States

NHTSA has fully implemented the Section 402 and safety incentive grant programs, although some states have been unable to qualify for certain incentive grants, particularly those requiring states to pass laws. As table 1 indicates, in fiscal years 2006 and 2007, NHTSA awarded about \$435 million to states¹⁸ through the Section 402 grant program, and awarded an additional \$576 million to states through the five incentive grant programs.

Table 1: Grant Funds Awarded in Fiscal Years 2006 and 2007 (Dollars in millions)

Grants	Funds awarded in fiscal years 2006 and 2007
Section 402	\$434.6
<i>Safety Incentive Grants</i>	
Safety Belt Use	243.6
Child Safety and Booster Seat	8.6
Impaired Driving	242.8
Motorcyclist Safety	11.9
Traffic Safety Information Systems	68.7
Total Safety Incentive Grants	\$575.6

Source: GAO.

In each of these years, all states received the Section 402 formula grant and the Impaired Driving grant, and the majority of states received the Motorcyclist Safety and Traffic Safety Information Systems grants. However, fewer than half the states were able to meet the eligibility requirements for the Safety Belt Use and Child Safety and Booster Seat grant programs, which required states to pass laws—a primary safety belt law or a booster seat law—in order to qualify for the grants. Specifically, in fiscal year 2006, 22 states received the Safety Belt Use grant.¹⁹ In fiscal

¹⁸All 50 states; the District of Columbia; Puerto Rico; the territories of Guam, Virgin Islands, American Samoa, and the Commonwealth of the Northern Marianas Islands; and the Bureau of Indian Affairs (BIA) receive Section 402 grant funds. Moreover, all 50 states, the District of Columbia, and Puerto Rico are eligible for each of the safety incentive grants. The territories of Guam, Virgin Islands, American Samoa, and the Commonwealth of the Northern Marianas Islands are eligible for the Safety Belt Use, Impaired Driving, and Traffic Safety Information Systems grant programs. BIA is eligible for the Impaired Driving and Traffic Safety Information Systems grants. Dollar amounts in our figures include the 50 states, the District of Columbia, Puerto Rico, the territories, and BIA, but the focus of this testimony is the 50 states.

¹⁹Six states passed a primary safety belt law in 2003 or later and received a one-time Safety Belt Use grant in fiscal year 2006. Sixteen states had a law in place before 2003 and received this grant in two installments over fiscal years 2006 and 2007.

year 2007, two additional states qualified for this grant by passing a primary safety belt law. Beginning in fiscal year 2008, NHTSA will also award the Safety Belt Use grant to states that have achieved an 85 percent safety belt use rate in the preceding 2 calendar years. In fiscal year 2008, six additional states will receive this grant—five states qualified based on safety belt use rates, and one state based on a new primary safety belt law. According to a NHTSA official, only two additional states have a mathematical chance of qualifying for this grant in fiscal year 2009 based on safety belt use rates. Similarly, five states received the Child Safety and Booster Seat Use grant in fiscal year 2006. In fiscal year 2007, 8 additional states qualified for this grant program, for a total of 13 states receiving the grant that year.²⁰

NHTSA Has Implemented the HVE Program, but Should Take Steps to Improve Evaluation of the Program

NHTSA has implemented a nationwide HVE program, but we recently recommended that NHTSA take steps to improve its evaluations so the administration can better assess the overall effectiveness of the campaigns. As specified in SAFETEA-LU, NHTSA has implemented the HVE program by (1) developing and disseminating advertising, (2) coordinating with states on media and enforcement activities, and (3) annually evaluating the effectiveness of the CIOT and OTLUA campaigns. NHTSA introduced a national plan in 2005 that set forth an advertising strategy and has also developed advertisements and purchased national media time. In addition, NHTSA provides guidance to states, including an overall strategy for conducting the campaigns, as well as technical assistance and advertising materials such as posters and model press releases. Officials in selected states said that NHTSA has provided the support they need to conduct HVE campaigns. Although NHTSA's annual evaluations indicate that the campaigns are helping to improve safety belt use and reduce impaired driving, these evaluations have weaknesses that hinder the administration's ability to assess the level of state and local activity—a key component of the campaigns—and the campaigns' overall effectiveness. For example, NHTSA cannot meaningfully analyze and compare state activities because state data are incomplete and inconsistent due to voluntary reporting by law enforcement agencies. Furthermore, NHTSA cannot measure the campaigns' overall effectiveness because the performance measures used to evaluate the campaigns are not comprehensive. For example, while NHTSA measures the change in

²⁰States that pass or have in effect a booster seat law receive the Child Safety and Booster Seat grant each year under SAFETEA-LU.

daytime safety belt use, it does not directly measure nighttime safety belt use, despite recent efforts to increase the use of safety belts at night. NHTSA is working to develop more comprehensive performance measures. Nevertheless, to improve these evaluations, we recommended that NHTSA develop a minimum core set of reporting requirements for states and include additional performance measures in the evaluations.

