Graduated driver licensing not only helps the novice driver better cope with risks, but also enhances the motivation to drive safely and "play by the rules." Restrictions are lifted as rewards for good driving, and sanctions are imposed for violations. For young drivers, the worst sanction may be the delay that keeps them in an earlier stage longer, while their peers advance to the next level. By making relief from restrictions contingent upon a good driving record, graduated driver licensing provides incentive to drive safely.

How the Community Can Promote Graduated Driver Licensing

Everyone has a role to play in promoting graduated driver licensing and helping it succeed. Here are just a few examples:

Parents-

Parents or guardians are essential. While no system should put all the burden on parents, a graduated driver licensing system emphasizes parental supervision (e.g., providing driving practice, determining when and where driving is done, etc.) and parental certification that practice hours have been completed as required. Graduated driver licensing encourages parents to actively take part in preparing their teenagers for driving. It provides an opportunity for parents to serve as positive role models for their children.

Traffic Safety Education Field -

Driver education works better with a graduated driver licensing system, which provides an incentive for formal instruction. The current high school driver education system can be adapted to fit well within a graduated driver licensing system. This would require the course to be divided into two or three discrete phases, with practice sessions and testing at the end of each segment.

Modern communications tools such as home video and interactive computer learning materials can supplant or augment classroom training prior to behind-the-wheel practice. Training programs and materials should not focus on how to pass the test but rather how to incorporate the appropriate skills, attitude and behavior to be

a safe, successful driver. Such a program should also include information on other aspects of transportation safety, such as pedestrian safety, bicycle safety, the need for occupant protection, and the importance of motorcycle helmets. Programs should also cover transportation issues such as alternate transport, trip planning and vehicle preparation and actions to take in an emergency. And, where there is a choice, teens should be encouraged to drive safer vehicles.

Medical Community-

The medical community sees firsthand the results of motor vehicle crashes. Most physicians, nurses, emergency medical service professionals and others will tell you that the hardest part of their job is telling a family about the loss of a child or other family member. Although implementation of a graduated driver licensing process does not directly involve the medical community, these individuals (as well as their state and national professional organizations) are likely to be strong allies and partners in the process.

Law Enforcement -

Driving is a skill that improves with time and maturity.

Nearly every national law enforcement group has endorsed graduated driver licensing because police officers-like the medical community-are the ones who see the results of poor driving every day. Law enforcement has an active role to play in the implementation of a new system, and keeping traffic officers informed about changes in laws is a vital step. Law enforcement officers are also highly effective speakers at high school assemblies, Scout meetings, and other youth gr. up gathei

Questions and Answers On Graduated Driver Licensing

Does graduated licensing discriminate against teenagers?

No. On the contrary, graduated driver licensing protects teenagers by introducing beginning drivers to the driving process under controlled circumstances in a low-risk manner. Just as teens are not allowed to conduct certain work, legal or financial transactions without direct parental involvement, they should not be allowed to drive until they have learned how to do it safely.

How can teens get around to school, jobs and extracurricular activities?

There is no question that, for safety's sake, graduated driver licensing limits mobility for younger teens. This is true especially at night (the most dangerous time), but most states allow exceptions in the case of driving to school or work or for farm-related activities.

Delaying full licensure does not significantly hinder extracurricular and social activities, however. A survey by the Insurance Institute for Highway Safety of more than 50,000 high school students in seven states found that the social life and work patterns of

16-year-olds were generally unaffected by the beginning driving age in their state.

Is driver education the best way to learn to drive?

A good program that combines both classroom learning and behind-the-wheel training is an effective way to learn basic driving skills. But most driver education programs do not allow for significant hours of practice driving, and that is what new drivers need. Driving is a skill that improves with time and maturity. A 1994 Report to Congress by the National Highway Traffic Safety Administration concluded that "current novice driver education is not doing a very good job in motivating youngsters to drive safely." A graduated driver licensing system rewards good driving by allowing the safe novice driver to move ahead to the next step.

Aren't parents anxious for their teens to drive so they don't have to be the "chauffeur"?

Parents face a real dilemma when it comes to teen driving. On the one hand, most are quite anxious to give up the "chauffeur" duties and let their teens handle their own transportation. On the other hand, they are fearful of the increased risks this brings. Parents strongly support

graduated driver licensing, despite some minor inconveniences to themselves. More importantly, graduated driver licensing gets parents more involved by asking them to ensure their children get enough supervised driving practice. The longer period of supervised driving gives parents and teens plenty of opportunity not only to practice but also to discuss driving skills, attitudes and behaviors. Parents also may feel more secure once their teens are fully licensed because they have more experience and maturity to handle difficult situations on the road.

CAPITAL CHEVROLET
ROB SKINNER

5245 GLACIER HWY
JUNEAU, AK 99801

April 28, 2003

Rep. Bruce Weyhrauch

Dear Rep. Weyhrauch:

I'm pleased to add my support to HB 213, "Provisional Driver's License for Teen Drivers". Being the father of six up and coming drivers and as the "Managing Partner" for Capital Chevrolet I feel the up side to this bill clearly out weigh the small inconveniences that would result from it.

While growing up in a small town in Oregon several of my classmates were in serious car accidents, resulting in two fatalities, two friends who are permanently paralyzed and several other injuries of varying degrees. Most likely had a bill like this been in place my friends would be alive today and those paralyzed would not be so.

In my business we see every day the young drivers and their behaviors. We experience losses from minor accidents as a course of business but almost never from an older more mature employee. It is almost without exception that young drivers feel a need to push the envelope when the rush of power and freedom is afforded them associated with driving. I myself experienced it and so has every one who has been behind the wheel of a car. My sales persons are continually reminding our younger potential car owners to watch the traffic laws while on test drives.

While I'm a huge fan of our youth and understand that HB 213 will disappoint a few, the facts are clear, accidents will decrease and lives will be saved. Nothing is more important to a father than that.

Sincerely,

Rob Skinner
Owner, Capital Chevrolet

JUNEAU SCHOOL DISTRICT
CITY AND BOROUGH OF JUNEAU
OFFICE OF THE SUPERINTENDENT

10014 CRAZY HORSE DRIVE • JUNEAU, ALASKA 99801-8529 • (907) 463-1700 • FACSIMILE (907) 463-1712

APR 2 9 2003

April 25, 2003

The Honorable Bruce Weyhrauch
Alaska State Legislature
State Capitol
Juneau, AK 99801

Dear Representative Weyhrauch:

Thank you for your sponsorship of House Bill 213 to establish a graduated driver's license program for Alaska. As I mentioned on Tuesday, the Juneau School Board unanimously supports this concept. I've written the members of the House Transportation Committee and hope they are responsive.

I'm glad to see that there are positive developments for Alyeska Correspondence School. Thank you for your continued support for education and for the Juneau Community in this matter.

Sincerely,

Peggy Cowan
Superintendent

CITY/BOROUGH OF JUNEAU
ALASKA'S CAPITAL CITY

OFFICE OF THE MAYOR
Telephone: (907) 586-5240; Facsimile: (907) 586-5385
Sally_Smith@ci.juneau.ak.us

April 23, 2003

The Honorable Bruce Weyhrauch
Alaska State Representative
State Capitol, Room 102
Juneau, Alaska 99801

Dear Representative Weyhrauch:

Juneau's assembly members have read an analysis of your House Bill 213, which would institute a graduated driver's license program. According to statistics provided by the Juneau Chapter of Mothers Against Drunk Driving (MADD), 3,889 of Alaska's youth between the ages of 16 and 20 were involved in traffic accidents during 2000. This is not acceptable, and begs the need for change.

We care about our youth and recognize that our current system of preparing them to drive is not working. House Bill 213 provides an opportunity to responsibly prepare our young Alaskan's for a lifetime of safe driving. You have the support of the City and Borough of Juneau on this important legislation. It can make the roads safer for all.

Sincerely,

Sally Smith

Sally Smith
Mayor

cc: Cindy Cashen, MADD
The Honorable Kim Elton
The Honorable Beth Kerttula
CBJ Assembly
Clark Gruening
Jerry Mackie

Subject: Graduated licensing
Date: Tue, 20 Jan 2004 19:28:04 -0900
From: "Amy Menerey, Frontiersman" <editor@alaska.net>
To: linda_sylvester@legis.state.ak.us

Dear Rep. Bruce Weyhrauch,
I am writing because I recently heard that you are sponsoring a bill regarding graduated licensing in Alaska. My name is Amy Menerey and I am a reporter at the Frontiersman newspaper in Wasilla. My daughter Julie died at the age of 16 two years ago as the result of a car crash - she was driving. It was not late, there was no alcohol or drugs involved and there was only one passenger in her car; however she was driving too fast and being careless and it cost her her life. I have since spoke to numerous students about driving safe and about what happened to my daughter. After doing research I also wrote a story about what happened with Julie. I have included it and the sidebars in this e-mail, but it is much more effective on paper. I have also created buttons that I hand out to teenagers in the name of "Teens Drive Safe," promoting safe driving. I would love to be involved in any way in giving testimony, copies of the article, etc. to promote this bill.
My only objection to the proposal as it is written is that 16-year-olds have no passengers at all; I believe limiting the passengers to either 1 or 2, as other states have done, is sufficient, especially since so many teens have responsibilities that include driving younger siblings to destinations that are a condition of their privileges. I would be happy to discuss any of this further. You can call me at 352-2267 (the Frontiersman), or at home 376-7752.
Thank you for your time.
Amy Menerey

(I apologize for the length of this e-mail)

Published in the Frontiersman newspaper Nov. 24, 2002.

Getting behind the wheel By Amy Menerey Frontiersman reporter
It was shortly after 7:30 p.m. on a cold, icy Friday night when the phone rang. My daughter, Julie, and her friends, Sally, James and Cody, had left the house about 15 minutes earlier. On the phone, James was hysterical, barely comprehensible. The only words that were clear caused my pulse to race, my thoughts to run in a thousand circles and my heart to ache to the core of my inner being ‹ Julie had been in an accident.

Nearly every teen-ager looks forward to that day when they can break from the constraints of mom and dad and finally 'be free.' With their 16th birthday comes the ability to drive in Alaska ‹ which means no longer riding the school bus, the ability to get to and from work on their own, greater responsibility and more freedom to be with their friends. It is a great leap toward adulthood. For parents, it also means greater freedom. Their licensed teen can get where they need to be without a chauffeur, run to the store for necessities or drive younger siblings to their activities.
'When you get your license it's a coming of age,' said 19-year-old Melissa Davis. 'It's a lot of responsibility, but also the freedom to use that responsibility maturely.' Before the big day arrives, plans have to be made. What car will the teen-ager drive? What rules will accompany that privilege? And then, of course, there's the insurance. Why, many people end up asking, does insurance for teen-agers cost so much? The answer to that is repeated again and again in report after report from private and governmental agencies ‹ teen-agers get into more accidents than any other age group in the United States. The risk for motor-vehicle crashes nationwide is higher among 16- to

19-year-olds than among any other age group. Per mile driven teen drivers between the ages of 16 and 19 are four times more likely than older drivers to crash, according to the National Highway Traffic Safety Administration. Teen-agers represented just 10 percent of the U.S. population in 2000, but accounted for 14 percent of all motor vehicle-related deaths. Forty-one percent of those teen motor-vehicle deaths occurred between 9 p.m. and 6 a.m. Moving a 3- to 4-thousand-pound piece of machinery at speeds of up to 65 mph is not something to be taken lightly. Experienced drivers often take automobiles for granted and forget that learning to drive is a difficult skill. Young drivers start out with very little knowledge or understanding of the complexities of driving a motor vehicle. Learning how a car handles and how people react takes a lot of time. To be a safe driver, teens must have technical ability, good judgment and experience, according to highway safety organizations.

The day before Julie's accident, Dec. 13, she drove me to work. I cautioned my 16-year-old about watching out for others, about taking time to slow down now that the roads were getting worse. "Quit worrying mom," she said in a tone that echoed her displeasure at hearing my consternation again and again. "I'm a good driver," she said confidently.

Here in Alaska, there were 14,127 traffic accidents during 2000. Ninety-three resulted in fatal injuries to occupants; nonfatal injuries were reported in 4,181 of all accidents; and 9,789 accidents caused only property damage. Traffic accidents injured or killed 6,226 people in Alaska during 2000, and caused $52.3 million in damages to vehicles, plus $2.1 million in damages to highway structures and other non-vehicular property, according to the Alaska Department of Transportation's 2000 Alaska Traffic Accidents report. Of these, the percentage of crashes involving either injuries or fatalities continued to increase over the past three years in three of the eight largest boroughs during 2000 - Kodiak, Kenai Peninsula and the Mat-Su Borough. When asked, many teens say they know people who have been involved in accidents. But when asked whether that involvement changed their driving behavior, the answers were mixed. One teen said his mother and father had been in an accident but claimed it changed his behavior little. 'Not really because I don't drive like them,' 18-year-old Phillip Talley said.

Dec. 16: I'm holding her pink and shapely manicured hands that she was so proud of before she got into her car and left that night. "Don't they look fake," she had said. As she lays unmoving in Alaska Regional Hospital's Intensive Care Unit I wonder, is she scared? Does she have any conscious thought? I am aware she might die. I knew that Friday night. But she made it through the night - the first 24 hours are crucial they told me. Then they told me the first 48 hours are crucial. So we passed 24 - halfway there, I thought. At 36 hours I thought maybe, just maybe, I wouldn't have to think about my only daughter dying anymore. The nurse at Valley Hospital Friday night told me, "This is the beginning of a very long night for you, for you and your daughter, and its going to be a difficult one, so brace yourself, it won't be easy. But just be with her, let her know you're there - and pray.' It seems like another lifetime ago when my daughter was just another teen-age kid going out with her friends, bugging me for 10 bucks and looking absolutely perfect in her size 7 jeans. I haven't stopped praying since.

NHTSA's Web site on teen driving warns that 'adolescent impulsiveness is a natural behavior, but results in poor driving judgment and participation in high-risk behaviors like speeding, inattention, drinking and driving and not using a seat belt. Peer pressure also often encourages risk taking. Teens often drive at night with other teens in the car, increasing risk.' In Alaska, those same high-risk behaviors, unsafe speed, driver inattention and failure to yield - in that order - were the most frequently cited contributing factors for all crashes during 2000. Among all accidents in Alaska - as reported nationwide - more accidents involve teen-agers than any other age group. Teen-agers between 16 and 20 years old were involved in more than 6,000 car accidents in our state alone in 2000. The numbers drop significantly in other age groups, however. Statistics show that the 21- to 25-year-olds make up the age group with the next-highest rate of accidents

in Alaska. Reports indicate that, while speed and inattention are the major causes of accidents among younger drivers, drunken driving is the next-highest factor and as drivers become of legal drinking age, alcohol becomes a major factor in crashes. Captain Dennis Casanovas, head of the Palmer post of the Alaska State Troopers, agreed that he sees more new drivers in accidents than any other group. ³My general sense is that high up there would be driver inexperience [as the reason]; as we would expect, brand-new drivers do make more mistakes than experienced drivers,² Casanovas said. ³It can be first-winter drivers or perhaps those not driving the same car every day, who swap vehicles with their parents and [the vehicle doesn¹t] necessarily handle the same, brake the same or have the same pick-up when passing. It¹s true teens take more risks and are often out in lower-light driving [conditions]. It always seems more tragic when you read about those [teen-related crashes].² Friday night is the most common night for crashes in Alaska, and, the statistics show, more crashes occur on weekdays than on weekends here. Looking at road conditions, the number of accidents that occur when roads are dry, compared to roads that are packed with snow and ice, are relatively close ‹ 5,602 accidents on dry roads compared to 5,933 on snow and ice, but there were more accidents with major injuries and fatalities on dry roads than roads with snow or ice. The numbers may correlate with an increase in driving time, higher speeds caused by lower levels of driver caution and longer hours of daylight, according to the ATA report.

It wasn¹t until after Julie had been taken to Alaska Regional and a hole had been drilled into her skull to measure the pressure from her massive brain injury that I learned what had happened after she and her friends left my house that night. The two boys, driving in another vehicle, and later Sally, Julie¹s passenger, told a similar story. They had stopped side-by-side at a stoplight heading into Wasilla. When the light turned green they both took off. Cody, driving a large truck, took off ahead of Julie. My daughter, not wanting to be outdone, said, Œ I¹m not gonna let them beat me,¹ and pressed the accelerator of her 1994 Chevy Beretta. Apparently they were nearly side-by-side when they approached a right curve in the road ‹ Cody slowed down coming into the turn. For Julie, it was too late. The car¹s rear end slid to the left on the icy road and she overcorrected, putting the car into a spin and crossing the lane ‹ right in front of an oncoming car. ŒOh shit, we¹re sliding,¹ Sally heard Julie say before looking up herself and responding, ŒWhoa, we are.¹

In 2000, Wasilla ranked fourth among Alaska¹s major cities in its motor-vehicle accident rate with 298 accidents, 11 with major injuries and one fatality. According to the ATA report, a high percentage of those accidents occurred along the Parks Highway, which runs through Wasilla. There were 83 crashes reported in Palmer, with no fatalities or major injury. Anchorage had the highest number with 8,286 crashes, 103 major injuries and 29 fatalities. Of all the accidents in Alaska in 2000, most of them, 5,597, were motor-vehicle angle crashes or T-bone accidents, as they are more commonly referred. The next most common type of accident in Alaska is the rear-end collision, with 3,790 in 2000. Compared to the 660 reports of crashes involving moose during the year or the 685 reports of vehicles in a ditch can give cause for reflection. Though only one in four crashes nationwide is a side or T-bone collision, this type of accident is responsible for one out of every three highway deaths. According to the National Highway Traffic Safety Administration, almost 10,000 occupant deaths occur each year in side-impact crashes and more than half of these involve head injuries. Head injuries are the cause of death in 51 to 74 percent of single-vehicle side impacts and 41 to 64 percent of multiple-vehicle side impacts.

Dec. 19: ŒThe numbers are up a little,¹ the nurses say, or Œthe numbers are looking good.¹ It¹s no longer, ŒJulie¹s looking good, or bad,¹ our focus is on the numbers displayed on the large screen above her hospital bed that monitors the pressure on her brain. It¹s as if she¹s no longer there ‹ and, I guess she isn¹t, really. I don¹t mean her life is gone, but she¹s staying

in a controlled state, hanging in the balance between here and there by the manipulation of buttons. Tubes, machines, bells and beeps, suction in, suction out ‹ this is my daughter's life right now ‹ and mine. I fall asleep, my head on a pillow at her thigh, her hand in mine, to the sound of the humming, rhythmic machinery. I doze, still hoping that this is all some weird other-worldly dream, but it's not.