NHTSA Has Improved Its Oversight of States, but Does Not Currently Analyze the Management Review Recommendations to Identify Common State Problems and Direct Resources Accordingly

As we recommended in 2003, NHTSA has improved the consistency of its oversight process, including implementing the requirement added by SAFETEA-LU that the administration conduct a management review of each state at least once every 3 years. NHTSA regional officials conducted 56 of the 57 required management reviews from fiscal years 2005 through 2007.²¹ NHTSA also refined its management review guidance to clarify the process each regional office uses to initiate, conduct, and publish a final management review report. In addition, NHTSA developed a tool—the corrective action plan—to track state implementation of management review recommendations and encourage states to act on the administration's advice. Recently, NHTSA has worked with the Governors Highway Safety Association (GHSA) to clearly distinguish between recommendations related to noncompliance with statutes or regulations, which states are required by law to implement, and recommendations related to best practices, which states are not required to implement. NHTSA has also trained regional officials on these changes to the management review process and established a national team to review all draft management review reports for consistency.

NHTSA's recent initiatives to improve the consistency of its management reviews should improve the information available to the administration for analysis—such as information on common grant management challenges faced by states—and thus may provide an opportunity for NHTSA to enhance its oversight. However, NHTSA does not currently have a process for analyzing its management review recommendations on a national level, identifying common challenges faced by states, and directing training and technical assistance resources accordingly. Furthermore, NHTSA has not

²¹American Samoa was the only state or territory that did not receive a management review from fiscal years 2005 through 2007. A NHTSA official told us that due to a limited travel budget, the regional office was unable to conduct an onsite management review during those fiscal years. The regional office plans on conducting an onsite visit in fiscal year 2008. American Samoa received \$1.6 million in federal highway safety funding in fiscal year 2007, one of the lowest amounts of funding in the nation.

nationally tracked the extent to which states have implemented its recommendations, which could help the administration assess the impact of its oversight.

Selected State Officials Say Programs Are Helping Improve Traffic Safety Despite Some Challenges, but Nationwide Fatalities Have Not Decreased

NHTSA has not yet assessed the grant programs' effectiveness because it has not developed sufficient performance measures and the safety incentive grants have not been in place long enough to evaluate trends. Nevertheless, selected state officials told us the programs are helping to improve traffic safety. These officials also identified challenges limiting the programs' effectiveness. Additionally, a key indicator of effectiveness at the national level—overall traffic fatalities—has not improved over the last 10 years, being offset by factors such as increases in population and the number of vehicle miles traveled.

Insufficient Performance Measures and Trend Data Preclude Assessments of Effectiveness

NHTSA officials indicated that they plan to rely on performance measures to help determine the results of traffic safety programs. NHTSA does not currently have sufficient performance measures in place and changes to the safety incentive grant programs resulting from SAFETEA-LU have not been in place long enough to allow NHTSA to evaluate results, such as improvements in fatality rates. According to a NHTSA official, they will begin receiving sufficient trend data later in 2008. NHTSA currently uses DOT-wide measures that reflect the overall goal of reducing traffic fatalities, such as measures of the fatality rates of passenger vehicle occupants and motorcyclists. In addition, NHTSA has developed intermediate outcome measures to track behaviors influencing traffic safety, such as safety belt use.

However, these measures do not comprehensively cover the traffic safety areas included in the grant programs because they do not include measures to track behaviors influencing alcohol-related fatalities, such as the number of impaired-driving citations that police officers issued, arrests, and convictions.²² Currently, the extent to which states collect data

²² U.S. Department of Transportation Office of Inspector General, *Audit of the National Highway Traffic Safety Administration's Alcohol-Impaired Driving Traffic Safety Program*, Report No. MH-2007-036 (Washington, D.C., Mar. 5, 2007).

needed to track such measures varies. NHTSA recognizes the need to improve these measures and, in partnership with GHSA, has hired a contractor to develop a common set of performance measures that federal, state, and local governments could use. NHTSA seeks to establish intermediate outcome measures for a broad range of traffic safety areas, including safety belts and child passenger safety, impaired driving, and motorcycles, that can reliably track progress toward reducing safety problems. NHTSA plans to use these measures to track progress at the national level and encourage states to consider them in the highway safety planning process. The contractor's analysis is expected to be completed in August 2008.

Selected State Officials Report Safety Grant and HVE Programs Help Improve Traffic Safety

Officials in selected states told us that the safety grant and HVE programs help improve safety by funding activities addressing key safety issues in their states, and that the incentive grants complement Section 402 grants by allowing states to expand core traffic safety activities. For example:

- States primarily use Section 402 funds for programs aimed at reducing alcohol-impaired driving and unbelted driving. From fiscal years 1999 through 2007, states spent approximately \$1.5 billion in Section 402 funding. More than half of this funding was spent on traffic law enforcement, occupant protection, and alcohol-impaired driving countermeasures. These three areas support programs intended to reduce the incidence of alcohol-impaired and unrestrained driving, such as overtime hours police officers dedicated to traffic law enforcement, training for police officers on identifying and assessing drivers who are under the influence of alcohol or other drugs, and media campaigns aimed at increasing safety belt use as well as campaigns targeting populations that are at high risk for driving under the influence of alcohol. States also used Section 402 funding for programs to reduce speeding and improve motorcycle safety.

States also use safety incentive grant programs to plan and implement safety improvement activities to address key traffic safety issues in their states. These activities generally fall into five categories—education and training, media and public information, enforcement, data and technology, and infrastructure improvements. States use the grants to address goals and performance measures established in state highway safety plans. These include increasing safety belt use, reducing alcohol-impaired driving, and reducing motorcyclist fatalities. Specifically, states use the safety incentive grant programs as follows:

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- *Safety Belt Use*—State officials have more flexibility in using these funds compared with other incentive grants because they can use this grant program to fund any traffic safety activities, as well as to fund infrastructure improvements, although most funding has been allocated toward programs influencing safety. Specific examples of activities funded include the CIOT HVE campaign, statewide safety belt use surveys, traffic safety information system improvements, upgrades and improvements to locations where pedestrian and motor vehicle collisions occur, or videotaping and assessing county roadway systems.
 - *Child Safety and Booster Seat*—States use these funds for education and training, media and public information, and other activities such as car seat purchases. Specifically, these activities include increasing training for child safety seat technicians and instructors and supporting additional safety checkpoints and clinics where parents learn how to properly install safety seats, as well as promoting awareness of child passenger safety.
 - *Impaired Driving*—States use these funds for education, training, media, public information, and enforcement activities. Activities include training law enforcement officers and promoting outreach programs to prosecutors and judges, promoting awareness of the impact of impaired driving, including teen drivers, and funding HVE activities such as the OTLUA campaign, and targeting establishments that sell alcoholic beverages to minors. In addition, states have used funds to purchase equipment such as breath alcohol testing vans, enhance courts' and prosecutors' ability to prosecute impaired driving, and encourage legislation imposing stronger sanctions and penalties for impaired driving.
 - *Motorcyclist Safety*—States use these funds for education and training as well as media and public information. Specifically, states use these funds to train more motorcycle safety instructors and add classes, for campaigns to increase other motorists' awareness of motorcyclists and promote motorcycle training courses, and to purchase additional motorcycles for training courses.
 - *Traffic Safety Information Systems*—States use these funds for data and technology activities to enhance the quality of information concerning crashes, drivers licenses, injury surveillance, roadways, enforcement and adjudication, and vehicles. Activities include improving the timeliness and uniformity of crash data; developing an electronic citation system to allow

electronic issuance, collection, and court processing of citation data; creating a statewide emergency medical system and trauma database; and enhancing driving under the influence (DUI) records.

Officials in selected states reported that HVE campaigns contribute to increases in safety belt use and reductions in impaired driver fatalities. These states all experienced increased safety belt use and reduced alcohol-involved fatality rates in the last 10 years. Increased safety belt use ranged from 6.5 percent in North Carolina to 29.6 percent in North Dakota. Nationwide, safety belt use increased 12 percentage points from 1997 to 2006. Similarly, the selected states experienced a decrease in alcohol-involved fatality rates from 1997 to 2006. Decreases ranged from 22 percent in Rhode Island and North Dakota to 3 percent in Arkansas. Five of the seven states we visited experienced declines in alcohol-involved fatality rates that exceeded the overall U.S. decrease of 12 percent. States officials we spoke with attributed these improvements, in part, to participation in HVE campaigns.

**State Officials Noted
Challenges Limit
Programs' Effectiveness**

Although officials in selected states have found the grants and HVE programs helpful, they noted several challenges that limit the programs' effectiveness:

- Despite the availability of incentives, some states have faced challenges passing legislation required to qualify for the Safety Belt Use and Child Safety and Booster Seat grants. About half of the states have not enacted primary safety belt laws principally because their state legislatures or governors oppose mandating safety belt use laws that could infringe on individuals' personal freedom. Although 16 states had primary safety belt laws in effect before 2003, from 2003 through 2007, 29 states introduced primary safety belt bills; only 8 passed the bills. Similarly, relatively few states have passed laws to qualify for Child Safety and Booster Seat grants. From 2003, when states became aware that certain provisions would likely be included in the reauthorization legislation, through 2007, 24 states considered requiring children to use booster seats up to age 8. In total, five states passed new laws or modified existing laws to qualify for the grant in fiscal year 2006. An additional eight states passed laws to qualify in fiscal year 2007. Although many states have booster seat laws in effect, the laws vary in terms of age, height, and weight requirements, with some states requiring seats up to ages 5, 6, or 7. Other states use height and weight requirements. According to traffic safety officials and safety advocates, these variations occurred because of evolving research and guidance from NHTSA on determining who should be in booster seats. However, once a

state has a booster seat law, those involved in child passenger safety are reluctant to try to change it for fear of losing the states' existing safety provisions.