When a car crashes, there are three collisions, or impacts, that take place. The first one is the impact of the vehicle itself against something ‹ a wall, another vehicle, or a light pole, for example. This causes a rapid deceleration. The second collision is the impact of the person inside the vehicle against objects in the car ‹ the windshield, steering wheel, seat belt, or another person. The third collision is within the person. This is when organs slam against bones or other organs. When a small object and a large object collide, the larger usually wins. This applies to two vehicles colliding or the person within the larger object, namely the car itself. It is for this reason that safety standards applied by car manufacturers now include airbags, cars that 'give' more and also why the industry is gearing toward vehicles that are lighter and about the same weight as other vehicles on the road. Heavier cars subject their own occupants to more force at a given velocity than do smaller automobiles when they hit a fixed object, and in multi-car collisions, they strike the other vehicles with more force. A 2,000-pound car needs to achieve a speed of 46 miles per hour to generate as much force at impact as a 3,500-pound automobile traveling 35 miles per hour, according to an article entitled 'Automobile Weight and Safety,' at www.panix.com. A common tendency when a child reaches driving age is to either buy them an older, 'beater' car or to give them mom or dad's older vehicle. While many of these older cars may be heavier and seem safer, experts in the automobile safety industry warn that, because teens are more likely to get into an accident, they need newer cars with more safety features such as airbags, side air bags and construction made to crumple.

Dec. 20: My time is spent between sitting at Julie's side and updating everyone on her condition. The many friends and family that came to see her were astounded by her visible appearance. ŒShe just looks like she's sleeping,' they told me, astonished that, save for a wrapped arm and one small scratch on the side of her head there is no visible injury to my daughter. Yet the outcome is unknown. The swelling in her brain has not subsided as we had hoped and other complications have emerged. But with her eyes closed and the remains of her favorite purple eye shadow still visible, her brown hair flowing across the white hospital pillow and her painted hands resting at her side, were it not for all the tubes and IVs, she would look at peace.

Experts agree that new drivers need continued supervision after they get their license. Area law enforcement officials suggest limiting the hours young or inexperienced drivers are out driving and prohibiting the use of tobacco, alcohol or other drugs while driving. Although parents would like to believe their teen-ager will make good choices, it is important to make a 'free call' agreement for a ride home in case they abuse drugs or alcohol, or are with a driver who is doing so. A driver education program is recommended for young drivers and parents are encouraged to set a good example. The use of seat belts is not only recommended, but the law in Alaska. Still, Casanovas said, there are a lot of people who aren't using them. 'We still see roughly a quarter of the population in Mat-Su that fail to wear their seat belts,' he said, adding that safe driving also means keeping the car in working order, such as keeping headlights and windshield clear for optimal visibility. Parents, officials say, should take advantage of the two-year window between license eligibility and legal adulthood ‹ obtaining a license doesn't mean the training period has ended. Currently Alaska law requires that anyone under the age of 18 who is seeking a license must first hold an instruction permit for at least 6 months. This permit, or provisional license, can be obtained any time after the age of 14 and requires the driver to have an adult present in the car with them. The adult must have been licensed for one year and must be 21 or older. A teen who

acquires traffic citations totaling six or more points in a 12-month period, or nine or more points in a 24-month period must also take a nationally certified defensive driving course to retain their driving privileges. Many states are also instituting graduated licensing ‹ a system that allows beginning drivers to obtain a license with lower risks involved. (See ³THIS,² Page THIS) When signing for their child¹s driver¹s license, the parent and child are informed that parents have the right to suspend that license at any time if they choose. What many parents don¹t know, though, is that they also have the right to see their teen¹s driving record. In 1999, legislation was passed that enables parents to receive a copy of their minor child¹s driving record. According to that law, if a parent, foster parent or guardian requests it, the division of motor vehicles must release information about their under-18 teen driver, as long as the teen has not been emancipated. The law requires an ³abstract² be released, free of charge, which includes a listing of accidents, convictions of vehicle, driver and traffic offenses and ³any actions taken upon the driver¹s license, and information relating to financial responsibility.² At A1 Driving in Wasilla, Jim Moody teaches the National Safety Council¹s ³Alive at 25² defensive driving course. The program is exclusively for young drivers from 16 to 25. While Moody doesn¹t offer any behind-the-wheel instruction, he feels the Alive course is very beneficial to young drivers. The four-hour course focuses on common errors teens make while driving and how to avoid them. Some local insurance companies offer discounts for teens who have taken the course, Moody said. Parents should check for available discounts with their insurance agent. Although the class is available to any 16- to 25-year-old, Moody said 90 percent of the teen-agers he sees in the class come because ³the law sent them here.² No one else in the Valley is teaching the course, he said, and it is required for teens who have exceeded the number of points allowable. The biggest mistake teens make when driving? ³Speeding,² Moody said. Cost of the course is $40 plus tax, and it is offered twice a month. Call 357-2216 for more information. Area schools may offer driver education courses as well, such as the course offered by Colony High School that incorporates driver¹s education with first aid training throughout one semester. In that course, 10 to 13 hours of training is done before ever setting foot in a vehicle, through the use of a high-tech simulator that incorporates different driving courses and helps new drivers develop good driving habits before getting behind the real wheel. There can be as much as a 5 to 20 percent discount on insurance for completion of the course, according to Mike Boyd of CHS The driving portion of the program ‹ and use of the simulator ‹ is also available through the community schools program as a three-week course. Call 376-0831 for more information. Students enrolled in Job Corps in Palmer can take advantage of the Alive at 25 defensive driving course, as well as preparation for written and driving tests. Will Owens instructs teens and young adults at the center and assists them through the process of licensing, right up to the driving test at DMV.

Dec. 24: The doctor has now told us that Julie¹s injuries were massive and that he is afraid we may have been given false hope. He tells us her brain injury was a shearing type, the worst kind, and the outcome would probably not be good ‹ he dashes away any hope we had. ŒWait and see,¹ the phrase we have heard for the last 10 days, has turned to Œshe will not survive this.¹ We had been told that the swelling of Julie¹s brain would eventually subside and then we could begin to address other complications that had resulted from her comatose state. Even if she should live, I am told, it will probably only be with the aid of machines. The room spins and the floor disappears below my feet ‹ I feel like that first night is being played all over again. I cannot be with people at this time. I get in my car and drive aimlessly through Anchorage streets, stopping in a movie theater parking lot and sobbing until my nose runs red with blood. I scream, I curse ‹ I ask God why and ask for direction, for courage, for the strength to survive watching my daughter die.

Short of following teen-agers and spying on them, several new devices that enable parents to find out how their teen-ager is driving are now on the market. Taking its cue from the trucking industry, the Am I Safe? Program is advertised as a youth safety awareness system. The system ‹ for a monthly

fee of $39 per family ‹ works much the same as the 'How am I driving?' sticker seen on the back of commercial vehicles. Parents receive a kit containing safety information, a parent-teen safe driving partnership agreement and a decal to affix to the teen-ager's car. The decal contains a toll-free number for other drivers to call with reports on the teen's driving. The parent receives immediate notification of reported driving behavior ‹ good or bad ‹ a quarterly summary of the teen's driving habits and a quarterly newsletter with safety tips, updates and news articles. The company claims an accident reduction rate of 40 to 50 percent. A registration form is available online at www.amisafe.net. Although controversial, the 'black box' is making its way into the automobile industry. These boxes work much like those in airplanes and have been used in race cars, armored cars, police cars and transit vehicles. Although many drivers aren't aware, event data recorders are already in many cars ‹ all GM cars since 1999 and in many other makes and models since 1996 have them ‹ and controversy has risen over the information obtained from the recorders and who should have access to it. Insurance companies claim the information will end disputes about what happened in a car crash, such as a vehicle's speed before impact, engine speed, brake status and airbag status. A similar monitor device is now being advertised for parents who want to track their teen's driving habits. The Auto Watch black box comes with a computer program that gives guardians information about how long a vehicle has been driven, at what speeds and distances the vehicle has traveled, among other things. The box is password protected and the program notifies the parent if it has been tampered with. The Auto Watch comes at the hefty price of $295, but if used in conjunction with guidelines and consequences, parents may consider this information about their teen's activities worth the cost. More information on Auto Watch is available at www.drivehomesafe.com/autowatch. Insurance companies in the Valley may offer other programs that couple lower insurance rates with driving improvement courses for young drivers. Allstate, for example, offers Teen Smart, a course on a computer disk that teens can take. The course includes a test which, when completed, can be taken to an area office and, depending on the test score, may make the teen eligible for insurance discounts. They also offer discounts for young drivers who keep their grades up and for college students attending school away from home. 'We believe if they're a good student, then they're also probably more of a defensive driver; so these [discounts] promote both,' said Martina Edwards of Allstate's Michael Hughes Agency in Wasilla. 'The discounts are well worth looking into.'

Dec. 25: The hospital is quiet, alone. Everyone is gone for the holiday. Julie lies there, her cheeks looking both sallow and puffy at the same time. Her respirator speeds her breaths faster than before and to listen to it makes my breathing increase, my heart rate increase and my fears swell. This place is too quiet. She seems to be doing well today and I try to take my mind away but I am numb from a night of little sleep, of crying, of panic attacks filled with fear and wondering how this could be real. Tired, I return to her room about 2 a.m. ‹ I need to be with her. My heart sinks as I look at the monitor ‹ her blood pressure has dropped ‹ it is 90 over 70. The nurse, usually cheerful and optimistic, is distant as she busies herself with Julie's assortment of IVs hanging from trees with plastic tubes trailing to my little girl's arms and chest ‹ Julie's Christmas Trees I had called them earlier in the day. CI assume you'll be wanting to stay with her tonight,' the nurse says in an assuming, almost demanding tone. I hold Julie's hand and speak to her as I watch in shock as each reading from the pressure cuff on her arm drops. The nurse comes in and closes the curtains ‹ an act that tells me more than I want to know. She explains that Julie's heart is failing, that they have tapped out all the medications available and she is getting very little oxygen to her blood ‹ and her brain. Her blood pressure continues to fall ‹ 80 over 60, over 50, over 40 ‹ as I share stories with the nurse and respiratory therapist of the once-spirited, smiling girl who liked to work on cars, sing loud, dance and had no qualms about farting in public. I want them to know who this girl is and I want her to know I am here. Her body is giving up; whether or not my Julie is still there I do not know. Her skin is pale and ashen compared to the red glow of

her previous feverish days lying in the ICU. I go up and wake her father, 'I'm sorry, wake up; she's leaving us,' I say. He doesn't hesitate, he doesn't question ‹ he knows. Returning to the room the eyes of the nurses who had cared for her, hoped with us, prayed silently to save this young woman whose vitality and sense of humor they had never known are welled up on the brink of tears. They do their jobs then once again close the curtain, leaving us to say good-bye to our daughter. 'Tell her it's okay to go,' I sob to her father ‹ I already had. He falls to his knees beside the bed and tells her she can stop trying, it is okay, it's time to go to heaven. The monitor begins to beep and the nurse comes into the room in tears. She turns the monitor away from view, saying, 'Don't look at the screen, look at her, don't let your memories be of this.' The room is dark and, once warm, suddenly so cold as her father holds her hand and I stroke her face, watching the color drain away as her heart stops beating. The nurses return and one, then the other, puts her stethoscope to Julie's chest and listens, then steps aside and, eyes red and streaked, announce her time of death. 3:35 a.m. Dec. 26, 2001. Two weeks after Julie's death, after leaving the hospital that had become our days and our nights, after making funeral arrangements, after putting relatives on a plane, after I have reached a point of numbness that prohibits me from feeling or crying, I am looking through her things. I come across a photograph of Julie on her 16th birthday. She is sitting cross-legged in her pink flannel pajamas, hair pulled back in a familiar ponytail and a wide, toothy smile graces her face. She is holding her driver's license. The tears begin to flow.

Side: Graduated licensing sweeping the country The Graduated Driver Licensing System is a program developed by the U.S. Department of Transportation's National Highway Traffic Safety Administration to give young drivers more time to learn how to operate a vehicle. Forty-seven U.S. states have adopted some form of graduated licensing, all but a few since 1994. Although each state's conditions vary, the system optimally involves three stages. The first is a supervised learner's phase, lasting a minimum of six months, as Alaska law now requires. Some systems also require a certain number of hours that a teen-ager has to drive to reach the next level - similar to accumulating a number of supervised flight hours before flying an airplane solo. The intermediate step permits unsupervised driving, but only in less risky situations, such as during daytime hours, and with a limited number of passengers. California was the first state to ban teen-age passengers, according to the Insurance Institute for Highway Safety's October report, 'Graduated Licensing: A Blueprint for North America.' The ban applies to the first six months of a 12-month intermediate phase, unless an adult is present in the car. Full-privelege licensing becomes available when conditions of the first two stages are met. This usally means the driver has incurred no violations or accidents during the first two phases. In the U.S., graduated licensing applies to young drivers ‹ specifically those under the age of 18 ‹ because of the high incidence of accidents among this group, with the exception of Maryland and New Jersey. Those states have followed the lead of Canada, where graduated licensing has been instituted for some time and applies to drivers of any age on the basis that it is designed to address a lack of driving experience. According to the IIHS report, though many states and provinces have adopted portions of the graduated licensing system, there is too much variation between them. The report rates each state as either poor, marginal, acceptable or good, in their new licensing requirements. Alaska was among 12 states rated as marginal, in the company of South Dakota, Nevada, Minnesota and Kentucky, to name a few. Rated poor by IIHS were Arizona, Hawaii, Kansas, Montana, Oklahoma and Wyoming. Twenty-four states were rated acceptable, and nine received the top rating of good.

Side: Accidents are the leading cause of all head and brain injuries. Brain injury can occur when the head has been struck, usually by striking an object such as a windshield, or the brain undergoes a sudden acceleration/deceleration movement without direct external trauma to the head. Many brain injuries are the result of bruising, bleeding, twisting or

tearing of brain tissue. Damage to the brain may occur at the time of the accident, or develop over time as tissues swell and bleed within the head. Many people have minor brain injury from accidents and don't realize the results for years, which can include loss of memory and changes in behavior. Fifty percent of all brain injuries are caused by vehicle crashes, according to the Brain Injury Association, and more than 50,000 people die each year from brain injuries. Each year, about 1.5 million Americans sustain a traumatic brain injury (TBI). That's eight times the number of people diagnosed with breast cancer and 34 times the number of new cases of HIV/AIDS each year, according to BIA.

Side: It could be you By Sally Fielder

The last thing I remember is me looking in my purse and Julie saying, 'Oh shit, we're sliding,' and me looking up and I don't even remember what I saw, just looking up. I don't remember anything at Valley hospital, or even much at Alaska Regional Hospital, but I do remember the nurses pushing me and going over the seam in the doorway and screaming because of my back. It was the worst pain I ever had in my life, a broken back. Although I don't remember much, I had a broken back, my pelvis was broken in four places, I had two broken ribs, a punctured lung, and a ripped spleen. I also lost a kidney as a result of the crash, and have lots of nerve damage to my left leg. I went through several surgeries. The first was an an exploratory surgery when they sewed my spleen back into place. Then I had to have major surgery when I had my fixator and the screw put in my back. Later, I had another one when they took my fixator out and then another to take the screw back out of my back. The screw didn't come out of my back until about 6 months after the crash. I couldn't even lay on that side of my back Ecause I could feel the four-inch screw through my skin. Most of what I know about the hospital is what my family told me happened, because I was heavily drugged. I hallucinated a lot during that time and some of those memories are clear. I remember the really traumatizing stuff, like when the nurses had to lift me or move me to take care of me. I also had chest tubes in place, in addition to the IVs and oxygen in my nose. Because of the extent of my injuries the doctors didn't know whether or not I'd have a catheter the rest of my life < if I'd even be able to go to the bathroom by myself, let alone walk. I did better than they expected me to. The doctor said I healed as fast as a person could. Initially, when I did start walking, it was with a walker, then a crutch. I can walk fine now, but I still have [illegible] and I limp from the pain in my leg because of the nerve damage. The wors possible thing that came out of this < even aside from any of the physical pain < is losing my best friend. The pain of the injuries does not even compare to having someone you love die. That's what's with me mostly now. Julie was a part of my family since fourth grade, so it not only hurts me but every person in my family. They all knew her very well and they knew and loved her for years < everyone was hurt by this and still are. Sometimes I do get mad because she's gone and I wish I could ask her 'why.' But it's because of the fact that she's gone, not because I'm mad at her for anything she did. It's only Ecause she's not here. My family said that at first they didn't know what to expect when the accident happened, it was the most horrifying moment. They knew I had a lot of injuries and would suffer a lot from it, but they also knew I would live. Then there was Julie, and no one knew. One day you're going to work, and the next it's the most horrible experience there is. Now I'm completely paranoid of driving < if it snows or the road is slippery I'm terrified to death of driving. It's hard for me to ride with someone else < almost every one of my friends I would disqualify to drive me around. I consider myself a good driver Ecause I'm so cautious of everything now. I think it's made me a better driver, though. I go on the road every day knowing this could be my last drive < the slightest wrong move could be your last chance. I think people misjudge how much power they have in their hands. I would tell everyone, look at your best friend, your brother, sister, mom or dad < someone you love more than anything in the world, someone you could trust and tell everything to < and picture one night what you could lose, just for not using good judgement. That they could be gone forever.

AAA Alaska
(800) 391-4AAA

January 21, 2004

House Transportation Committee
House of Representatives
Alaska State Capitol
Juneau, Alaska 99801-1182

Dear Representative:

Among the very important legislation under consideration this session is House Bill 213, an act to implement Graduated Drivers Licensing. AAA strongly supports this bill and we urge your support as well.

Driving is a skill that is learned by doing. Unfortunately it is also an inherently risky endeavor. The premise of Graduated Drivers Licensing is simple and it works -- extend the learning process and reduce exposure to risk and you'll reduce the number of teen crashes. House Bill 213 does this.

This bill has all the components of the most successful GDL systems. It provides for time to learn – the six-month instruction permit. It provides for behind the wheel experience – the 50 hours of certified driving experience. It provides for responsibility - six months of citation free driving. And finally – it removes two major risk factors for novice drivers – passengers and late night driving.

Please review the enclosed information regarding how injuries, accidents, and fatalities have been reduced with GDL. AAA estimates that through GDL, the state of Alaska over a decade could prevent some 970 injuries, over 3,000 crashes, and save over $21 million dollars.

The time has come for us to change the way we teach our teens to drive, and people are ready. A recent AAA poll shows that 74 percent of Americans support laws limiting teenage passengers who may ride with inexperienced teen drivers, and that 73 percent of adults think that officials should do more to improve the safety of drivers between the ages of 15 to 19.

You have before you an excellent opportunity to protect teen drivers, their passengers, and all on the road. Please support House Bill 213.

Thank you for your consideration.

Sincerely,

Charity Watt Levis

Charity Watt Levis
Manager, Public Relations

enclosures

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AAA Projects Prevention of 1.5 Million Crashes and Savings of Over $9 Billion over next decade through National Adoption of GDL Laws

	TEN YEAR INJURIES PREVENTED	TEN YEAR CRASHES PREVENTED	TEN YEAR TOTAL COST SAVINGS			TEN YEAR INJURIES PREVENTED	TEN YEAR CRASHES PREVENTED	TEN YEAR TOTAL COST SAVINGS	
Alabama	10,260	32,020	$223,062,990		Missouri	10,390	32,280	$225,469,800	
Alaska	**970**	**3,020**	**$21,077,810**		Montana	2,240	6,990	$48,691,910	
Arizona	6,030	18,690	$130,689,870		Nebraska	4,360	13,580	$94,702,930	
Arkansas	4,710	14,670	$102,340,600		Nevada	2,790	8,710	$60,683,380	
California*	30,210	93,650	$654,987,830		New Hampshire	2,350	7,290	$50,920,750	
Colorado	7,480	23,280	$162,449,270		New Jersey	5,440	16,320	$116,454,450	
Connecticut	3,180	9,780	$68,732,690		New Mexico	3,480	10,890	$75,739,690	
Delware	1,120	3,450	$24,172,500		New York	15,080	46,550	$326,483,330	
D.C.	230	700	$4,915,760		North Carolina	15,560	48,580	$338,193,690	
Florida	26,690	83,220	$579,998,340		North Dakota	1,710	5,330	$37,127,450	
Georgia	11,670	36,310	$253,399,620		Ohio	17,870	55,450	$387,561,370	
Hawaii	1,430	4,420	$30,911,100		Oklahoma	7,430	23,140	$161,368,770	
Idaho	3,460	10,810	$75,273,690		Oregon	4,900	15,200	$106,281,310	

6/2001

Illinois	20,120	62,490	$436,497,860		Pennsylvania	13,330	41,270	$288,869,510	
Indiana	10,680	33,160	$231,665,410		Rhode Island	800	2,420	$17,161,200	
Iowa	6,950	21,710	$151,136,000		South Carolina	6,470	20,130	$140,455,970	
Kansas	7,200	22,470	$156,493,400		South Dakota	2,140	6,670	$46,451,940	
Kentucky	6,300	19,540	$136,583,620		Tennessee	10,530	32,850	$228,819,010	
Louisiana	6,760	20,980	$146,683,870		Texas	40,110	125,000	$871,322,210	
Maine	1,800	5,570	$38,996,100		Utah	6,590	20,540	$143,195,450	
Maryland	6,210	19,250	$134,566,700		Vermont	1,000	3,100	$21,705,250	
Massachusetts	5,460	16,680	$117,783,060		Virginia	12,120	38,590	$265,531,830	
Michigan	14,260	44,150	$309,076,220		Washington	9,000	27,960	$195,339,760	
Minnesota	7,830	24,260	$169,654,660		West Virginia	2,880	8,960	$62,581,740	
Mississippi	5,140	15,990	$111,560,420		Wisconsin	10,770	33,490	$233,729,770	
					Wyoming	570	1,710	$12,173,900	
TEN YEAR TOTALS	416,060	1,293,270	$9,029,725,750						

AAA Projects Prevention of 1.5 Million Crashes and Savings of Over $9 Billion Through Nationwide Adoption of Graduated Driver Licensing Laws; Improved Driver Education Targeted Next

Washington, D.C. - 6/5/2001 -- Citing a recent statistical analysis of state Graduated Driver Licensing (GDL), AAA today projected the U.S. could lower tremendous human and economic costs over the next decade by reducing the number one killer of teens – motor vehicle crashes.

The most effective GDL law, and one that AAA endorses, could account for up to 1.5 million fewer crashes, 500,000 fewer injuries, and 500 fewer deaths for 16 to 17-year-old drivers and over $9 billion in savings over a ten-year period. AAA projections are based on injury and crash data from the National Highway Traffic Safety Administration. The AAA findings conclude that three key provisions are most effective in reducing teen crashes: nighttime driving restrictions, passenger restrictions, and incentives for staying crash and conviction free. AAA also said that learner's permit provisions play an important role in preventing crashes. States with strong GDL laws can expect a 15% reduction in crashes and 15% reduction in injuries and a 2.5% reduction in teen deaths.

The findings were released as part of a progress report on AAA's Licensed to Learn: A Safety Program for New Drivers. Launched nationally in 1997, Licensed to Learn is the most comprehensive program nationwide to curb novice driver crashes. LTL advocates an integrated system for raising public

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awareness about teen crashes and improving state licensing laws through passage of GDL. Additionally, LTL advocates focusing attention on the need to improve the quality and availability of driver education and training through uniform national curriculum standards and instructor qualifications.

Since the introduction of Licensed to Learn, the number of states with GDL laws has climbed from 8 to 44, plus the District of Columbia, due to AAA's involvement. In releasing the findings, Susan Pikrallidas, AAA's Vice President of Public Affairs, credited the dramatic increase to dedicated efforts at the state level.

She cautioned, however, that there is still much to accomplish. "We want the strongest laws possible. That is why today, AAA and its partners ask all states to examine their GDL measure and to make the necessary changes that we now know will make a difference," Pikrallidas said.

As North America's largest motoring and leisure travel organization, AAA provides its members with travel, insurance, financial and automotive-related services. Since its founding in 1902, the not-for-profit, fully tax-paying AAA has been a leader and advocate for the safety and security of all travelers.

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Alaska

Graduated Driver Licensing (GDL)

Note: References shown by number in parenthesis following statistic. Full references listed at end.

Overall Effectiveness:

- With varying lengths of learner phases (LPs), studies have shown that GDLs are effective in reducing teen crash rates:
  - California: 5% reduction with 6 week LP (1)
  - San Diego, California: 20% reduction with 6 month LP (2)
  - Connecticut: 22% reduction with 3-6 month LP (3)
  - Kentucky: 32% reduction with 180 day LP (4)
  - Michigan: 25% reduction with 50 hour LP (5)
  - Ohio: 11% reduction with 6 month LP (6)
  - New Zealand: 7% reduction with 6 month LP (7)
  - North Carolina: 27% reduction with 12 month LP (8)
  - Nova Scotia: 24% reduction with 6 month LP (9)
- GDL has also been shown to be effective in reducing injury/fatality crash rates:
  - Michigan: 24% reduction (5)
  - Florida: 11% reduction (10)

Passenger Restrictions (PRs):

- Compared to other age groups, fatal crashes are more likely to occur when 16- and 17-year-old drivers had male passengers, passengers aged 20 to 29, and teenaged passengers (11)
- For drivers aged 16 and 17, the risk of death per 10 million trips with 3 or more other passengers was more than 2 and ½ times greater when compared to without passengers (11)
- 16-year-old drivers with passengers, compared to drivers of aged 30-59 with passengers, were 4.72 times more likely to be involved in a fatal crash (12)
- New Zealand: After PRs were implemented, a 9% reduction in proportion of crashes involving teens resulted (13)
- San Diego, California: Passenger injuries per licensed driver decreased by 23% after implementation of PRs (2)

Night Restrictions (NRs):

- North Carolina: With NRs at 9 pm, total crashes for 16-year-old drivers decreased by 47% at night (8)
- Florida: With NRs at 11 pm, night crashes for 16-year-olds decreased 17% (10)
- Michigan: With NRs from midnight to 5 am, there was a 53% reduction in night crashes for 16-year-olds (5)
- New Zealand: After NRs were imposed at 10 pm, a 37% reduction in night crashes occurred for 16-year-olds (7)

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News Release

For Immediate Release
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DESPITE STRONG PUBLIC SUPPORT, ALASKA DOES NOT HAVE MOST EFFECTIVE MEASURE TO REDUCE TEEN CRASHES, SAYS AAA ALASKA

ANCHORAGE, Alaska, January 22 – Nearly three-quarters (74 percent) of Americans support laws limiting the number of teenage passengers who may ride with inexperienced teen drivers, according to a nationwide poll released today by AAA, yet just half of states have these lifesaving laws. Crash data show that passenger restriction laws, an important component of Graduated Driver Licensing systems (GDL), are the most effective way to reduce teen crashes, deaths and injuries.

"There is a current misconception that parents will find the teen passenger restriction law burdensome because parents typically designate the teen as the chauffer to the younger siblings," said Charity Watt Levis, AAA Alaska spokesperson. "The reality is that parents are willing to wait an additional 30 days to six months longer to ensure the teenager will have the best opportunity to drive safely."

The survey also found that most adults (73 percent) think that public officials should do more to improve the safety of drivers between the ages of 15 to 19. Motor vehicle crashes are the leading cause of death for people 15 to 20 years of age.

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Currently forty-nine states and the District of Columbia have some form of a Graduated Drivers Licensing law (GDL). GDL laws help novice drivers learn to drive by controlling their progression towards full unrestricted driving. However, half the states, including Alaska, still do not have the most effective components of a GDL law – passenger restrictions, late night driving restrictions and behind the wheel training.

California, where the first significant teen passenger restrictions took effect in 1999, teen passenger deaths and injuries have dropped by 23 percent. One study showed that inexperienced teens driving with one teen passenger nearly doubled their fatal crash risk; having two or more passengers increased their crash risk five-fold compared with driving alone.

"AAA expects to push for passenger restrictions and other components that strengthen GDL laws in at least 33 states this year including Alaska," said Watt Levis "Our efforts during the last decade have led to nearly every state having some form of a GDL law, but there is still much work to do in making these laws stronger. We must remember that motor vehicle crashes are the greatest danger that teenagers face."

Opinion Research Corporation conducted the national telephone poll on December 4 through 7, 2003 for AAA. The survey sampled the opinions of 1,005 adults, with a margin of error of plus or minus 3.1 percent.

AAA Alaska, a AAA MountainWest Club, is dedicated to providing its over 21,000 members in Alaska with travel, insurance, financial and auto-related services. A fully taxpaying, not for profit corporation, AAA MountainWest, Inc. works for the improvement of motoring and traveling conditions and is a leader for travel, civic and safety issues. AAA can be visited on the Internet at www.aaa.com.

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National Transportation Safety Board

Safety Information

Washington, D.C. 20594

GRADUATED DRIVERS LICENSE
FACT SHEET

The Recommendation

- The National Transportation Safety Board recommends enacting laws to provide for a three-stage graduated licensing system for young novice drivers, and restrict young novice drivers with provisional or intermediate licenses (second stage), unless accompanied by a supervising adult driver who is at least 21 years old, from carrying more than one passenger under the age of 20 until they receive an unrestricted license or for at least 6 months (whichever is longer).
- The National Transportation Safety Board recommends enacting laws that prohibit driving by young novice drivers between certain times, especially midnight to 5 a.m.
- The National Transportation Safety Board recommends enacting legislation to prohibit holders of learner's permits and intermediate licenses from using interactive wireless communication devices while driving.

The Problem

- Traffic crashes are the leading cause of death among teenagers today.
- While teen drivers comprise about 6.6% of the driving population, they comprise more than 14% of the drivers involved in fatal crashes. And more than 22% of all highway fatalities occur in crashes involving teen drivers.
- In the past 5 years, more than 16,000 (16,656) people died in crashes involving 14-to -17-year-old drivers.
- 16-year-old drivers driving alone are more than twice as likely to be involved in a fatal crash as older drivers.
- 16-year-old drivers are almost 5 times as likely to be in a crash when traveling with peer passengers.
- Passengers riding with young teen drivers are especially at risk; two-thirds of the fatally injured passengers in these teen driver crashes were teenagers themselves (between ages 15-19).
- The risk of a crash increases greatly with each additional teen passenger riding with a young teen driver.
- Studies from nearly a dozen States show that deaths and serious injuries from traffic crashes involving young drivers declined by as much as 58 percent following enactment of graduated licensing provisions (depending upon the provisions of the law).

Effective Actions

- **Learner's Permit**
  - 6 month minimum holding period (without an at-fault crash or traffic violation)
  - Supervised driving requirement with supervising driver age 21 or older
  - Require seat belt use by all passengers in all seating positions
  - Prohibit driving with any measurable blood alcohol level
  - Prohibit cell phone use by drivers with a learner's permit

- **Intermediate (provisional) Permit**
  - 6 month minimum holding period (without an at-fault crash or traffic violation)
  - Nighttime driving restriction (especially between midnight and 5 a.m.)
  - Teen Passenger restriction (none or 1)
  - Require seat belt use by all passengers in all seating positions
  - Prohibit driving with any measurable blood alcohol level
  - Prohibit cell phone use by drivers with a provisional permit

- **Full licensure**
  - Require seat belt use by all passengers in all seating positions
  - Prohibit driving with any measurable blood alcohol level by all drivers under age 21.

National
Transportation
Safety Board

Washington, D.C. 20594

Safety Information

TESTIMONY OF

KEVIN E. QUINLAN, CHIEF

SAFETY ADVOCACY DIVISION

NATIONAL TRANSPORTATION SAFETY BOARD

BEFORE THE

COMMITTEE ON LABOR AND COMMERCE

HOUSE OF REPRESENTATIVES

STATE OF ALASKA

ON

HOUSE BILL 213

GRADUATED DRIVER LICENSING

FEBRUARY 11, 2004

Good afternoon Chairman Anderson and members of the Committee on Labor and Commerce. I want to thank you for allowing me to speak to you today about graduated driver licensing.

The National Transportation Safety Board is pleased to provide you with information about the problem of young drivers in traffic crashes and its recommendations for reducing these crashes. Graduated driver licensing is an important step that will reduce needless deaths and injuries on Alaska highways and help young drivers in Alaska to more safely adjust to their new driving responsibilities.

The National Transportation Safety Board is an independent Federal agency charged by Congress to investigate transportation accidents, determine their probable cause, and make recommendations to prevent their recurrence. The recommendations that arise from our investigations and safety studies are our most important product. The Safety Board has neither regulatory authority nor grant funds. However, in our 36-year history, organizations and government bodies have adopted more than 80 percent of our recommendations.

The National Transportation Safety Board is an independent Federal agency charged by Congress to investigate transportation accidents, determine their probable cause and make recommendations to prevent their recurrence. We are best known for our aviation investigations such as that of the 2001 crash of Alaska Air Flight 261, off the coast of California. But, we investigate accidents in all modes of transportation, including the Exxon Valdez in marine. The Safety Board also conducts special studies on transportation safety problems of national significance.

The recommendations that arise from our investigations and safety studies are our most important product. The Safety Board has neither regulatory authority nor grant funds. More than 80 percent of our recommendations have been adopted by organizations and government bodies in a position to effect improvements in transportation safety.

The Safety Board strongly supports the provisions of House Bill 213 that implement a comprehensive graduated licensing system. This measure is one of the most effective life-saving measures for teens that the legislature could enact.

The Safety Board has recognized for many years that traffic crashes are this nation's most serious transportation safety problem. More than 90 percent of all transportation-related deaths each year result from highway crashes; a disproportionate number of these highway crashes involve teen drivers age 15 through 20, young people who have only recently obtained their licenses to drive.

Traffic crashes account for 40 percent of all deaths among 15-20 year olds, making traffic crashes the leading cause of death for this age group, more than suicides or drugs. Crash rates for young drivers are significantly higher than crash rates for other driving populations. Young drivers age 15-20 years make up about 6.6 percent of the driving population, but compose more than 14 percent of the drivers involved in fatal crashes. Further, 22 percent of all highway fatalities occur in crashes involving teen drivers. Young driver crash data for Alaska are even more compelling. From 1997 through 2001, teens made up a little more than 7 percent of the Alaska driving population, but constituted more than 17 percent of the drivers involved in fatal crashes; more than 26 percent of the deaths on Alaska roads occurred in crashes involving teen drivers.

The model Graduated Driver Licensing (GDL) program requires young novice drivers to proceed through three –stages, a learner's permit, an intermediate or provisional license, and a full license. To obtain full licensure the young driver must complete the first two stages without any moving violations or crashes attributed to the driver.

This statement present three key points about GDL. First, it will explain the problem of young novice drivers. Second, it will describe the elements of the model GDL program. And third, it will highlight a few success stories in other States.

THE PROBLEM

Young drivers have been the focus of U.S. licensing systems primarily because they constitute the largest group of beginners and have the highest crash risk. A number of studies by Federal agencies, the States, private organizations, and others have shown that 16-year-olds are more likely to be involved in single vehicle crashes, be responsible for the crash, be cited for speeding, and carry more passengers in their vehicles than older drivers. Such crashes are most likely to occur from 10 p.m. to midnight on Friday and Saturday nights. Although young

drivers do only 20 percent of their driving at night, over half the fatalities of young drivers occur at night.

Young drivers generally transport more passengers than older drivers, and these passengers are usually from the same age group. Often this results in a deadly combination of inattention, inexperience, and immaturity. A recent study published in the Journal of the American Medical Association concluded that the risk of death increased significantly with each additional teen passenger transported by a teen driver. Two-thirds of teen vehicle deaths occur in vehicles driven by teens.

A frequent contributing factor to crashes, injuries, and fatalities involving teens is the decision by the young novice driver and his or her peers not to use seat belts. Nationally, from 1994 through 2002, over 41 percent of motor vehicle occupants involved in fatal crashes were unrestrained, and 59 percent of fatally injured motor vehicle occupants were unrestrained. As abysmal as these numbers are, seat belt use among the teen population is worse. For the same years, 51 percent of teens age 15 through age 20 who were involved in fatal crashes while riding in motor vehicles were unrestrained. Over 64 percent of fatally injured teens were unrestrained. Alaska's problem is similar. Almost 55 percent of the teens involved in fatal crashes while riding in motor vehicles were unrestrained. Over 57 percent of the fatally injured teens were unrestrained.

Our current driver education system does not teach young people to drive; it teaches them to pass a test. Learning to drive is a long-term process, one that cannot be effectively managed through the traditional driver education program. Once the mechanics are learned, extensive additional training must be "on the job," without unnecessary distractions, and with the assistance of a more mature and experienced driver. As their skills and maturity develop, new drivers can then proceed to full licensure.

THE SOLUTION

After reviewing crashes involving novice drivers under the age of 21, in 1993, the Safety Board recommended that Alaska and the other States take several specific actions, including implementation of a comprehensive provisional license system for young novice drivers, also known as graduated driver licensing (GDL). GDL consists of a learner's permit, an intermediate or provisional license, and

finally a full license. GDL establishes restrictions so that, until the driver has had an opportunity to gain experience, initial driving occurs in less dangerous circumstances. Restrictions are lifted after successful completion of the learning and intermediate stages.