- Each safety incentive grant has a separate application process, which has proven challenging for some states to manage, especially those with small safety offices. The five applications are each due within a 1-1/2 month period between June 15 and August 1. According to state highway safety officials, each application requires extensive amounts of staff time and resources. Although the application process is similar for each grant, having to complete it several times within a short time frame presents administrative challenges for states. Several states expressed concerns about the demands the application process placed on their staff, including those with larger safety programs and more staff and resources than those with smaller safety programs. According to NHTSA, the application requirements reflect statutory requirements to award grants in the same year in which the state's legislative status and fatality-rate performance are measured.
- Some states would have preferred more flexibility in using safety incentive grants; flexibility could become a key issue in the future as emerging issues become more critical. For example, the Motorcyclist Safety grant program allows funding to be used only for training and to increase other motorists' awareness of motorcyclists. Officials in Montana would like to use the funds to build new sites or expand the size of current training sites, but the grant does not allow them to do so, although the grant does allow states to lease or purchase new sites. New Jersey officials also noted that the Child Safety and Booster Seat grant they received in fiscal year 2006 was much larger than expected; they would have preferred using the additional funding for other areas, such as the state's traffic safety information systems. Some state officials we interviewed noted that, while the traffic safety data improvement grant will help them improve their data systems, the cost of developing and maintaining these systems far exceeds the amount of the grant.
- In implementing the HVE campaigns, some law enforcement agencies found it difficult to recruit sufficient officers to conduct campaigns. Some law enforcement agencies said they did not have sufficient staffing levels for both regular police work and frequent HVE campaign enforcement activities. Factors affecting staffing include crime enforcement having priority over traffic enforcement, officers being called up for military duty

or diverted to homeland security duties, too few personnel, and an insufficient number of officers signing up for overtime to work the campaigns. NHTSA has taken steps to help states overcome these challenges by providing funding for equipment as an incentive to participate and providing guidance on how to better use existing resources. States have also taken steps, for example, by recognizing officers for contributions to HVE campaigns.

- Weak prosecution of impaired driving offenders reduces the likelihood that HVE campaigns will achieve desired results. State and NHTSA officials indicated that, because court systems have heavy caseloads and limited resources, DUI cases may be given a lower priority compared with more violent crimes. Additionally, some law enforcement officials and prosecutors lack the knowledge and training needed to consistently prosecute DUI cases. As a result, some DUI charges may be dismissed. Finally, judges handling DUI cases face challenges, including frequent plea bargains, which may undermine the deterrent value of the arrest. States have developed initiatives to train judges and officers on DUI prosecution and train officers on conducting field sobriety testing. NHTSA has also provided guidance, funded training programs, and provided states grants to more effectively prosecute DUI offenders.
- States face difficulties increasing safety belt use and reducing alcohol-impaired driving among resistant populations, such as drivers in rural areas, those who drive pickup trucks, and those who repeatedly drink and drive. Statistics show that more drivers in rural areas resist wearing safety belts. In general, rural areas have a higher proportion of fatal crashes and traffic fatalities than urban areas, as well as higher alcohol-involved crash rates, crashes at higher speeds on narrow or sharply curved rural roads, and less access to emergency services. Moreover, crashes in rural areas also more likely involve unrestrained occupants who are thus ejected from vehicles. NHTSA and states are taking steps to increase rural safety belt use and have developed programs targeting pickup truck drivers, including the "Buckle Up in Your Truck," campaign that targeted young males who are more likely to drive pickup trucks. NHTSA has outlined strategies for states and local communities, such as a rural demonstration program involving intensified enforcement and paid media to alert residents in targeted areas that safety belt laws will be enforced. Another challenge is reducing impaired driving among hardcore drunk drivers—those who drive with a blood alcohol content (BAC) of 0.15 or greater. NHTSA data indicates that hardcore drinkers are involved in 54 percent of alcohol-involved fatalities and are likely to be repeat drinking drivers. NHTSA has

recommended increased use of ignition interlock devices—which prevent a vehicle from starting if the BAC exceeds a certain limit—as a penalty against repeat drunken drivers.

Despite improvements in certain areas, traffic fatalities—a key indicator of the overall effectiveness of these programs—have remained relatively constant at about 43,000 per year over the last 10 years. Traffic fatalities per 100 million VMT declined by approximately 14 percent during this period, from 1.65 in 1997 to 1.41 in 2006. Also, the two primary causes of fatalities—improper safety belt use and impaired driving—have been somewhat mitigated. Unrestrained fatalities decreased from 23,236 in 1985 to 16,053 in 2006, while the unrestrained fatality rate decreased by 0.78, from 1.31 to 0.53 fatalities per 100 million VMT. These improvements were likely due to safety belt laws states began passing in the 1980s. Alcohol-impaired driving showed similar reductions. From 1985 to 2006, the alcohol-involved fatality rate decreased by 0.63, from 1.13 to 0.50 fatalities per 100 million VMT. According to NHTSA, these improvements were influenced by federal laws providing states incentives to strengthen impaired driving laws, among other factors. Nevertheless, progress has slowed, with a fluctuating number of alcohol-involved fatalities and a generally declining alcohol-involved fatality rate from 1994 to 2006. A third category—child passenger fatalities—decreased by 31 percent, from 3,157 in 1997 to 2,173 in 2006.