Based on research by the Safety Board, NHTSA, and others, the Board recommends that the basic elements of a GDL program include:

- A minimum 6-month holding period for the learner's permit, during which the permit holder is supervised by a licensed driver who is at least 21 years old.
- At least 50 hours of supervised driving practice with a licensed driver who is at least 21 years old.
- A minimum period of 6 months without at-fault crashes or traffic violations (and accelerated penalties if the driver has an at-fault crash or traffic violation) before proceeding to the intermediate or provisional license.
- An intermediate phase that includes a nighttime driving restriction, a limitation on the number of passengers, and a prohibition on cell phone use by the young novice driver.
- A minimum 6-month holding period for the intermediate or provisional license.
- The nighttime driving restriction should prohibit the intermediate or provisional license holder from driving unsupervised at night, particularly between the hours of midnight and 6:00 am.
- The passenger restriction should allow no more than one other passenger in the vehicle, unless accompanied by a supervising adult at least 21 years old.
- A minimum period of 6 months without at-fault crashes or traffic violations (and accelerated penalties if the driver has an at-fault crash or traffic violation) before proceeding to the full license.
- Mandatory seat belt use and zero tolerance of alcohol use at each stage.

Nighttime Driving Restrictions

Nighttime driving restrictions are especially important and effective in reducing crashes. Forty-three percent of teen motor vehicle deaths in 2001 occurred between 9:00 pm and 6:00 am. Studies have revealed that nighttime driving restrictions are associated with crash reductions of up to 60 percent during the restricted hours. A 1984 study of nighttime driving restrictions in four States found among 16-year-old drivers that crashes were reduced by 69 percent in

Pennsylvania, 62 percent in New York, 40 percent in Maryland, and 25 percent in Louisiana. Because many of these crashes occur in the evening hours, a greater crash reduction is achieved when the restriction starts earlier in the night. Many States include conditions or exemptions related to work or school, and may limit routes or number of passengers as well.

Many parents and even young drivers support the restriction when they understand the justification for it. A November 1994 survey by the Insurance Institute for Highway Safety (IIHS) found that 74 percent of parents of 17-year-olds favor night driving restrictions for beginning drivers. Of those in favor, 48 percent preferred a restriction beginning at 10 p.m. A telephone survey of 16- to 18-year-olds in four States with such restrictions indicated that 63 percent of the teens surveyed in Illinois, 67 percent in New York, 80 percent in Pennsylvania and 47 percent in Indiana, were in favor of some kind of night driving restrictions for beginning teen drivers.

IIHS conducted follow-up surveys in 1999 of parents in Connecticut and Florida whose children had recently obtained their driver's licenses. These parents were even more supportive than they had been during initial interviews in 1996, before their teens had begun the licensing process. Few parents reported that the laws had inconvenienced them. Many were in favor of additional requirements, such as passenger restrictions, that were not currently part of their States' laws.

Passenger Restrictions

In 2002, the Safety Board revisited the teen driving issue and added a passenger restriction to its original GDL recommendation. The Safety Board investigated several crashes involving young novice drivers that illustrate the tragic consequences of allowing inexperienced young drivers to drive with multiple teen passengers in the vehicle.

The presence of teen passengers can adversely influence the risk-taking behavior of teen drivers, leading to crashes with increased injuries and deaths for both the drivers and their passengers. The relative risk of death among 16- and 17-year-old drivers who have at least one passenger in the car is significantly greater than the relative risk when driving alone. The risk increases with each additional passenger. Carrying at least three teen passengers results in a threefold increase in the probability of a teen in that vehicle being killed.

The National Committee on U form Traffic Laws and Ordinances added a passenger restriction to its Model Graduated Licensing Law in 2000, and incorporated it into the Uniform Vehicle Code (UVC). Elements of the UVC model law include the following:

- No more than one passenger under age 20 is allowed unless a supervising driver is present or until the driver receives full licensure.
- Passenger exemptions are granted for family members to ride with an unsupervised provisional licensed driver.

Based on the available research, the UVC model law, and FARS data, the Safety Board concluded that by restricting to zero or one the number of passengers carried by teen drivers during the intermediate stage, States can substantially reduce crashes involving young novice drivers and can reduce fatalities among teen occupants. The Board also concluded that if the passenger restriction lasts only a few months, it is unlikely to have a substantial safety benefit. The Board, therefore, believes that Alaska should restrict young novice drivers with a provisional license from carrying more than one passenger under the age of 20 until they receive an unrestricted license or for at least 6 months (whichever is longer).

Cell Phone Restrictions

In 2003, the Safety Board examined the role that driver distraction plays in motor vehicle crashes, especially when the driver is inexperienced. The Board concluded that current State laws are inadequate to protect young, novice drivers from distractions that can lead to crashes. The Board recommended that States enact legislation to prohibit holders of learner's permits and intermediate licenses from using interactive wireless communication devices while driving. The recommendation is derived from the Board's investigation of the February 1, 2002, Ford Explorer Sport collision with a Ford Windstar minivan and a Jeep Grand Cherokee on Interstate 95/495 near Largo, Maryland.

This crash involved multiple risk factors, some of which are associated with young drivers. The crash driver, who was 20 years old, was unbelted, and had only an estimated 50 hours of driving experience, was operating a short-wheelbase sport utility vehicle, with which she was unfamiliar. She was driving 15-20 miles over the speed limit, while talking on a handheld wireless telephone. The Board also

investigated a fatal crash involving a 16-year old driver in Korona, Florida in which the novice driver was distracted by talking on a wireless telephone.

Learning how to drive and becoming comfortable in traffic requires all the concentration a novice driver can muster. According to a 2001 study, even experienced drivers engaged in wireless telephone conversations were unaware of traffic movements around them. Moreover, the use of wireless communication devices is becoming increasingly prevalent as the use of these devices has more than doubled (from 60 million subscribers in 1998 to more than 144 million in 2003).

In January 2002, New Jersey passed a law prohibiting holders of special learner's permits, driver's examination permits, and provisional driver's licenses from using any interactive wireless communication device while operating a motor vehicle. On May 23, 2003, the Governor of Maine signed a law restricting drivers under age 18, including persons with an instruction permit and holders of restricted licenses, from "operating a motor vehicle while using a mobile phone." The Safety Board recommends that Alaska enact similar legislation and prohibit holders of learner's permits and intermediate licenses from using interactive wireless communication devices while driving.

Beginning drivers should be introduced gradually to the driving experience. They should be provided the maximum time to practice, under the safest possible real-world conditions. They should be given the opportunity to gradually develop the skills needed for full licensure. For our young drivers to have the chance to develop, we need to create a support system that involves parents and guardians. We need to quickly identify young problem drivers before bad habits and behaviors become ingrained, and then take action to correct those problems. GDL has been described as "training wheels for young drivers." This analogy makes good sense; we do not proceed from walking to riding a bicycle in one step. We need training wheels to make the process safer.

STATE IMPLEMENTATION

There has been a revolution in driver licensing laws in the past 10 years. Virtually every State has strengthened its driver licensing system. But while it is important to include both of the first two stages, only 36 of the 50 States have done so.

In 2003, almost 20 States considered legislation and 4 States (Connecticut, Illinois, Maine, and Rhode Island) enacted legislation that improved their graduated licensing systems. Based on an IIHS report dated July 2003, approximately 72% of the States have now implemented an acceptable or good GDL system. There are now only 4 States that have not enacted at least some core provisions of graduated licensing.

SUCCESS STORIES

GDL does make a difference. According to the National Safety Council, 16-year-old drivers are involved in 33 percent fewer traffic crashes. And every evaluation of a State's GDL system has identified crash reductions of up to 60 percent.

Individual States that have had great success with GDL include Iowa. In 2001, after Iowa enacted GDL, 16-year drivers were involved in 20-percent-fewer traffic crashes than the same group in 1998, the last year before the system was adopted. In addition, 16-year-old drivers received 38 percent fewer traffic convictions that in 1998. Scott Falb, spokesman for Iowa's Department of Transportation, emphasized, "These are definitely some numbers Iowans can be happy about." We've reduced the number of violations and citations; we've reduce the number of crashes that's our biggest goal."

North Carolina implemented a comprehensive graduated licensing system with a 9:00 p.m. to 5:00 a.m. nighttime driving restriction in December 1997. A recently published review (June 2003) of North Carolina's crash data found a 23-percent reduction in injuries and deaths involving 16-year-old drivers. Nighttime crashes (during the restricted hours) decreased more than those during daytime hours. Both the number of crashes and the rate, based on population, declined dramatically.

Reviews from other States have consistently shown significant crash reductions:

- **California** – A recent review by the Auto Club of Southern California found that for 16-year-old drivers, there was a 20 percent reduction in at-fault fatal

and injury crashes. Injuries and fatalities of teen passengers decreased by 40 percent.

- **Delaware** – For drivers 16 years old, fatal crashes decreased by 43 percent and all crashes decreased by 42 percent. For drivers 17 years old, fatal crashes decreased by 72 percent and all crashes decreased by 21 percent.
- **Florida** – For drivers age 15 through age 17, IIHS found a 9-percent reduction in fatal and injury crashes.
- **Michigan** – For drivers 16 –years old, the risk of being involved in a crash in 1999 was 25 percent lower than the risk in 1996.
- **Pennsylvania** – GDL is credited with a 27-percent reduction in crashes, a 32-percent reduction in injuries, and a 58-percent reduction in fatalities.

Nighttime Restriction Effectiveness

- **New York** – For 16- and 17-year-old drivers, the nighttime driving restriction resulted in a 62-percent crash reduction.
- **Pennsylvania** –For drivers under age 18, there was a 69-percent reduction in crashes during the nighttime driving restriction hours.
- **Louisiana** – For drivers 15 years old, crashes fell by 25 percent during the nighttime driving restriction hours.

CONCLUSION

From 1997 through 2001, across the nation, 47,265 people died in crashes involving teen drivers. In Alaska, 108 people died. During the same years, the nation saw 29,155 teen motor vehicle occupants (73 in Alaska) die in motor vehicle crashes. While the emotional costs are staggering, the financial costs are equally astounding.

The lifetime cost to society for each fatality is over $977,000, and those not directly involved in crashes pay for nearly three-quarters of all crash costs, primarily through insurance premiums, taxes, and travel delay. Therefore, the 47,265 people who died in crashes involving teen drivers cost society more than $46 billion, almost $35 billion of which was paid by those not involved. The teen fatalities alone cost $28 billion. In Alaska, teen-involved fatal crashes cost society over $105 million, and teen motor vehicle occupant fatalities cost society over $71 million.

Highway crashes involving young drivers will remain a serious and persistent problem unless concrete and comprehensive steps are taken. Our young people are this Nation's most valuable resource, one that must be nurtured and protected. Too many of them are being killed and injured unnecessarily.

The Safety Board asks that you enact legislation to adopt GDL system. We urge you to mandate a minimum holding period for learner's permits, require at least 50 hours of supervised driving practice in the learner's permit stage, and add a provisional license stage with nighttime driving, passenger and cell phone restrictions. The Board believes an effective combination of tough, fair laws, vigorous enforcement, and an intensive, targeted educational campaign is needed. We are so convinced of GDL's life saving benefit that we have included GDL on the Board's list of "Most Wanted" recommendations. A comprehensive GDL system is one of the most effective actions that the Alaska legislature can take to save both young lives and the lives of others involved in crashes with young drivers.

Thank you again for providing me the opportunity to testify about this important initiative. I would be happy to answer any questions you may have.

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REPORTED EFFECTIVENESS OF GRADUATED LICENSE LAWS IN THE STATES

State	Reduction Achieved	Type of Reduction (fatals, injuries, etc.)	Information source
Florida	9% over all 19% for age 15 11% for age 16 7% for age 17	Fatality & injury crashes involving 15-17 year-old drivers	Study-Preusser Research Group
Michigan – 1st study	25% overall 24% 24%	Risk of crash Non-fatal injury crashes Combined fatal/non-fatal injury crashes	Study-UMTRI
Michigan – 2nd study	25% overall	Crash rates among 16-year-old drivers	Study -UMTRI
North Carolina	25% 57% 28% 43%	Crashes Fatal crashes Injury crashes Nighttime crashes	Study - HSRC
California	20% 40% 27%	At-fault fatal and injury crashes of 16-year-old drivers Teen passenger fatals/injuries At-fault collisions (16-year-old drivers)	Auto Club of Southern California
Iowa	26.1% 36.8%	Crashes (16-year-old drivers) Traffic Offense Convictions (16-year-old drivers)	Iowa DOT
Ohio	23% 24% 7%	Crash involvement (GDL v. non-GDL) Fatal crash involvement (GDL v. non-GDL) At-fault crash rate (GDL v. non-GDL)	Highway Safety Office
Pennsylvania	27% 32% 58%	Crashes injuries fatalities	PennDOT
Maryland	600-700 45%	Crashes (16-year-old drivers) Reduction in fatal & disabling crashes (16-year-old drivers)	Study - Princeton Health Data, MD MVA
Oregon	1st yr 25% 2nd yr 32% 3rd yr 36%	Fatal and serious injury crashes involving 16-year-old drivers	Oregon Transportation Safety Division, ODOT

10/28/03

MADD
Activism | Victim Services | Education™

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Our Mission is to stop drunk driving, support the victims of this violent crime and prevent underage drinking

January 27, 2004

Representative Bruce Weyhrauch
Capitol Building
Juneau, AK 99801

Dear Representative Weyhrauch,

I am writing on behalf of the Anchorage Chapter of Mothers Against Drunk Driving in support of HB 213, Graduated Drivers Licensing.

This bill allows young, inexperienced drivers extra time to gain critical experience behind the wheel without the distractions of other youth in the vehicle, and also emphasizes the increased risk of driving during the late night/early morning hours.

Approximately four years ago, MADD participated in a series of youth forums during which young people 14-17 years of age, who discussed teen driving behaviors. The top reason they indicated for teen crashes was inattention, and they went on to describe the inattention as the result of paying attention to conversations and actions of their friends in the vehicle with them, including physically turning their head from the roadway to join in talk or actions going on around them.

Thank you, Representative Weyhracuh, for providing this step toward increasing the safety of Alaska's teen drivers.

Sincerely,

Marti Greeson

Marti Greeson
Executive Director
MADD Anchorage Chapter

Comparison of Young and Adult Driver Crashes in Alaska Using Linked Traffic Crash and Hospital Data

Martha Moore[1]

ABSTRACT

This report describes young driver crashes in Alaska, compares rates and characteristics of young driver crashes with adult driver crashes, and summarizes the medical and financial outcomes of young driver crashes, for the period 1991 through 1995. Using the Mini Crash Outcome Data Evaluation System (MINICODES), trauma registry hospital discharge data were linked with traffic crash records. The data were analyzed to compare drivers aged 16-20 with drivers aged 21-50 who were involved in a crash resulting in the hospitalization or death of a crash victim. The CrashCost Program was used to estimate costs associated with young driver crashes for the five years.

Young drivers were 2.9 times more likely than adult drivers to be involved in crashes that resulted in the hospitalization of a crash victim, and 2.6 times more likely to be involved in a crash involving a fatality. The contributing factors for young driver crashes were listed as human factors 73.4% of the time, compared with 65.6% among adults (P=.001). Costs associated with the young driver crashes were estimated to be over $300 million, which resulted in a cost per young licensed driver that was 3.4 times the cost per adult licensed driver.

INTRODUCTION

Motor vehicle crashes are the leading cause of death for young people in the United States aged 15 to 20 years. National statistics reveal that teen drivers are disproportionately involved in crashes. In 1995, young drivers aged 15 to 20 years comprised only 6.7% of the driving population, yet they accounted for 14% of the drivers involved in fatal crashes and 17% of the drivers in police-reported crashes. The losses these crashes represent in terms of human suffering are vast and difficult to quantify. The financial toll has been estimated at $31 billion annually (1).

There are a number of factors that impact the driving performances of teens including age, inexperience, supervised driving, and night driving. An examination of the effects of the different state laws on 15-17 year old driver fatality rates found that the minimum legal driving age and curfew laws had the greatest impact on driver fatality rates (2). Delayed full licensure age, night driving curfews, and supervised driving have all been shown to be effective in mitigating the high crash rate among 16 year olds. In upstate New York, however, where a combination of these strategies are employed, crash involvement rates remained low through age 24, compared with the other northeastern states included in the study (3).

The National Highway Traffic Safety Administration (NHTSA) recommends that states adopt a graduated licensing system that combines delayed full-privilege licensure, supervised driving, and night driving curfews. An evaluation of the effectiveness of New Zealand's graduated licensing system, in place since 1987, reveals a 23% reduction in crash injuries for the 15 to 19 year old population (4). Eleven states now have some form of graduated licensing. Evaluations of graduated licensing in California, Maryland, and Oregon demonstrated a 5-16% reduction in young driver crashes (5).

Motor vehicle crashes are the leading cause of death for Alaskans aged 16 through 20 and cause almost 50% of the unintentional injury deaths for this age group. Drivers in this age range were involved in 13.1% of police-reported crashes in Alaska during the period 1991 through 1995 while they accounted for only 6.3% of licensed drivers in the state. This constituted a 107.9% over-representation of crashes in the young driving population. The crash rate of drivers aged 16 through 20 from 1991 through 1995

(1) Alaska Department of Health and Social Services, Division of Public Health, Section of Community Health and Emergency Medical Services (CHEMS) P.O. Box 110616, Juneau AK 99811-0616.

was 135.9 crashes per 1,000 drivers, which was 2.4 times the crash rate of drivers aged 21 through 50 (56.9 per 1,000 drivers).

Among 16 through 20 year old drivers, the crash rate in Alaska decreased each year to age 20. The crash rate of 17 year old drivers was 24% lower than that of 16 year old drivers; the 18 year old driver crash rate was 22% lower than that of 17 year old drivers; the 19 year old driver crash rate was 21% lower than that of 18 year old drivers; and, the 20 year old driver crash rate was 12% lower than that of 19 year old drivers.

The purpose of this study is to describe the most severe young driver crashes in Alaska, to compare rates and characteristics of young driver crashes with adult driver crashes, and to summarize the medical and financial outcomes of young driver crashes.

METHODS

Computerized crash records from the Highway Analysis System (HAS) for 1991 through 1995 were obtained from Alaska's Department of Transportation and Public Facilities. This system contains information on motor vehicle crashes on a trafficway, either recorded by police or self-reported. Alaska law requires that any motor vehicle crash which results in death, injury, or property damage of $500 or more must be reported to the Alaska Department of Public Safety. Data include passenger demographics, type of vehicle, type of crash, contributing factors, type of injury, and body region injured. There are up to two contributing factors listed per driver involved in a crash, recorded by the enforcement officer. They fall into four main categories: human error, roadway conditions, environmental elements, and vehicle defects.