However, increases in motorcycle fatalities from 1997 to 2006 offset improvements in other areas. Motorcycle fatalities more than doubled between 1997 and 2006, increasing from 2,116 fatalities (5 percent of total traffic fatalities) to 4,810 fatalities (11.3 percent of total traffic fatalities). Similarly, motorcycle fatality rates grew from 55.30 fatalities per 100,000 registered motorcycles in 1997 to 71.94 fatalities per 100,000 registered motorcycles in 2006.²³ NHTSA attributes part of this problem to an increase in older motorcycle riders—particularly those riders over age 50 who have not operated motorcycles in 15 to 20 years—whose riding skills have declined, but have not sought additional training. In contrast to the changes in these three types of traffic fatalities, speeding-related fatalities

²³DOT has changed the baseline for its motorcycle fatality rates from 100 million VMT to 100,000 registered motorcycles because of concerns that VMT did not seem valid considering the number of registered motorcycles. NHTSA calculates motorcycle fatality rates using both measures. Thus, using VMT, the motorcycle fatality rates increased from 20.89 per 100 million VMT in 1997 to 38.79 per 100 million VMT in 2006.

have essentially remained constant over the last decade, growing slightly from 13,036 fatalities in 1997 (31 percent of total traffic fatalities) to 13,543 in 2006 (32 percent of total traffic fatalities).

Issues for Reauthorization

The administrative challenges faced by states in applying for and using incentive grants and a lack of performance measures that link traffic safety grant awards to state performance, as well as the plateau in overall traffic fatalities and changes in causes of fatalities in recent years pose implications that Congress may want to consider when reauthorizing funding for the Surface Transportation Program. As noted previously, states have faced challenges in meeting eligibility requirements for the Safety Belt Use and Child Safety and Booster Seat grant programs and in managing the separate grant applications and deadlines associated with each of the five incentive grants, and would like to have more flexibility in the range of traffic safety activities supported by these grants. NHTSA officials acknowledged state officials' concerns, but noted they cannot address the concerns because these difficulties stem from the grant requirements established in SAFETEA-LU. In reauthorization, Congress may wish to consider ways to reduce these administrative and management challenges for states, for example, by restructuring the safety incentive grant programs or adjusting grant requirements to consolidate incentive grant applications, simplifying the application procedures and deadlines, or allowing states to use these grants for a broader range of traffic safety purposes.

A second potential consideration is whether the traffic safety grant programs could be designed differently to include performance accountability mechanisms to link state performance with traffic safety grant awards. NHTSA officials indicated that they plan to rely on performance measures to help determine the results of the incentive grant programs. Although the performance measures that NHTSA currently uses—DOT performance measures and several intermediate outcome measures—are not comprehensive, the administration is in the process of developing more comprehensive measures to reliably track states' progress toward achieving safety goals in a broad range of traffic safety areas. Even so, states' receipt of traffic safety grant funds is not always linked to performance. For example, while the Traffic Safety Information Systems and Impaired Driving grants include performance criteria in their eligibility requirements, states can also qualify for the Impaired Driving

grant based on additional criteria, and the three other incentive grants do not include any performance-based eligibility criteria.²⁴ We have previously reported that such performance accountability mechanisms could improve the design and implementation of federal grants.²⁵ Specifically, regarding transportation-related grants, we have raised concerns about insufficient links between state performance and receipt of grants.

Finally, given the plateau in the number of annual traffic fatalities nationwide and the changes in causes of fatalities, including the increase in motorcycle fatalities and fatality rates, Congress may wish to consider whether the current traffic safety programs could be restructured to more effectively reduce fatalities. Currently, to address traffic fatalities, Congress offers incentive grants to encourage states to pass safety legislation and achieve certain safety outcomes, and penalty transfer programs to discourage states from failing to pass safety legislation. In addition, NHTSA uses several approaches to help states improve their safety outcomes. NHTSA provides expert advice to all states through its evaluation of state progress toward safety goals and performance measures established annually by each state, special management reviews for states not making adequate progress in the areas of alcohol-impaired driving and safety belt use, and voluntary technical program assessments for states requesting additional assistance in a variety of areas. However, since the number of annual traffic fatalities has remained fairly constant in recent years—being offset by factors such as increases in population and the number of vehicle miles traveled—Congress may wish to consider adjusting these existing strategies or implementing additional strategies to reduce fatalities. For example, Congress may wish to consider different or additional state incentives, or allow states more flexibility in using grant funds to address current and emerging safety issues. We have also recommended that NHTSA identify options to target safety expertise and technical assistance to states with a high number of fatalities that would not qualify for a special management review.

²⁴NHTSA will begin awarding the Safety Belt Use grant in fiscal year 2008 to states that have certified that they have achieved at least an 85 percent safety belt use rate in the preceding 2 calendar years. However, a NHTSA official indicated that only five states would qualify for the grant based on safety belt use in fiscal year 2008 and that only two had a mathematical chance of qualifying under this criteria in fiscal year 2009.

²⁵GAO, *Grants Management: Enhancing Performance Accountability Provisions Could Lead to Better Results*, GAO-06-1046 (Washington, D.C.: Sept. 29, 2006).

NHTSA officials noted that DOT's 2003 reauthorization proposal included performance-based grants within the Section 402 grant, and would have addressed the eligibility and management challenges states faced in using the safety incentive grants. Under this proposal, the amount of each state's performance based grant would have depended on the state's performance related to various crash fatality rates, safety belt use, and safety belt laws. However, given that we identified deficiencies in the quality of state data systems in 2004, data-driven changes to the traffic safety grant programs such as those included in NHTSA's 2003 reauthorization proposal would require improved state safety data to enhance states' ability to identify traffic safety issues, as well as a robust oversight approach to ensure that states are using federal funds appropriately. As noted earlier in this statement, NHTSA has improved the consistency of its oversight since 2003 and has implemented requirements established in SAFETEA-LU regarding the frequency of its management reviews of states.

Mr. Chairman, this concludes my prepared statement. I would be pleased to respond to any questions that you or other Members of the Committee might have.

For further information on this statement, please contact Katherine Siggerud at (202) 512-2834 or siggerudk@gao.gov. Contact points for our Congressional Relations and Public Affairs offices may be found on the last page of this statement. Individuals making key contributions to this testimony were Sara Vermillion, Assistant Director; Michael Armes; Catherine Colwell; Caitlin Croake; Colin Fallon; Lynn Filla-Clark; Joah Iannotta; Tom James; Bert Japikse; Leslie Locke; and Terry Richardson.

Appendix I: Objectives, Scope, and Methodology

We were asked to participate in this hearing to discuss the National Highway Traffic Safety Administration's (NHTSA) programs and oversight. Our statement addresses (1) NHTSA's progress in administering and overseeing the traffic safety grant and high-visibility enforcement (HVE) programs, (2) the programs' effectiveness in addressing traffic safety issues, and (3) implications for reauthorization of the programs in 2009. In addition, this statement provides information on a traffic safety area that we expect to become a more serious issue in the future—older driver safety. Our statement is based on three recently issued reports on (1) NHTSA's Safety Incentive Grants, (2) the HVE campaign programs, and (3) NHTSA's oversight of state traffic safety programs and the approaches currently available to improve safety outcomes.¹ In addition, we touch on issues raised in last year's report on older driver safety.²

NHTSA Safety Incentive Grants

In the NHTSA Safety Incentive Grants report, we addressed (1) NHTSA's status in awarding and overseeing states' use of these grant programs, (2) the activities states have conducted using the grants and issues they have faced in applying for and implementing them, and (3) how NHTSA plans to evaluate the results of the grant programs and implications for reauthorizing funding for these programs. To address these objectives, we reviewed documents and interviewed officials from NHTSA, the Federal Highway Administration (FHWA), and representatives from professional groups, including the American Association of State Highway and Transportation Officials, Governors Highway Safety Association (GHSA), National Safety Council, and Advocates for Auto and Highway Safety. We interviewed state highway safety officials and reviewed documents from 7 selected states—California, Illinois, Missouri, Montana, New Jersey, South Carolina, and Vermont (see Table 2). We selected the states based on a combination of characteristics, including fatality rates, funding, and geographic distribution. Since we used a nongeneralizable sampling approach, our findings cannot be used to make inferences about

¹GAO, *Traffic Safety: Grants Generally Address Key Safety Issues, Despite State Eligibility and Management Difficulties*, GAO-08-398 (Washington, D.C.: Mar. 14, 2008); *Traffic Safety: Improved Reporting and Performance Measures Would Enhance Evaluation of High-Visibility Campaigns*, GAO-08-477 (Washington, D.C.: Apr. 25, 2008); and *Traffic Safety: NHTSA's Improved Oversight Could Identify Opportunities to Strengthen Management and Safety in Some States*, GAO-08-788 (Washington, D.C.: July 14, 2008).

²GAO, *Older Driver Safety: Knowledge Sharing Should Help States Prepare for Increase in Older Driver Population*, GAO-07-413 (Washington, D.C.: Apr. 11, 2007).