Hospital discharge data were extracted from the Alaska Trauma Registry, also for 1991 through 1995. The trauma registry is a statewide information system housed in the Alaska Department of Health and Social Services, which includes detailed data on all injury hospitalizations in the state. Alaska's trauma registry is somewhat unique in that trauma data are collected from all acute care hospitals in the state, of which there are 24, and are collected on all patients admitted for 24 hours or more. Data include patient demographics, ambulance service transport and treatment, hospital treatment and length of stay, diagnosis, injury severity, discharge status, charges, and payer billed.

In order to associate circumstances of crashes with corresponding injury outcomes, crash records and trauma registry records were linked using the Mini Crash Outcome Data Evaluation System (MINICODES), developed by the National Association of Governor's Highway Safety Representatives (NAGHSR) with the support of NHTSA. This software relies on a probabilistic linkage methodology which is particularly useful with data that lack identifiers or may contain incomplete or erroneous information. The methodology has been extensively tested and has demonstrated high precision matching (6).

Trauma registry records were considered for linkage by virtue of an external cause of injury code (E Code) in the range 810.0-816.9 and 819.0-819.9, motor vehicle traffic collision injury. E Codes are a coding system within the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM), which are routinely entered into the Trauma Registry for each trauma patient. The identifiers used for linkage of the two databases were sex, age, birthdate, geographic region, and probable hospital admission date and time. Additional variables were used to review questionable matches. They consisted of vehicle type, crash type, residence city, crash city, position of injured person in vehicle, anatomical location of injury, and the injury description.

Only the most serious crashes were considered for study, i.e. those involving the hospitalization or death of a crash participant. A **hospital crash** refers to any motor vehicle traffic crash resulting in at least one victim of the crash admitted to a hospital for 24 hours or more. A **fatal crash** refers to any motor vehicle traffic crash resulting in at least one fatality. A **fatality** is defined as a death that occurs as a direct result of a motor vehicle crash within 30 days of the injury or during an acute care hospital stay if the patient was originally hospitalized within 30 days of the injury. Through linkage of traffic crash data with trauma registry data, two populations were identified for study: drivers in crashes and victims of crashes. Drivers were divided into two groups, those aged 16 through 20 which are referred to as **young drivers**, and those aged 21 through 50, referred to as **adult drivers**. These two age groups were used for comparison to avoid the introduction of older drivers who are involved in crash patterns unique to their group. The victims of the crashes were described in terms of outcome, hospital charge payment source, and costs. The victims were also divided into two groups, those who were victims of young driver crashes and those who were victims of adult driver crashes.

Safety equipment consists of safety belts, safety belts with harnesses, child safety seats, and helmets. **Alcohol involvement** is recorded as a contributing factor on the police record if alcohol use is confirmed by a test or suspected. **Disability** is defined as the

expectation that the patient will never be able to return to his or her pre-injury level of function in the judgement of the trauma registrar collecting the information from the medical record file.

Cost estimates were derived using the CrashCost Program obtained from NHTSA. Actual hospital charges from the trauma registry were not used because this data element is only about 50% complete. In fact, this information has never been available from the public health service and military hospitals. The CrashCost Program estimates the economic costs of motor vehicle crashes. These costs include direct medical expenses, direct "other" expenses and indirect costs. The CrashCost program also accounts for unreported crashes and adjusts for locality and current economics (7).

The cost estimates were based on Alaska specific data on the number of crash fatalities and the number of patients identified with an Abbreviated Injury Scale (AIS) score of four (severe injury) or five (critical injury). Injuries of an AIS of three or less are not adequately tracked by the trauma registry since only patients admitted to the hospital for one or more days are entered into the database. Therefore, the national ratio based estimates from the CrashCost Program were used to estimate the number of these less severe injuries.

RESULTS

A total of 3,158 trauma registry records were considered for linkage with traffic records, resulting in 2,183 matches, or a 69.1% matching success rate. The linked trauma registry records were compared with the unlinked records to see if the linked records were representative of the unlinked records. There were no significant differences between the groups in sex and age, however, there were significant differences relating to geographic location of crash and type of crash. The crashes among the linked trauma registry records occurred more often in the urban areas (Anchorage, Fairbanks, the Kenai Peninsula, Matanuska-Susitna Borough, and Juneau) ($p < .0001$). There was a significantly smaller percentage of Alaska Natives in this group than in the unlinked data group ($p > .01$). The mean injury severity was greater among the linked records than among the unlinked records ($p < .05$). The linked data also included less pedestrian injuries ($p < .0001$) and more driver injuries ($p < .0001$) than the unlinked data.

Linkage of traffic crash data with trauma registry data resulted in 2,508 drivers identified for their involvement in hospital and fatal crashes: 488 young drivers and 2,020 adult drivers. A comparison of crash involvement rates of young and adult drivers, annualized over the five-year period, is shown in Table 1. Young drivers were 2.9 times more likely to be involved in crashes that resulted in the hospitalization of a crash victim, and 2.6 times more likely to be involved in a crash involving a fatality.

The young and adult drivers in hospital and fatal crashes are compared in Table 2. The two groups of drivers were similarly distributed by sex and use of safety equipment. Hospital and fatal crashes occurred most often during the summer months (July and August) among both groups of drivers. The time of day of the crash was also similar between the two groups. Adult driver crashes that resulted in serious injury peaked in late afternoon and early evening (25.6%) and young drivers were most at risk between noon and 4 PM (23.4%).

There are up to two contributing factors recorded in the traffic crash database for a driver in a crash. There were a total of 643 contributing factors listed for the young drivers involved in crashes associated with the hospitalization or fatality of a victim, and a total of 2,439 contributing factors for the adult drivers

Table 1 Annualized Young and Adult Driver Crash Involvement Rates, 1991-1995*

	Drivers Aged 16-20 Years		Drivers Aged 21-50 Years		Rate Ratio
	Number of Crashes	Rate**	Number of Crashes	Rate**	
Hospital Crash Involvement	408	3.1	1,659	1.1	2.9
Fatal Crash Involvement	80	0.6	361	0.2	2.6

* Drivers in Hospital and Fatal Crashes, N = 2,508
** Rate per 1,000 licensed drivers

Table 2 Comparison of Young and Adult Drivers in Hospital and Fatal Crashes * Driver Age, Safety Equipment Use, and Crash Time, Alaska, 1991-1995

	Young Drivers (Age 16-20) N=488		Adult Drivers (Age 21-50) N=2,020	
	N	Percent	N	Percent
Sex				
Male	324	66.4%	1444	71.5%
Female	164	33.6%	579	28.7%
Safety Equipment Use				
Recorded	462		1871	
Used	252	54.5%	1053	55.9%
Not Used	210	45.5%	818	44.1%
Unrecorded	26		149	
Crash Time				
Midnight-4am	90	18.4%	304	15.0%
4am-8am	36	7.4%	187	9.3%
8am-noon	48	9.8%	232	11.5%
noon-4pm	114	23.4%	403	20.0%
4pm-8pm	111	22.7%	517	25.6%
8pm-midnight	89	18.2%	377	18.7%

* Drivers in Hospital and Fatal Crashes, N = 2,508

in similarly serious crashes. As indicated in Table 3, the percentage of contributing factors due to human error among the young drivers, as recorded by the investigating officer, was significantly higher than that of the adult drivers ($p<.001$). Conversely, there was a greater percentage of adult drivers with "no contributing factor" recorded to describe their involvement in the crash ($p=.01$).

The contributing factors of the young and adult driver crashes resulting in a fatality or hospital admission are detailed in Table 4. "Alcohol" was the most frequent contributing factor for adult drivers (20.6%). "Unsafe speed" ranked second at 16.4%. The crash records of young drivers listed "unsafe speed" most often (22.1%), while alcohol involvement among young drivers was noted as a contributing factor 11.8% of the time.

There were 99 fatalities among the young driver crash victims from 1991 through 1995. Of these, 67 died at the scene. A total of 517 victims of the young driver crashes were treated at a hospital. Seventy patients (13.5%) were discharged from the hospital with a disability. The adult driver crashes resulted in 344 deaths, including 228 scene deaths. Adult driver crash victims treated at a hospital numbered 1,666. Of those, 186 (11.2%) were discharged from the hospital with a disability.

The distribution of payers billed for hospital expenses associated with the 2,183 hospitalized victims are presented in Table 5. Of the patients involved in the young driver crashes, the largest percentage billed their hospital expenses to private health insurance (33.1%), followed by those who were uninsured (19.3%), and those covered by automotive insurance (14.7%).

Table 6 presents an estimate of the total costs associated with young and adult driver crashes in Alaska for the five years using the CrashCost Program. Cost per young licensed driver was 3.4 times the cost per adult licensed driver.

CONCLUSIONS

Alaska is similar to the rest of the nation in that young people are disproportionately involved in motor vehicle crashes, and crash injuries constitute a major health problem among this group. Alaska is, however, distinctive by having the lowest population density of any state, about one person per square mile. There are 13,485 miles of roads but only five of Alaska's urban centers are connected by road. The formidable terrain, isolation, and extreme weather conditions make access to medical care a challenge for residents and visitors alike who are involved in

Table 3 Comparison of Young and Adult Drivers in Hospital and Fatal Crashes
Total Contributing Factors, Alaska, 1991-1995

	Total Contributing Factors Of Young Drivers, N = 643 *		Total Contributing Factors of Adult Drivers, N = 2,439 *		
Contributing Factors *	N	Percent	N	Percent	
Human	472	73.4%	1600	65.6%	**
Vehicle	22	3.4%	53	2.2%	
Environmental	23	3.6%	76	3.1%	
Roadway	42	6.5%	124	5.1%	
None	78	12.1%	551	22.6%	***
Unknown	6	0.9%	35	1.4%	

* Up to two contributing factors per driver
** p = .001
*** p = .01

Table 4 Comparison of Young and Adult Drivers in Hospital or Fatal Crashes
Total Contributing Factors, Alaska, 1991-1995

	Total Contributing Factors of Young Drivers, N = 643 *		Total Contributing Factors of Adult Drivers, N = 2,439 *		
Unsafe Speed	142	22.1%	401	16.4%	***
Alcohol	76	11.8%	502	20.6%	**
Driver Inattention	59	9.2%	142	5.8%	
Failure to Yield	45	7.0%	144	5.9%	
Driver Inexperience	36	5.6%	28	1.1%	
Pavement Slippery	32	5.0%	107	4.4%	
Improper Lane Usage/Passing	27	4.2%	76	3.1%	
Traffic Control Devise Disregard	24	3.7%	79	3.2%	
Other Human Factor	19	3.0%	81	3.3%	
Turning Improperly	10	1.6%	35	1.4%	
Fell Asleep	9	1.4%	42	1.7%	
View Obstructed	8	1.2%	36	1.5%	
Other (See below for detail)	156	24.3%	766	31.4%	

* Up to two contributing factors per driver
** p=.03
*** p = .15

Other: backing unsafely, illicit drugs, following too closely, passenger distraction, pedestrian error, illness, lost consciousness, prescription medication, physical disability, acceleration defective, brakes defective, headlights defective, other lighting defects, oversized vehicle, steering failure, tire failure, tow-hitch defective, windshield inadequate, other vehicular factors, animal's action, glare, lane marking improper, contruction debris, pavement deteriorated, shoulders, signs missing, and other roadway factors.

Table 5 Payers Billed for Hospitalization of Victims of Young Driver and Adult Driver Crashes * Alaska, 1991-1995

	Young Driver Crash Victims N=517		Adult Driver Crash Victims N=1,666	
Payer Billed	N	Percent	N	Percent
Private	171	33.1%	472	28.3%
Uninsured	100	19.3%	368	22.1%
Automotive	76	14.7%	225	13.5%
Indian Health Service	50	9.7%	174	10.4%
Medicaid	40	7.7%	110	6.6%
Military	24	4.6%	118	7.1%
Champus	12	2.3%	42	2.5%
Medicare	10	1.9%	48	2.9%
Other/Unknown	34	6.6%	109	6.6%

* Hospitalized Victims of Crashes, N = 2,183 (295 scene deaths not included)

Table 6 Cost Estimates for Young and Adult Driver Crashes Alaska, 1991-1995

	Young Driver Crashes	Adult Driver Crashes
Injury Components:		
Fatalities	99	344
Injuries	7,648	26,569
Property Damage Only	34,333	119,248
Direct Medical Costs	$36,750,837	$126,786,020
Direct Other Costs	134,898,306	468,099,927
Indirect Costs	131,086,293	454,729,271
Total	$302,735,436	$1,049,615,218
Cost per Licensed Driver	$2,336	$697

motor vehicle traffic crashes. Teen drivers demonstrated a greater propensity for involvement in the most severe crashes compared with adults, but the involvement rate did not increase significantly with injury severity.

Among the most serious crashes (those involving the hospitalization or death of a crash participant,) contributing factors recorded for young drivers were more likely to be human factors than those recorded for adult drivers. These data suggest that inexperience and risk-taking behaviors contribute to young driver crashes.

The high percentage of safety belt and helmet nonuse among both of the study populations (44%-46%) is partially explained by the fact that these were the drivers in crashes resulting in the most serious injuries, including injuries to themselves. The Youth Risk Behavior Survey of 1995 reported that about 20% of Alaska high school students surveyed responded that they rarely or never use safety belts. Among those who ride motorcycles, about 40% rarely or never wear helmets (8). In response to the 1995 Alaska Behavioral Risk Factor Survey, 33.1% of adults reported that they did not always use safety

belts (9). These percentages are all higher than comparable national percentages. Lap and shoulder belts are 40-50% effective in reducing deaths and 45-55% effective in preventing moderate-to-critical injuries to passenger vehicle occupants (10). NHTSA estimates that helmets are 29% effective in preventing fatal injuries to motorcyclists and in a recent study showed that motorcycle helmets are 67% effective in preventing brain injuries (11).

Alcohol was not the leading contributing factor in young driver crashes as it was for adult driver crashes. This has been reported by other researchers and can be attributed largely to an alcohol purchase age of 21 in all states and a zero tolerance law for drivers under the age of 21 in 30 states, including Alaska. Zero tolerance means that anyone with a BAC level above 0.02 g/dl is considered legally intoxicated (1,12,13).

Almost 50% of teen crash patients who were hospitalized relied on private or automotive insurance to pay their hospital expenses. One hundred victims, or 19.3%, were uninsured. The hospital charges of an additional 26.3% of the patients were billed to a government program. NHTSA estimates that nationally private insurance companies pay 55% of medical costs for hospitalized patients of motor vehicle crashes and the government pays only 23% (14). Alaska has a large Native American population and several military bases, which contribute to a significant role of the federal government in covering the cost of health care in the state.

The cost estimate for teen driver crashes in Alaska for five years, using the CrashCost Program, was over $300 million. The financial burden quickly becomes an issue of public policy when such a large percentage of the cost is reimbursed with public funds.

There were several limitations to this study. A driver who is involved in a crash is not necessarily at fault. For the purpose of this study, every driver involved in a crash is charged with the crash under the assumption that in most cases he or she bears some responsibility, and false positives would occur in both groups equally.

Missing and incorrect data is undoubtedly partly responsible for the inability to link all trauma registry records with traffic crash records. The error rate in data linkage due to the linkage process itself has not been quantified. It is believed, however, that the 31% in non-linked data was largely due to unreported traffic crashes. A comparison of hospital discharge files and police road injury data in Australia resulted in a linkage rate of 64%. The researchers found increased linkage with injury severity and varying linkage rates with different types of crashes (29% for motorcyclists vs. 79% for motor vehicle drivers.) They also noted that the casualties outside the urban area linked less often to a police report than the urban casualties. Their conclusion was that the low linkage rate was largely due to the underreporting of crashes by police (15).

An under reporting of pedestrian injuries was reported by Agran, Castillo and Winn in 1987, in a comparison of police report information with hospital monitoring system information in Orange County, California. It was estimated that police underreported pedestrian injuries by 20%. The researchers also noted that nontraffic incidents were especially underreported, mainly because the police database criteria excludes cases occurring on private property (driveways, sidewalks and parking lots) where a large percentage of pedestrian injuries occur (16). Similarly, Alaska's traffic crash data reporting system excludes incidents on private property, as well as those involving vehicles not customarily used for transport on roads.

Other possible reasons for the under reporting of traffic crashes include lack of police officers in the rural areas, reluctance of crash participants to notify police, and failure of local enforcement personnel to submit investigation forms to the Department of Public Safety.

The mean age of the injured victims of young driver crashes was slightly lower than that of the entire population of injured victims studied (25 vs. 30). Since the CrashCost estimates were based on national averages, the present discounted value of lost productivity for victims of young driver crashes would differ slightly from the value of lost productivity for victims of all crashes. The difference, however, is likely to be minor.

RECOMMENDATIONS

The factors contributing to Alaska's young driver crashes—youth, inexperience, and risk-taking behavior—are analogous to those seen in other states and countries. Currently there is no graduated licensing system in Alaska; however, legislation has been introduced and is currently under consideration during the 1997-98 legislative session. Alaska is also one of few states that does not require any instructional permit prior to obtaining a full privilege license. Graduated licensing has been shown to successfully reduce young driver crashes. It is recommended that Alaska adopt a graduated licensing system that is appropriate for Alaskans, to include the requirement of supervised driving under an instructional permit, a probational driving period, and raising the minimum age for full licensure to 17. The expected result

would be a reduction in injuries and deaths, mitigation of the impact of crashes on Alaska's stretched emergency medical services, and a significant cost savings.

Alaska has a primary safety belt enforcement law for children under age 16 and secondary enforcement for those aged 16 and over. There is a helmet law for motorcyclists under age 18 and all motorcycle passengers. At the least, the primary safety belt law and the helmet law should be expanded to include young drivers through age 20 to protect those drivers at greatest risk. Even more effective are universal laws, i.e. mandated usage for all persons, which have been shown to increase belt usage 10-15% and helmet usage to 100% (10,11).

In the past three years Alaska has enacted two zero tolerance laws for young people under 21 years of age. A minor caught in possession of or consuming alcohol, regardless of motor vehicle involvement, can have his or her driver's license revoked. A minor also can be sited for "driving while intoxicated," for any level of alcohol registered on a breathalyser test. These laws send an important message to young drivers about drinking and driving in a state that has a major problem with alcohol involvement relative to a great variety of injuries. Full commitment by state and local jurisdictions is needed to enforce these and all other traffic safety laws.

ACKNOWLEDGMENTS

This study was based on a grant from the National Highway Traffic Safety Administration (NHTSA), U.S. Department of Transportation. NHTSA has funded this research for the purpose of demonstrating the application and usefulness of linked data.