Appendix I: Objectives, Scope, and Methodology

all states that received NHTSA Safety Incentive Grants. We also reviewed states' 2007 highway safety plans and 2006 annual reports for all 50 states to identify activities states are funding with these grants. In addition, we reviewed the U.S. Department of Transportation's (DOT) and NHTSA's performance measures and other related documents, including NHTSA's 2003 reauthorization proposal. We conducted this performance audit from March 2007 through March 2008 in accordance with generally accepted government auditing standards.

Table 2: Site Visit Locations for GAO Traffic Safety Reports

NHTSA Safety Incentive Grants	HVE Campaign Program	NHTSA Oversight	Older Driver Safety
California	Arkansas	Arizona	California
Illinois	Illinois	Idaho	Florida
Missouri	Iowa	Maine	Iowa
Montana	North Carolina	Minnesota	Maryland
New Jersey	North Dakota	Nevada	Michigan
South Carolina	Rhode Island	Texas	Oregon
Vermont	Washington	West Virginia	
		Wisconsin	

Source: GAO.

HVE Campaign Program

In the HVE campaign program report, we addressed (1) the extent to which NHTSA has implemented the HVE program and (2) for selected states, the impact of the HVE campaigns and challenges that exist in conducting the campaigns. To address these objectives, we analyzed information and interviewed officials from NHTSA headquarters and regions; FHWA; and state traffic safety offices, state police, local police, and police advocacy organizations in seven states—Arkansas, Illinois, Iowa, North Carolina, North Dakota, Rhode Island, and Washington (see Table 2). We judgmentally selected the states by including: states that have enacted various laws that may affect how states conduct enforcement campaigns; states with a wide range of traffic safety performance levels, such as extent of safety belt use and number of alcohol-involved fatalities in each state; states with differences in average size of law enforcement agencies; states that exhibited various degrees of participation by state and local law enforcement agencies in campaigns; and states that were geographically dispersed. Since we used a nongeneralizable sampling approach, our findings cannot be used to make inferences about all states that implemented the HVE program. We also interviewed representatives

of nongovernmental organizations; reviewed relevant studies, reports, and laws; and analyzed safety belt use and alcohol-involved fatality data for selected states.³ We conducted this performance audit from March 2007 through April 2008 in accordance with generally accepted government auditing standards.

NHTSA Oversight

In the NHTSA oversight report, we addressed (1) how states have used Section 402 funding to achieve national safety goals, (2) the progress NHTSA has made toward addressing consistency in the management review process, (3) how useful NHTSA's management reviews and recommendations are in improving management of state safety programs, and (4) the approaches currently available to improve safety outcomes. To address these objectives, we reviewed legislation, guidance, and procedures relevant to NHTSA's oversight of state highway safety grants, including NHTSA's management review process. We interviewed NHTSA headquarters and regional officials and representatives from the Governors Highway Safety Administration (GHSA). We also conducted site visits in eight states—Arizona, Idaho, Maine, Minnesota, Nevada, Texas, West Virginia, and Wisconsin—to gather state officials' views of NHTSA's oversight, including the management review process, and to discuss how states use Section 402 grants (see table 2). In addition, we analyzed data NHTSA provided on how states spent highway safety grants from fiscal years 1999 through 2007, conducted a content analysis of the recommendations in all management reviews developed in fiscal years 2005 through 2007, and summarized information from NHTSA's corrective action plans. We also analyzed data provided by NHTSA on the total number of alcohol-related fatalities and fatality rates as well as the total number of unbelted fatalities and fatality rates from 1998 through 2006. We conducted this performance audit from July 2007 to July 2008 in accordance with generally accepted government auditing standards.

Older Driver Safety

Finally, in the older driver safety report, we addressed (1) what the federal government has done to promote practices to make roads safer for older drivers and the extent to which states have implemented those practices, (2) the extent to which states assess the fitness of older drivers and what

³ We used data contained in NHTSA's Fatality Analysis Reporting System database and vehicle miles traveled data maintained by FHWA in its Highway Performance Monitoring System database.

Appendix I: Objectives, Scope, and Methodology

support the federal government has provided, and (3) what initiatives selected states have implemented to improve the safety of older drivers. To address these objectives, we reviewed documents and interviewed officials from NHTSA, FHWA, the National Institute on Aging and the Administration on Aging within the U.S. Department of Health and Human Services, and the American Association of Motor Vehicle Administration. To obtain information on the extent to which states are implementing practices to make roads safer for older drivers, we surveyed and received responses from DOTs in each of the 50 states and the District of Columbia. We also conducted case studies in six states—California, Florida, Iowa, Maryland, Michigan, and Oregon—that transportation experts identified as progressive in their efforts to improve older driver safety. We conducted our work from April 2006 through April 2007 in accordance with generally accepted government auditing standards.