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HB 213

SFIN

FILE

SENATE FINANCE COMMITTEE REPORT

DATE: 3/31/04

REPORTED OUT
APR 22 2004
SENATE FINANCE COMMITEE

FURTHER:

DATE TURNED IN TO OFFICE: 22 April 2004

Finance Committee considered CS FOR HOUSE BILL NO. 213(FIN)

HB 213 PROVISIONAL DRIVER'S LICENSE

"An Act relating to a provisional driver's license and to issuance of a driver's license; and providing for an effective date."

and recommends:

[✓] be replaced with S CS CS HB 213 (FIN)

[ ] adopt previous _____ CS CS forthcoming (_____)

[ ] attached amendment(s)

[ ] adopt Letter of Intent by _____ Committee

[ ] further referral to _____ Committee

Senate Bill:
[ ] Same Title
[ ] New Title

House Bill:
[✓] Same Title
[ ] Technical Title Change
[ ] New Title w/ SCR #_____

NEW FISCAL NOTE(S):

Department	Date	Fiscal	Indet.	Zero.	FN#

PREVIOUS FISCAL NOTE(S):

Department	Date	Fiscal	Indet.	Zero	FN#
Admin	1/26/04	18.6			#1

[ ] APPROPRIATION - no fiscal note

SIGNATURES AND RECOMMENDATIONS:	DO PASS	DO NOT PASS	NO REC	AMEND
	✓			
			✓	
			✓	
	✓			
	✓			
COCHAIR:			✓	
COCHAIR:	✓			

SENATE FINANCE
COMMITTEE
Amendment Number: #1
Bill Number: HB 213
Sponsor: Wilken Date: 4/22/04
Logged In By: Mindy

23-LS0786\E.2
Luckhaupt
4/20/04

AMENDMENT

Sponsored by
Senator Wilken

OFFERED IN THE HOUSE

TO: CSHB 213(FIN)

Page 2, line 20:

Delete "for the first six months after receiving a provisional driver's license,"

SENATE FINANCE COMMITTEE

4-22/ 2003 COMMITTEE ACTION

Bill Number	HB 213		
Amendment	#1		
Motion	adopt		
Motion by	Wilken		
Objection by	Wilken		
Removed	✓		
Second Objection by			
Committee Member	Y	***Vote***	N
Senator Olson			
Senator Stevens			
Senator Bunde			
Senator Dyson			
Senator Hoffman			
Co-Chair Green			
Co-Chair Wilken			
Tally			
Yea			
Nay			
Absent			
MOTION	Pass		

SENATE CS FOR CS FOR HOUSE BILL NO. 213(FIN)

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-THIRD LEGISLATURE - SECOND SESSION

BY THE SENATE FINANCE COMMITTEE

Offered:
Referred:

Sponsor(s): REPRESENTATIVES WEYHRAUCH, Crawford, Foster, Gara, Seaton, Lynn

SENATORS Wilken, Cowdery, Donley, Ben Stevens, Elton, Wagoner, Dyson

A BILL

FOR AN ACT ENTITLED

"An Act relating to a provisional driver's license and to issuance of a driver's license; and providing for an effective date."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

*** Section 1.** AS 28.15.055 is amended to read:

Sec. 28.15.055. Provisional driver's license. Upon application, the department may issue a provisional driver's license to a person who is at least 16 years of age but not yet 18 years of age if the

(1) person has been licensed under an instruction permit issued under AS 28.15.051 or under the law of another state with substantially similar requirements for at least six months;

(2) person's parent, legal guardian, or employer provides proof satisfactory to the department that the applicant has at least 40 hours of driving experience, including at least 10 hours of driving in progressively challenging circumstances, such as driving in inclement weather and nighttime driving; and

New Text Underlined [DELETED TEXT BRACKETED]

(3) person has not been convicted of a violation of a traffic law within the six months before the application is filed; in this paragraph, "traffic law" has the meaning given to "traffic laws" in AS 28.15.261.

* Sec. 2. AS 28.15.057 is amended to read:

Sec. 28.15.057. Restrictions on driver's license issued to a person under 18. Except as provided under AS 28.15.051, a person who is at least 16 years of age but not yet 18 years of age may not be issued a driver's license unless the person has

(1) been licensed under an instruction permit issued under AS 28.15.051 **or under the law of another state with substantially similar requirements** for at least six months;

(2) [AND HAS] held a valid provisional driver's license issued under AS 28.15.055 for at least **six months; and**

(3) not been convicted of violating a traffic law, or been convicted of violating AS 04.16.050(c), during the six months before applying for a driver's license; in this paragraph, "traffic law" has the meaning given to "traffic laws" in AS 28.15.261 [ONE YEAR].

* Sec. 3. AS 28.15.057 is amended by adding new subsections to read:

(b) A person authorized to drive a motor vehicle under a provisional driver's license issued under AS 28.15.055 may not

[for the first six months after receiving a provisional driver's license] Amend #1

(1) operate a motor vehicle that is carrying any passengers

(A) except a passenger who is a parent, legal guardian, sibling, or a person at least 21 years of age; or

(B) unless at least one of the passengers is a parent, legal guardian, or person at least 21 years of age; or

(2) operate a motor vehicle between the hours of 1:00 a.m. and 5:00 a.m., except when the person is

(A) accompanied by a parent, legal guardian, or a person at least 21 years of age who is licensed to drive the type or class of vehicle being used; or

(B) driving to or from the person's place of employment or within the scope of the person's employment and the driving is along the most

direct available route.

(c) This section does not apply to restricted licenses issued to persons to operate motor vehicles in areas of the state off the road system when operating motor vehicles in those areas.

(d) A person who violates this section is guilty of an infraction.

* **Sec. 4.** This Act takes effect January 1, 2005.

Alaska State Senate

Senate Finance Committee

Official Business

Mail Stop 3100
State Capitol
Juneau, Alaska 99801-1182

FAX COVER SHEET

DATE: 22April2004 TIME: 9:25 am

TO: Legal Services

NUMBER OF PAGES, INCLUDING COVER SHEET: 2

FROM: MINDY ROWLAND
SENATE FINANCE COMMITTEE SECRETARY
PHONE: 465-4935
FAX: 465-2187

NOTES: Final Please
SCS CS HB 213 (FIN)
23-LS0786\E Luckhaupt
plus attached amendment

Call if any questions

Thx
Mindy
#4935

SENATE FINANCE
COMMITTEE
Amendment Number: #2
Bill Number: HB 213
Sponsor: Bunde Date: 4/22/04
Logged In By: Mindy

23-LS0786\E.1
Luckhaupt
4/8/04

AMENDMENT

OFFERED IN THE SENATE BY SENATOR BUNDE

TO: CSHB 213(FIN)

Page 1, following line 3:

Insert a new bill section to read:

"* **Section 1.** AS 28.05.095(e) is amended to read:

(e) Notwithstanding any other provision of law, a peace officer may not stop or detain a motor vehicle to determine compliance with (a) of this section, or issue a citation for a violation of (a) of this section, unless

(1) the driver has a provisional license; or

(2) the peace officer has probable cause to stop or detain the motor vehicle other than for a violation of (a) of this section."

Page 1, line 4:

Delete "**Section 1**"

Insert "**Sec. 2**"

Renumber the following bill sections accordingly.

SENATE FINANCE COMMITTEE

4-22-/ 2003 COMMITTEE ACTION

Bill Number	HB 213		
Amendment	#2		
Motion	adopt		
Motion by	Bunde		
Objection by	Wilken		
Removed	✓		
Second Objection by	Green		
Committee Member	Y	***Vote***	N
Senator Olson			✓
Senator Stevens	✓		
Senator Bunde	✓		
Senator Dyson			✓
Senator Hoffman			✓
Co-Chair Green			✓
Co-Chair Wilken	✓		
Tally			
Yea	3		
Nay	4		
Absent	—		
MOTION	FAIL		

ALASKA STATE LEGISLATURE

Representative Bruce Weyhrauch

HOUSE DISTRICT 4

ALASKA
STATE CAPITOL
JUNEAU, ALASKA
99801-1182

(907) 465-3744
FAX (907) 465-2273

Sponsor Statement

Graduated Driver's License for Teen Drivers

HB 213 (FIN)

Car crashes are the leading cause of death for teenagers in Alaska. While there isn't a silver bullet cure to this utter tragedy, recent studies prove that the Graduated Driver's License system (GDL) is a giant step forward.

HB 213 implements GDL by creating a three-tiered system whereby young drivers pursue their full, unrestricted driver's license. Currently, Alaska only requires a driver under 18 to obtain and hold a learner's permit for 6-months before testing for a driver's license.* Under HB 213, graduated licensing adds several important protections for the novice driver that relate to when they can drive, where they can drive, with whom and how.

I. At age 16, a person may be eligible for a Provisional License when:
- The youth has held a learner's permit for 6 months,
- Their parent certifies that the youth of at least 40 hours of driving experience, including 10 of driving under progressively challenging conditions such as nighttime or inclement weather conditions, and
- The youth has not been convicted for violating a traffic law for at least 6 months before applying.

II. Once the youth holds a Provisional License, they are subject to several limitations for the first **6 months** of driving:
- Driving between 1 am and 5 am is prohibited except:
- Generally no passengers except for:
  - Passengers who are 21 yrs or older or siblings of the teen driver
  - Passengers when accompanied by the driver's parent or legal guardian.

III. 6 months after the issuance of a Provisional License, the youth may apply to the department for an unrestricted license
- *as long they have not been convicted of a traffic offence for at least six months preceding their application.*

~ More ~

Representative _Bruce_Weyhrauch@legis.state.ak.us
www.akrepublicans.org/weyhrauch/

Two important *exceptions* to the Provisional License law:

- A driver with a Provisional License may be eligible for a work permit so that they can drive to or from work or drive during the scope of their employment.
- Driver's issued permits or licenses under the DMV's hardship or off-systems licensing programs are in no way affected by the GDL licensing provisions.

The Graduated Driver's License is a means for the young driver to gain experience on the road while minimizing risks. As the driver gains experience, the provisions are gradually lifted and the youth is eligible for an unrestricted driver's license.

Since the National Transportation Safety Board adopted its graduated driver licensing recommendations in 1993, states have dramatically modified their driver licensing practices. Since 1993, the 38 states have adopted comprehensive GDL licensing system have reported significant reductions in fatality rates of teen drivers and passengers. In California, teen passenger deaths and injuries when 16-year olds are behind the wheel dropped 21 % statewide in 1998 and 1999. These results come two years after passage of California's GDL. Florida, which adopted GDL in 1997, saw a drop of 21 % in the rate teens are involved in accidents.

Research published in October 2001 from Michigan and North Carolina, two states with comprehensive laws that include both an extended learners' permit phase and a nighttime driving restriction reaffirms the effectiveness of graduated licensing. In Michigan, research shows that 16-year olds were 25% less likely to get into a crash; in North Carolina, the risk of a crash dropped by 23 %. Further, in North Carolina, nighttime crashes involving 16 year olds declined by 43% and fatal crashes dropped by 57 %.

~ Give them the time to learn to drive ~

The goal is to limit teen exposure to risky driving situations during their first few months of licensure, a time when their crash rates are extremely high. Parents indicate strong support for GDL and for the specific restrictions. Graduated licensing will save young lives in Alaska, guaranteed!

---

* In 1997, with passage of HB 11, Alaska adopted a mandatory 6-month learner's permit for drivers under 18 yrs old.

Contact: Linda Sylvester
465-4963

Updated: February 26, 2004

3-Tiered System for Driver Licensing under • HB 213

Permit License

Must be 14 yrs old
Must pass written test

Provisional License

Minimum age: 16
Must have had permit for 6 months
Must pass road test
• Parent certification of 40 hrs driving offenses under progressively difficult circumstances
• Must have clean driving record (no convictions for traffic offenses in past 6 months)

While driving with a Provisional License:

• No nite time driving between 1am and 5am
  • Exceptions: kids can get work permit to drive during restricted times, kids can drive with parent or legal guardian
• Generally no passengers
  • Exceptions: passengers who are siblings & adults over 21, ***passengers when accompanied by the driver's parent or legal guardian.***

Unrestricted

• Must have had provisional license for 6 months
• Must have clean driving record (no convictions for traffic in past 6 months.)

Instant Survey Results

Rep. Bruce Weyhrauch

Thanks for taking my survey.

Your answers have been tallied

Thank you for taking the time to answer this questionnaire. Your responses will help my fellow legis'ators and I serve you better. If you have any questions about this survey, please contact me at the link here. Send E-Mail.

Residence?

in District 4		41 42.71
outside District 4	15 15.62	
Outside Juneau area		40 41.67

Total Answers = 96

Are you a licensed driver?

Yes	95 97.94
No 2 2.06	

Total Answers = 97

Gender?

Male	30 31.25
Female	66 68.75

Total Answers = 96

Age?

under 18	5 5.21
19 - 25	1 1.04

26 - 30	8 8.33	
over 30		82 85.42

Total Answers = 96

Do you believe new drivers get better with driving experience?

Yes		92 96.84
No	2 2.11	
Not Sure	1 1.05	

Total Answers = 95

Do you believe teenage passenagers are safer if their teenage driver has at least a minimum amount of driving experience?

Yes		89 92.71
No	5 5.21	
Not Sure	2 2.08	

Total Answers = 96

Do you believe a teenager is safer driver if no other teenage passengers are in the vehicle?

Yes		85 87.63
No	7 7.22	
Not Sure	5 5.15	

Total Answers = 97

Do you believe inexperienced teenage drivers should be restricted from driving between 1:00 a.m. and 5:00 a.m.?

Yes		85 87.63
No	7 7.22	
Not Sure	5 5.15	

Total Answers = 97

Would a provisional drivers license help parents reinforce safe driving habits and limitations on driving for teenage drivers?

Yes		83 86.46
No	4 4.17	
Not Sure	9 9.38	

Total Answers = 96

If a provisional license law was written to allow exceptions to work related driving between 1:00 a.m. and 5:00 a.m. and allowed carrying minor passengers who were siblings, would you support the general restrictions on newly licensed teen drivers while they gain driving experience?

Yes	84	86.60
No	7	7.22
Not Sure	6	6.19

Total Answers = 97

Even though it might place additional training responsibility on parents, would you support the provisional drivers license concept if it would substantially reduce the number of teenage auto accidents, injuries, and deaths as it has done in other states?

Yes	91	93.81
No	2	2.06
Not Sure		4.12

Total Answers = 97

Free form text entrys are recorded, but not displayed.

THE
FOLLOWING
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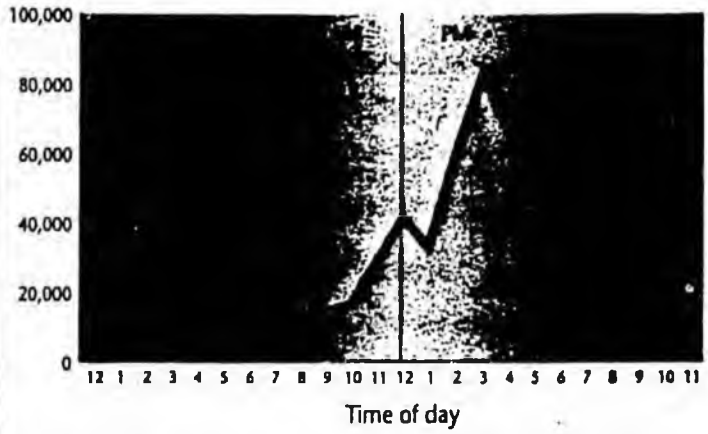
ACCIDENTS PER 1,000 LICENSED DRIVERS, 2000

Teenagers, 16 to 18, are involved in more crashes per 1,000 licensed drivers, than older drivers.

Source: Journal of Safety Research, Vol. 34, No.1, National Safety Council, 2003.

WHEN CAR ACCIDENTS ARE LIKELY TO HAPPEN TO TEENS

Sixteen- to 17-year-olds are involved in more crashes between the hours of midnight and 5 a.m. than during daytime hours.



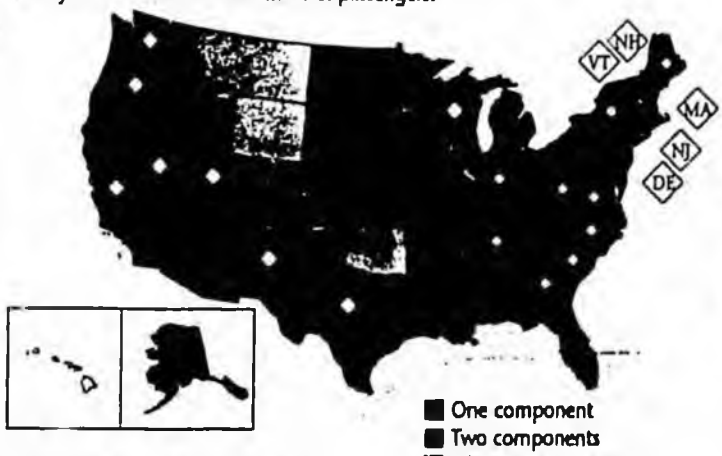
Source: Journal of Safety Research, Vol. 34, No.1, National Safety Council, 2003.

GRADUATED DRIVER LICENSING LAWS

States have been passing laws that ease teens into driving. The three important components of these GDL laws are:

1. A learner permit for at least six months.
2. A required amount of supervised driving.
3. An intermediate permit restricting night driving.

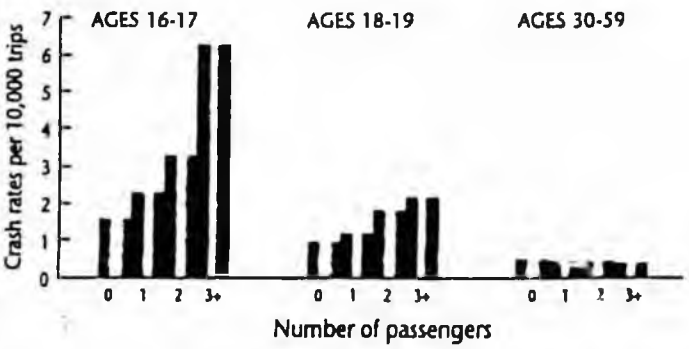
Many states also limit the number of passengers.



Source: National Conference of State Legislatures, December 2002

TEEN DRIVING WITH PASSENGERS

For teen drivers, the presence of passengers results in higher crash rates per 10,000 trips. As the number of passengers increase, so does the accident rate.



Source: Journal of Safety Research, Vol. 34, No.1, National Safety Council, 2003.

Provided by Rep Weyhrauch

S A V I N G T E E N A G E L I V E S

Section I

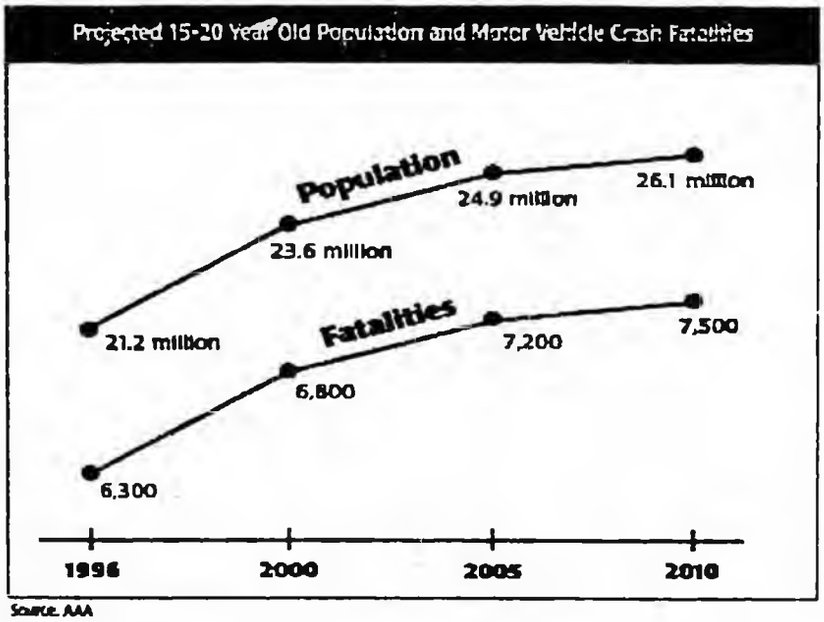
Introduction: The Need for Graduated Driver Licensing

In 1996, 6,319 young people age 15-20 died in motor vehicle crashes. Even though this age group makes up only seven percent of the driving population, they are involved in 14 percent of all traffic fatalities.

The Teen Driving Problem

It has been said many times that children are our most precious resource. While parents throughout time have loved their children enormously, today's parents have taken this saying to heart in more visible ways than previous generations. From the "CautionBaby on Board" window decals of the early 1980s to the ubiquitous "My child is an honor student at" bumper stickers of today, modern parents use the family car as a billboard to showcase their parental pride and their children's accomplishments.

But the same motor vehicle that goes from school to soccer to piano- in which Mom, Dad and the kids seem to livemay also be the vehicle in which our teenagers die. Motor vehicle crashes are the leading cause of death for young people 15 to 20 years of age, causing roughly one-third of all fatalities in this age group. In 1996, 6,319 young people age 15-20 died in motor vehicle crashes. Even though this age group makes up only seven percent of the driving population, they are involved in 14 percent of all traffic fatalities. In 1996, teens were involved in more than two million non-fatal traffic crashes. Based on population projections, these numbers will go up unless we intervene. (See chart below.)



On the basis of miles driven, teenagers are involved in three times as many fatal crashes as are all drivers. Why do young drivers have such poor driving performance? **Three factors work together to make the teen years so deadly for young drivers:**

- **Inexperience**
- **Risk-taking behavior and immaturity**
- **Greater risk exposure**

Inexperience: All young drivers start out with very little knowledge or understanding of the complexities of driving a motor vehicle. Like any other skill, learning to drive well takes a lot of time. Technical ability, good judgment and experience all are needed to properly make the many continuous decisions, small and large, that add up to safe driving. By making it so easy to get a driver licenseby literally handing teenagers the car keys without requiring an extended period of supervised practice-driving timewe are setting them up for the risk of making a fatal mistake.

- **Risk-taking behavior and immaturity:** Adolescent impulsiveness is a natural behavior, but it results in poor driving judgment and participation in high-risk behaviors such as speeding, inattention, drinking and driving, and not using a seat belt. Peer pressure also often encourages risk taking.

Greater risk exposure: Teens often drive at night with other teens in the vehicle, factors that increase crash risk.

Teen drivers are different from other drivers, and their crash experience is different. Compared to other drivers, a higher proportion of teenagers are responsible for their fatal crashes because of their own driving errors:

- A larger percentage of fatal crashes involving teenage drivers are single-vehicle crashes compared to those involving other drivers. In this type of fatal crash, the vehicle usually leaves the road and overturns or hits a roadside object such as a tree or a pole.
- In general, a smaller percentage of teens wear their seat belts compared to other drivers.
- A larger proportion of teen fatal crashes involve speeding, or going too fast for road conditions, compared to other drivers.
- More teen fatal crashes occur when passengersusually other teenagers are in the car than do crashes involving other drivers. Two out of three teens who die as passengers are in vehicles driven by other teenagers.

Crash Involvement Rates by Driver Age

Age	All Crashes Per Million Miles	Fatal Crashes Per 100 Million Miles	All Crashes Per 1,000 Population	Fatal Crashes Per 100,000 Population
16	43	17	84	33
17	30	13	107	46
18	16	8	103	52
19	14	7	95	48
16-19	20	9	96	44
20-24	10	5	81	41
25-29	6	3	64	33
30-34	5	2	51	26
35-39	4	2	47	23
40-44	4	2	42	20
45-49	4	2	39	18
50-54	4	2	34	18
55-59	4	2	31	16
60-64	4	3	27	16
65-69	7	4	27	16
70-74	8	5	25	17
75+	12	12	18	17

Source: Insurance Institute for Highway Safety (Transportation Research Board Circular E-C58 - April 1998)

Effective remedies exist for controlling these risk factors and reducing traffic crash fatalities among young drivers without seriously encroaching on their need to get around. Graduated driver licensing combines a number of measures proven to be effective in fostering safer driving behavior in young drivers. In **Ontario, Canada**, and in **New Zealand**where graduated driver licensing is in effectcrash deaths and injuries for teenage drivers have been reduced. **Maryland**, which has a nighttime driving restriction, and **California** have shown reductions in both fatal crashes and traffic violations among young drivers.

With graduated driver licensing, new drivers typically go through a **three-stage process** that involves their gradual introduction to full driving privileges. By restricting **when** teenagers may drive, and **with whom**, graduated driver licensing allows new drivers to gain much-needed on-the-road **experience** in controlled, lower-risk settings. It also means that a teenager will be a little older and more mature when he or she gains a full, unrestricted license. After the

young driver demonstrates responsible driving behavior, restrictions are systematically lifted until the driver "graduates" to full driving privileges.

This manual explains what graduated driver licensing is and why it is so important for every jurisdiction to take steps towards its implementation.

COMPARISON OF YOUNG AND ADULT DRIVER CRASHES IN ALASKA USING LINKED TRAFFIC CRASH AND HOSPITAL DATA

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COMPARISON OF YOUNG AND ADULT DRIVER CRASHES IN ALASKA USING LINKED TRAFFIC CRASH AND HOSPITAL DATA

ABSTRACT

This report describes the most serious young driver crashes in Alaska for the period 1991 through 1995. Rates, characteristics, and medical and financial out-comes of young driver crashes are compared with that of adult driver crashes. This research project demonstrates the usefulness of data linkage in crash research. Using the Mini Crash Outcome Data Evaluation System (MINICODES), trauma registry hospital discharge data were linked with traffic crash records. The data were analyzed to compare drivers aged 16-20 with drivers aged 21-50 who were involved in a crash resulting in the hospitalization or death of a crash victim. The CrashCost Program was used to estimate costs associated with young driver crashes for the five years.

Young drivers were 2.9 times more likely than adult drivers to be involved in crashes that resulted in the hospitalization of a crash victim, and 2.6 times more likely to be involved in a crash involving a fatality. Human factors were recorded as contributing factors for 68.2% of the young drivers, compared with 55.5% of the adult drivers (P<.0001). The highest hospital charge averages were those incurred by the victims of motor-cycle crashes. Total costs associated with the young driver crashes were estimated to be over $300 million, which resulted in a cost per young licensed driver that was 3.4 times the cost per adult licensed driver.

INTRODUCTION

Motor vehicle crashes are the leading cause of death for young people in the United States aged 15 to 20 years. National statistics reveal that teen drivers are disproportionately involved in crashes. In 1995, young drivers aged 15 to 20 years comprised only 6.7% of the driving population, yet they accounted for 14% of the drivers involved in fatal crashes and 17% of the drivers in police-reported crashes. The losses these crashes represent in terms of human suffering are vast and difficult to quantify. The financial toll has been estimated at $31 billion annually (1).

There are a number of factors that impact the driving performances of teens including age, inexperience, supervised driving, and night driving. An examination of the effects of the different state laws on 15-17 year old driver fatality rates found that the minimum legal driving age and curfew laws had the greatest impact on driver fatality rates (2). Delayed full licensure age, night driving curfews, and supervised driving have all been shown to be effective in mitigating the high crash rate among 16 year olds. In upstate New York, however, where a combination of these strategies are employed, crash involvement rates remained low through age 24, compared with the other northeastern states studied (3).

The National Highway Traffic Safety Administration (NHTSA) recommends that states adopt a graduated licensing system that combines delayed full-privilege licensure, supervised driving, and night driving curfews. An evaluation of the effectiveness of New Zealand's graduated licensing system, in place since 1987, reveals a 23% reduction in crash injuries for the 15 to 19 year old population (4). Eleven states now have some form of graduated licensing. Evaluations of graduated licensing in California, Maryland, and Oregon demonstrated a 5-16% reduction in young driver crashes (5).

Motor vehicle crashes are the leading cause of death for Alaskans aged 16 through 20 and cause almost 50% of the unintentional injury deaths for this age group. Drivers in this age range were involved in 13.1% of police-reported crashes in Alaska during the period 1991 through 1995 while they accounted for only 6.3% of licensed drivers in the state. The crash rate of drivers aged 16 through 20 from 1991 through 1995 was 135.9 crashes per 1,000 drivers, which was 2.4 times the crash rate of drivers aged 21 through 50 (56.9 per 1,000 drivers).

Among 16 through 20 year old drivers, the crash rate in Alaska decreased each year to age 20. The crash rate of 17 year old drivers was 24% lower than that of 16 year old drivers; the 18 year old driver crash rate was 22% lower than that of 17 year old drivers; the 19 year old driver crash rate was 21% lower than that of 18 year old drivers, and, the 20 year old driver crash rate was 12% lower than that of 19 year old drivers.

The purpose of this study is to describe the most severe young driver crashes in Alaska, between 1991 and 1995, in terms of rates, characteristics, and medical and financial outcomes; to make comparisons between youth driver crashes and adult driver crashes; and, to demonstrate the usefulness of data linkage in crash research.

METHODS

Computerized crash records from the Highway Analysis System (HAS) for 1991 through 1995 were obtained from Alaska's Department of Transportation and Public Facilities. This system contains information on motor vehicle crashes on a trafficway, either recorded by police or self-reported. Alaska law requires that any motor vehicle crash which results in death, injury, or property damage of $500 or more must be reported to the Alaska Department of Public Safety. Data include passenger demographics, type of vehicle, type of crash, contributing factors, type of injury, and body region injured. There are up to two contributing factors listed per driver involved in a crash, recorded by the enforcement officer. They fall into four main categories: human error, roadway conditions, environmental elements, and vehicle defects.

Hospital discharge data were extracted from the Alaska Trauma Registry, also for 1991 through 1995. The trauma registry is a statewide information system housed in the Alaska Department of Health and Social Services, which includes detailed data on all injury hospitalizations in the state. Alaska's trauma registry is somewhat unique in that trauma data are collected from all Alaskan acute care hospitals, of which there are 24, and are collected on all patients admitted for 24 hours or more. Data include patient demographics, ambulance service transport and treatment, hospital treatment and length of stay, diagnosis, injury severity, discharge status, charges, and payer billed.

In order to associate circumstances of crashes with corresponding injury outcomes, crash records and trauma registry records were linked using the Mini Crash Outcome Data Evaluation System (MINICODES), developed by the National Association of Governor's Highway Safety Representatives (NAGHSR) with the support of NHTSA. This software relies on a probabilistic linkage methodology which is particularly useful with data that lack identifiers or may contain incomplete or erroneous information. The methodology has been extensively tested and has demonstrated high precision matching (6).

Trauma registry records were considered for linkage by virtue of an external cause of injury code (E Code) in the range 810.0-816.9 and 819.0-819.9, motor vehicle traffic collision injury. E Codes are a coding system with-in the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM), which are routinely entered into the Trauma Registry for each trauma patient. The identifiers used for linkage of the two databases were sex, age, birthdate, geographic region, and probable hospital admission date and time. Additional variables were used to review questionable matches. They consisted of vehicle type, crash type, residence city, crash city, position of injured person in vehicle, anatomical location of injury, and the injury description.

Only the most serious crashes were considered for study, i.e. those involving the hospitalization or death of a crash participant. A **hospital crash** refers to any motor vehicle traffic crash resulting in at least one victim of the crash admitted to a hospital for 24 hours or more. A **fatal crash** refers to any motor vehicle traffic crash resulting in at least one fatality. A **fatality** is defined as a death that occurs as a direct result of a motor vehicle crash within 30 days of the injury or during an acute care hospital stay if the patient was originally hospitalized within 30 days of the injury.

Through linkage of traffic crash data with trauma registry data, two populations were identified for study: drivers in crashes and victims of crashes. Drivers were divided into two groups, those aged 16 through 20 who are referred to as **young drivers**, and those aged 21 through 50, referred to as **adult drivers**. These two age groups were used for comparison to avoid the introduction of older drivers who are involved in crash patterns unique to their group. The victims of the crashes were described in terms of outcome, hospital charge payment source, and costs. The victims were also divided into two groups, those who were victims of young driver crashes and those who were victims of adult driver crashes.

Safety equipment consists of safety belts, safety belts with harnesses, child safety seats, and helmets. **Alcohol involvement** is recorded as a contributing factor on the police record if alcohol use is confirmed by a test or suspected. **Disability** is defined as the expectation that the patient will never be able to return to his or her pre-injury level of function in the judgement of the trauma registrar collecting the information from the medical record file.

Average hospital charges per crash victim were calculated using available trauma registry data. Because not all of the hospitals release this information, hospital charges are missing on about 50% of the trauma registry patients. More inclusive cost estimates were derived using the CrashCost Program obtained from NHTSA. This software program estimates the economic costs of motor vehicle crashes, including direct medical expenses, direct "other" expenses and indirect costs. The CrashCost program also accounts for unreported crashes and adjusts for locality and current economics (7).

The CrashCost estimates were based on Alaska specific data on the number of crash fatalities and the number of patients identified with an Abbreviated Injury Scale (AIS) score of four (severe injury) or five (critical injury). Injuries of an AIS of three or less are not adequately tracked by the trauma registry since only patients admitted to the hospital for one or more days are entered into the database. Therefore, the national ratio based estimates from the CrashCost Program were used to estimate the number of these less severe injuries.

RESULTS

A total of 3,158 trauma registry records were considered for linkage with traffic records, resulting in 2,183 matches, or a 69.1% matching success rate. The linked trauma registry records were compared with the unlinked records to see if the linked records were representative of the unlinked records. There were no significant differences between the groups in sex and age, however, there were significant differences relating to geographic location of crash and type of crash. The crashes among the linked trauma registry records occurred more often in the urban areas (Anchorage, Fairbanks, the Kenai Peninsula, Matanuska-Susitna Borough, and Juneau) ($p < .0001$). There was a significantly smaller percentage of Alaska Natives in this group than in the unlinked data group ($p < .0001$). The mean injury severity was greater among the linked records than among the unlinked records ($p < .05$). The linked data also included less pedestrian injuries ($p < .0001$) and more driver injuries ($p < .0001$) than the unlinked data.

Drivers

Linkage of traffic crash data with trauma registry data resulted in 2,508 drivers identified for their involvement in hospital and fatal crashes: 488 young drivers and 2,020 adult drivers. A comparison of crash involvement rates of young and adult drivers, annualized over the five-year period, is shown in Table 1. Young drivers were 2.9 times more likely to be involved in crashes that resulted in the hospitalization of a crash victim, and 2.6 times more likely to be involved in a crash involving a fatality.

Table 1.
Annualized Young and Adult Driver Involvement Rates in Hospital and Fatal Crashes, Alaska, 1991-1995

	Young Drivers (Age 16-20) N=488		Adult Drivers (Age 21-50) N=2,020		Rate Ratio
	N	Rate*	N	Rate*	
Hospital Crash Involvement	408	3.15	1,659	1.10	2.86
Fatal Crash Involvement	80	0.617	361	0.240	2.57

The young and adult drivers in hospital and fatal crashes are compared in Table 2. The two groups of drivers were similarly distributed by sex and use of safety equipment. Hospital and fatal crashes occurred most often during the summer months (July and August) among both groups of drivers. The time of day of the crash was also similar between the two groups. Adult driver crashes that resulted in serious injury peaked in late afternoon and early evening (25.6%) and young drivers were most at risk between noon and 4 PM (23.4%).

Table 2.
Comparison of Young and Adult Drivers in Hospital and Fatal Crashes by Driver Sex, Safety Equipment Use, and Crash Time, Alaska, 1991-1995

	Young Drivers (Age 16-20) N=488		Adult Drivers (Age 21-50) N=2,020	
	N	Percent	N	Percent
Sex				
Male	324	66.4%	1,441	71.3%
Female	164	33.6%	579	28.7%
Safety Equipment Use				
Recorded	462		1,871	
Used	252	54.5%	1,053	55.9%
Not Used	210	45.5%	818	44.1%
Unrecorded	26		149	
Crash time				
Midnight-4am	90	18.4%	304	15.0%
4am-8am	36	7.4%	187	9.3%
8am-noon	48	9.8%	232	11.5%
noon-4pm	114	23.4%	403	20.0%
4pm-8pm	111	22.7%	517	25.6%
8pm-midnight	89	18.2%	377	18.7%

* Rate per 1,000 licensed drivers

There are up to two contributing factors recorded in the traffic crash database for each driver in a crash. As indicated in Table 3, the percentage of young drivers with a contributing factor due to human error, as recorded by the investigating officer, was significantly higher than that of the adult drivers ($p<.0001$). Conversely, there was a greater percentage of adult drivers with "no contributing factor" recorded to describe their involvement in the crash ($p=.01$).

Table 3.
Comparison of Young and Adult Drivers in Hospital and Fatal Crashes by Contributing Factor, Alaska, 1991-1995

	Percent of Young Drivers with the Contributing Factor N=488		Percent of Adult Drivers with the Contributing Factor N=2,020	
	N	Percent*	N	Percent*
Human	333	68.2%	1,122	55.5% **
Vehicle	22	4.5%	49	2.4%
Environ-mental	23	4.7%	75	3.7%
Roadway	41	8.4%	122	6.0%
None	78	16.0%	551	27.3%***
Unknown	7	1.4%	21	1.0%

* Up to two contributing factors per driver so that column does not equal 100%
** $p < .0001$
*** $p = .01$

The contributing factors attributed to the young and adult drivers are detailed in Table 4. "Unsafe speed," i.e. speed too fast for conditions, was recorded as a contributing factor of the crash for 29.1% of the young drivers. "Alcohol" was believed to be a factor in the crashes of almost 16%. Conversely, alcohol was recorded factor for 24.9% of the adult drivers, with unsafe speed ranking second at 19.9%.