Appendix II: Criteria for States to Qualify for Selected Incentive Grant Programs

Alcohol Impaired Driving Countermeasures Grant. The eight criteria are: (1) implement a high-visibility enforcement campaign program using checkpoints or saturation patrols, along with paid and earned media; (2) implement an education program for judges and prosecutors on prosecuting and adjudicating offenders; (3) implement a program to increase blood alcohol content (BAC) testing rate for drivers in fatal crashes; (4) enact legislation imposing stronger sanctions or additional penalties for high-risk drivers with a BAC of at least 0.15; (5) implement a rehabilitation program for repeat or high-risk offenders or refer them to a state-sanctioned driving while intoxicated (DWI) court; (6) develop a strategy to prevent underage drivers from obtaining alcoholic beverages and anyone from making alcoholic beverages available to persons under 21; (7) implement a program to suspend or revoke licenses for drivers apprehended while driving under the influence; or (8) implement a "self-sustaining impaired driving prevention program" in which a significant portion of DWI fines or surcharges collected are returned to communities to reduce alcohol-impaired driving.

Motorcyclist Safety Grant. The six criteria are: (1) implement a statewide motorcycle rider training program; (2) implement a program promoting motorcyclist awareness; (3) reduce fatalities and crashes involving motorcycles in the prior year; (4) implement a statewide impaired-driving program that includes measures targeting impaired motorcycle operation; (5) reduce fatalities and crashes involving impaired motorcyclists in the prior year; and (6) use all fees collected from motorcyclists for motorcycle programs.

State Traffic Safety Information Systems Improvement Grant. The three criteria for the first year are to (1) establish a multidisciplinary highway safety data and traffic records coordinating committee; (2) develop an approved multiyear safety data and traffic records strategic plan with performance-based measures; and (3) certify that the state has adopted and is using model data elements in the Model Minimum Uniform Crash Criteria and National Emergency Medical Service Information System, or certify that it will use funds to adopt and use the most elements practicable.

The five criteria for the second and subsequent years are to (1) certify that an assessment or audit of the state traffic records system has been conducted or updated in the last 5 years; (2) certify that the coordinating committee still operates and supports the plan; (3) specify how grant and other state funds will support the plan; (4) demonstrate measurable

**Appendix II: Criteria for States to Qualify for
Selected Incentive Grant Programs**

progress toward achieving goals and objectives in the plan; and (5) submit a report showing measurable progress in implementing the plan.

Appendix III: Older Driver Safety

In GAO's 2007 report on older driver safety,¹ we found the following:

- FHWA has recommended practices—such as using larger letters on signs—targeted to making roadways easier for older drivers to navigate. FHWA also provides funding that states may use for projects that address older driver safety. States have, to varying degrees, adopted FHWA's recommended practices. For example, 24 states reported including about half or more of FHWA's practices in state design guides, while the majority of states reported implementing certain FHWA practices in roadway construction, operations, and maintenance activities. States generally do not place high priority on projects that specifically address older driver safety but try to include practices that benefit older drivers in all projects.
- More than half of the states have implemented licensing requirements for older drivers that are more stringent than requirements for younger drivers, but states' assessment practices are not comprehensive. For example, these practices primarily involve more frequent or in-person renewals and mandatory vision screening but do not generally include assessments of physical and cognitive functions. While requirements for in-person license renewals generally appear to correspond with lower crash rates for drivers age 85 and older, the validity of other assessment tools is less clear. NHTSA is sponsoring research and other initiatives to develop and assist states in implementing more comprehensive driver fitness assessment practices.
- Five of the six states GAO visited have implemented coordination groups to assemble a broad range of stakeholders to develop strategies and foster efforts to improve older driver safety in areas of strategic planning, education and awareness, licensing and driver fitness assessment, roadway engineering, and data analysis. However, knowledge sharing among states on older driver safety initiatives is limited, and officials said states could benefit from knowledge of other states' initiatives.

We recommended that the Secretary direct FHWA and NHTSA Administrators to implement a mechanism to allow states to share information on older driver safety practices.

In response to our recommendations, FHWA indicated that it is working with NHTSA and others in DOT to identify the types of references and

¹GAO, *Older Driver Safety: Knowledge Sharing Should Help States Prepare for Increase in Older Driver Population*, GAO-07-413 (Washington, D.C.: Apr. 11, 2007).

links to other organizations' information to include on its Web site. This information includes articles on older road users, technical reference materials, and research results. FHWA expects to have its Web site updated by June 2008.

NHTSA responded that it has also taken steps to allow states to share information on leading practices for enhancing older drivers' safety. First, NHTSA established a clearinghouse for sharing technical information about older road user programs. The clearinghouse was created through an interagency agreement with the Federal Transit Administration and the National Center for Senior Transportation, a clearinghouse for information on transportation for seniors, such as programs and strategies that have been successful in other states. Second, NHTSA's regional offices have worked with state highway safety offices to develop older road user programs, including exchanging information on other states' best practices. The regions are also promoting use of NHTSA's Older Driver Law Enforcement Course, and advising states of progress with demonstration projects. These include a project in Missouri to help establish older driver coalitions, and others in New Jersey and Virginia to enhance driver licensing referral programs.

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