Table 4.
Comparison of Young and Adult Drivers in Hospital or Fatal Crashes by Contributing Factor, Alaska, 1991-1995

	Percent of Young Drivers with the Contributing Factor N=488		Percent of Adult Drivers with the Contributing Factor N=2,020	
	N	Percent*	N	Percent*
Unsafe Speed	142	29.1%	401	19.9%**
Alcohol	76	15.6%	502	24.9%***
Driver Inattention	59	12.1%	142	7.0%
Failure to Yield	45	9.2%	144	7.1%
Driver Inexperience	36	7.4%	28	1.4%
Pavement Slippery	32	6.6%	107	5.3%
Improper Lane Usage/Passing	27	5.5%	76	3.8%
Traffic Control Devise Disregard	24	4.9%	79	3.9%
Other Human Factor	19	3.9%	81	4.0%
Turning Improperly	10	2.0%	35	1.7%
Fell Asleep	9	1.8%	42	2.1%
View Obstructed	8	1.6%	36	1.8%

* Up to two contributing factors per driver so that column does not equal 100%
** $p = .04$
*** $p = .04$

Victims

Table 5 describes the outcomes of the two crash victim groups. There was no significant difference between the victims of the young driver crashes and those of the adult driver crashes in injury severity or length of hospital stay.

Table 5.
Outcomes of Young and Adult Driver Crashes, Alaska, 1991-1995

	Young Driver Crash Victims N=584		Adult Driver Crash Victims N=1,894	
	N		N	
Total Deaths	99		344	
Scene Deaths	67		228	
Hospital Deaths	32		116	
Hospitalizations	517		1,666	
	Mean		Mean	
Injury Severity Score *	10.8		11	
Length of Hospital Stay (days)	6.7		7.6	
	N	Percent	N	Percent
Head Injury	208	40.2%	628	37.7%
Chest Injury	116	22.4%	402	24.1%
Spinal Cord Injury	14	2.7%	43	2.6%
Discharged with Disability	70	13.5%	186	11.2%

* Injury Severity Score is on a scale from 1 to 75, with 75 the most severe. An ISS of 16 or greater defines major trauma.

Average hospital charges for both groups of victims are listed in Table 6. These figures are based on available cost data from the trauma registry. Included are charges by type of vehicle, contributing factor, and use of helmets and safety belts. There were no significant differences between the two groups at the 95% confidence level in any of the categories compared. The highest average charges were those associated with motorcycle crash patients. The average charge for hospitalization for non-helmeted victims of young driver crashes was twice that of the helmeted victims.

Table 6.

Hospital Charges of Young and Adult Driver Crashes by Vehicle Type, Contributing Factor and Safety Equipment Use, Alaska, 1991-1995

	Young Driver Crash Victims, N=517		Adult Driver Crash Victims, N=1,666	
	Mean	Standard Error	Mean	Standard Error
All	$16,269	$ 1,640	$18,174	$ 1,146
Vehicle Type				
Passenger Car	$15,250	$ 1,889	$17,397	$ 1,450
Motorcycle	$27,354	$ 8,344	$30,148	$ 6,279
Pick-Up Truck	$18,482	$ 5,653	$15,599	$ 1,748
Contributing Factor				
Unsafe Speed	$14,344	$ 2,575	$22,778	$ 2,511
Alcohol Use	$19,426	$ 5,614	$18,911	$ 2,184
Driver Inattention	$17,129	$ 4,452	$15,504	$ 2,848
Failure to Yield	$10,201	$ 2,294	$19,062	$ 2,797
Safety Equipment Use				
Safety Equipment Used	$15,543	$ 2,223	$15,943	$ 1,514
Safety Belt	$15,220	$ 2,547	$14,355	$ 1,176
Motorcycle Helmet	$17,309	$ 3,699	$28,323	$ 9,519
No Safety Equipment Used	$17,087	$ 2,512	$19,599	$ 1,774
No Safety Belt	$14,259	$ 2,420	$19,518	$ 2,505
No Helmet	$34,640	$19,672	$28,407	$ 7,029

The distribution of payers billed for hospital expenses associated with the 2,183 hospitalized victims are presented in Table 7. Of the patients involved in the young driver crashes, the largest percentage billed their hospital expenses to private health insurance (33.1%), followed by those who were uninsured (19.3%), and those covered by automotive insurance (14.7%).

Table 7.

Payers Billed for Hospitalization of Victims of Young Driver and Adult Driver Crashes, Alaska, 1991-1995

	Young Driver Crash Victims N=517		Adult Driver Crash Victims N=1,666	
	N	Percent	N	Percent
Private	171	33.1%	472	28.3%
Uninsured	100	19.3%	368	22.1%
Automotive	76	14.7%	225	13.5%
Indian Health Service	50	9.7%	174	10.4%
Medicaid	40	7.7%	110	6.6%
Military	24	4.6%	118	7.1%
Champus	12	2.3%	42	2.5%
Medicare	10	1.9%	48	2.9%
Other/Unknown	34	6.6%	109	6.6%

Table 8 gives estimates of the total costs associated with young and adult driver crashes in Alaska for the five years using the CrashCost Program. Cost per young licensed driver was 3.4 times the cost per adult licensed driver.

Table 8.
Cost Estimates for Young and Adult Driver Crashes, Alaska, 1991-1995 *

	Young Driver Crashes	Adult Driver Crashes
	N	N
Fatalities	99	344
Injuries **	7,648	26,569
Property Damage Only	34,333	119,248
	Cost	Cost
Direct Medical Costs	$ 36,750,837	$126,786,020
Direct Other Costs	$134,898,306	$468,099,927
Indirect Costs	$131,086,293	$454,729,271
Total	$302,735,436	$1,049,615,218
Cost per Licensed Driver	$2,336	$697

* Cost estimates based on NHTSA CrashCost Program
** Injuries include hospitalized and non-hospitalized

DISCUSSION

Alaska is similar to the rest of the nation in that young people are disproportionately involved in motor vehicle crashes, and crash injuries constitute a major health problem among this group. Alaska is, however, distinctive by having the lowest population density of any state, about one person per square mile. There are 13,485 miles of roads but only five of Alaska's urban centers are connected by road. The formidable terrain, isolation, and extreme weather conditions make access to medical care a challenge for residents and visitors alike who are involved in motor vehicle traffic crashes. Teen drivers demonstrated a greater propensity for involvement in the most severe crashes compared with adults, but the involvement rate did not increase significantly with injury severity.

The serious and fatal crashes involving young drivers were more likely attributed to human factors compared with crashes involving adult drivers. These data suggest that immaturity, inexperience and risk-taking behaviors contribute to young driver crashes.

The high percentage of safety belt and helmet nonuse among both of the study populations (44%-46%) is partially explained by the fact that these were the drivers in crashes resulting in the most serious injuries, including injuries to themselves. The Youth Risk Behavior Survey of 1995 reported that about 20% of Alaska high school students surveyed responded that they rarely or never use safety belts. Among those who ride motorcycles, about 40% rarely or never wear helmets (8). In response to the 1995 Alaska Behavioral Risk Factor Survey, 33.1% of adults reported that they did not always use safety belts (9). These percentages are all higher than comparable national percentages. Lap and shoulder belts are 40-50% effective in reducing deaths and 45-55% effective in preventing moderate-to-critical injuries to passenger vehicle occupants (10). NHTSA estimates that helmets are 29% effective in preventing fatal injuries to motorcyclists and in a recent study showed that motorcycle helmets are 67% effective in preventing brain injuries (11).

Alcohol was not the leading contributing factor in young driver crashes as it was for adult driver crashes. This has been reported by other researchers and can be attributed largely to an alcohol purchase age of 21 in all states and a zero tolerance law for drivers under the age of 21 in 30 states, including Alaska. Zero tolerance means that anyone with a BAC level above 0.02 g/dl is considered legally intoxicated (1, 12, 13).

Almost 50% of hospitalized victims of teen driver crashes relied on private or automotive insurance to pay their hospital expenses. One hundred victims, or 19.3%, were uninsured. The hospital charges of an additional 26.3% of the patients were billed to a government program. NHTSA estimates that nationally private insurance

companies pay 55% of medical costs for hospitalized patients of motor vehicle crashes and the government pays only 23% (14). Alaska has a large Native American population and several military bases, which contribute to a significant role of the federal government in covering the cost of medical care in the state.

The highest average costs of hospitalization were incurred by motorcycle crash victims. Unhelmeted crash patients topped the list with an average cost of over $34,000, double that of the helmeted victims in the same group.

Using the CrashCost Program, the estimated costs for teen driver crashes in Alaska for five years was over $300 million. The financial burden quickly becomes an issue of public policy when such a large percentage of the cost is reimbursed with public funds.

There were several limitations to this study. Every driver in a crash was included in the crash involvement rates. Multiple car crashes involving more than one driver added multiple drivers to the statistics, often into both age groups simultaneously. In reality, driver responsibility for crashes is more complex than that, with participants assuming varying degrees of fault. For the purpose of this study, however, driver responsibility was given equal weight and was based on involvement.

Missing and incorrect data is undoubtedly partly responsible for the inability to link all trauma registry records with traffic crash records. The error rate in data linkage due to the linkage process itself has not been quantified. It is believed, however, that the 31% in non-linked data was largely due to unreported traffic crashes. A comparison of hospital discharge files and police road injury data in Australia resulted in a linkage rate of 64%. The researchers found increased linkage with injury severity and varying linkage rates with different types of crashes (29% for motorcyclists vs. 79% for motor vehicle drivers.) They also noted that the casualties outside the urban area linked less often to a police report than the urban casualties. Their conclusion was that the low linkage rate was largely due to the underreporting of crashes by police (15).

An under reporting of pedestrian injuries was reported by Agran, Castillo and Winn in 1987, in a comparison of police report information with hospital monitoring system information in Orange County, California. It was estimated that police underreported pedestrian injuries by 20%. The researchers also noted that nontraffic incidents were especially underreported, mainly because the police database criteria excludes cases occurring on private property (driveways, sidewalks and parking lots) where a large percentage of pedestrian injuries occur (16). Similarly, Alaska's traffic crash data reporting system excludes incidents on private property, as well as those involving vehicles not customarily used for transport on roads.

Other possible reasons for the under reporting of traffic crashes include lack of police officers in the rural areas, reluctance of crash participants to notify police, and failure of local enforcement personnel to submit investigation forms to the Department of Public Safety.

The mean age of the injured victims of young driver crashes was slightly lower than that of the entire population of injured victims studied (25 vs. 30). Since the CrashCost estimates were based on national averages, the present discounted value of lost productivity for victims of young driver crashes would differ slightly from the value of lost productivity for victims of all crashes. The difference, however, is likely to be minor.

RECOMMENDATIONS

The factors contributing to Alaska's young driver crashes – youth, inexperience, and risk-taking behavior – are analogous to those seen in other states and countries. Currently there is no graduated licensing system in Alaska; however, legislation has been introduced and is currently under consideration during the 1997-98 legislative session. Alaska is also one of few states that does not require any instructional permit prior to obtaining a full privilege license. Graduated licensing has been shown to successfully reduce young driver crashes. It is recommended that Alaska adopt a graduated licensing system that is appropriate for Alaskans, to include the requirement of supervised driving under an instructional permit, a probational driving period, and raising the minimum age for full licensure to 17. The expected result would be a reduction in injuries and deaths, mitigation of the impact of crashes on Alaska's stretched emergency medical services, and a significant cost savings.

Alaska has a primary safety belt enforcement law for children under age 16 and secondary enforcement for those aged 16 and over. There is a helmet law for motorcyclists under age 18 and all motorcycle passengers. At the least, the primary safety belt law and the helmet law should be expanded to include young drivers through age 20 to protect those drivers at greatest risk. Even more effective are universal laws, i.e. mandated usage for all persons, which have been shown to increase belt usage 10-15% and helmet usage to 100% (10,11).

In the past three years Alaska has enacted two zero tolerance laws for young people under 21 years of age. A minor caught in possession of or consuming alcohol, regardless of motor vehicle involvement, can have his or her driver's license revoked. A minor also can be cited for "driving while intoxicated," for any level of alcohol registered on a breathalyzer test. These laws send an important message to young drivers about drinking and driving in a state that has a major problem with alcohol involvement relative to a great variety of injuries. Full commitment by state and local jurisdictions is needed to enforce these and all other traffic safety laws

ACKNOWLEDGEMENTS

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1997-2001

Cause of Death	Deaths	% All Deaths
Unintentional injuries	121	44.0%
Motor Vehicle*	69	25.1%
Intentional self-harm (suicide)	88	32.0%
Assault (homicide)	18	6.5%
Total deaths	275	100.0%

2001

Cause of Death	Deaths	% All Deaths
Unintentional injuries	23	43.4%
Motor Vehicle*	13	24.5%
Intentional self-harm (suicide)	16	30.2%
Malignant neoplasms	3	5.7%
Total deaths	53	100.0%

2000

Cause of Death	Deaths	% All Deaths
Unintentional injuries	35	50.0%
Motor Vehicle*	24	34.3%
Intentional self-harm (suicide)	25	35.7%
Assault (homicide)	2	2.9%
Influenza and pneumonia	2	2.9%
Total deaths	70	100.0%

1999

Cause of Death	Deaths	% All Deaths
Unintentional injuries	19	35.2%
Motor Vehicle*	11	20.4%
Intentional self-harm (suicide)	16	29.6%
Assault (homicide)	4	7.4%
Malignant neoplasms	4	7.4%
Total deaths	54	100.0%

1998

Cause of Death	Deaths	% All Deaths
Unintentional injuries	20	45.5%
Motor Vehicle*	7	15.9%
Intentional self-harm (suicide)	18	40.9%
Assault (homicide)	2	4.5%
Total deaths	44	100.0%

1997

Cause of Death	Deaths	% All Deaths
Unintentional injuries	24	44.4%
Motor Vehicle*	14	25.9%
Intentional self-harm (suicide)	13	24.1%
Assault (homicide)	8	14.8%
Total deaths	54	100.0%

National Transportation Safety Board
Washington, D.C. 20594

Office of the Chairman

JAN 27 2004

Honorable Bruce Weyhrauch
Representative
Alaska House of Representatives
State Capitol, Room 102
Juneau, Alaska 99801-1182

Dear Representative Weyhrauch:

I understand that you have introduced House Bill 213, legislation to implement a comprehensive graduated driver licensing system for young novice drivers in Alaska. This measure provides the opportunity for Alaska to prevent the needless loss of many of its young citizens.

Motor vehicle crashes, which account for 40 percent of all teenage deaths, are the leading cause of death for our teenagers. Novice teenage drivers have a very high crash risk. Young drivers, ages 15 to 20, constitute less than 7 percent of all drivers nationwide, yet they are involved in more than 22 percent of all highway fatalities. In Alaska, young drivers constitute a little more than 7 percent of Alaska's licensed drivers, but they are involved in more than 23 percent of the fatalities that occur on Alaska's roads.

There are several similarities in fatal crashes involving young novice drivers. The drivers and passengers frequently are not belted, the cars are loaded with the drivers' peers, and often there is a deadly combination of inexperience and immaturity. When night driving is added to the equation, crash risk increases dramatically.

Young drivers do only 20 percent of their driving at night, but over 50 percent of their crash fatalities occur during nighttime hours. Among young novice drivers, 41 percent of motor vehicle deaths occur between 9:00 p.m. and 6:00 a.m. Nighttime outings tend to be recreational, and even teens who usually follow all the rules can be easily distracted.

Research indicates that nighttime restrictions can reduce young novice driver crashes during restricted hours by up to 70 percent. New York achieved a 69 percent reduction in crashes involving teenage drivers during the hours that the nighttime driving restriction was in effect. Other States have also seen reductions in young novice driver crashes during restricted hours.

Young drivers also pose a greater risk when carrying passengers, especially teen passengers. A study of Kentucky drivers found that young drivers have an increased propensity for causing single-vehicle crashes when traveling with peers and that the propensity for single-vehicle crashes

increases with the number of people in the vehicle. A separate study estimated that a nationwide adoption of passenger restrictions for all 16- and one-third of 17-year-old drivers would result in 60 to 350 fewer deaths per year.

These crashes are preventable, and legislative measures have been successful in other States to reduce both crashes and fatalities. The Safety Board recommended in 1993 that Alaska and other States implement a comprehensive graduated driver licensing system, including a nighttime driving restriction during the driver's first year. In 2002, the Board added a recommendation that young passengers be prohibited from carrying more than one passenger under age 20 unless accompanied by a supervising driver who is at least 21 years old. For additional information about the Board's position on graduated driver licensing and the evidence that supports our recommendations, please see the enclosed fact sheet.

The Safety Board believes an effective combination of tough, fair laws, vigorous enforcement, and intensive, targeted educational campaigns is needed. We are so convinced of the lifesaving benefit of these actions that we have included graduated licensing recommendations on our list of "Most Wanted" safety improvements. Graduated licensing, including a nighttime driving restriction, is one of the most effective actions that the Alaska Legislature can take to save both young lives and the lives of others involved in crashes with young drivers.

I hope that the Alaska legislature will act promptly on House Bill 213 to provide the best possible protection for people when they are riding in a motor vehicle. The Safety Board is available to support your efforts on this and other highway safety initiatives by testifying on legislation or meeting with legislators or advocacy groups. Please contact Mr. Kevin Quinlan, Safety Advocacy Division Chief, at (202) 314-6175, if we can be of assistance to you. For your information, Mr. Quinlan will be in Juneau on February 12, 2004, and would be available to meet with you about your legislation.

Sincerely,

Ellen Engleman Conners
Chairman

Enclosure

cc: Ms. Cindy Cashen, Executive Director
MADD Juneau Chapter

National Transportation Safety Board

Safety Information

Washington, D.C. 20594

GRADUATED DRIVERS LICENSE
FACT SHEET

The Recommendation

- The National Transportation Safety Board recommends enacting laws to provide for a three-stage graduated licensing system for young novice drivers, and restrict young novice drivers with provisional or intermediate licenses (second stage), unless accompanied by a supervising adult driver who is at least 21 years old, from carrying more than one passenger under the age of 20 until they receive an unrestricted license or for at least 6 months (whichever is longer).
- The National Transportation Safety Board recommends enacting laws that prohibit driving by young novice drivers between certain times, especially midnight to 5 a.m.
- The National Transportation Safety Board recommends enacting legislation to prohibit holders of learner's permits and intermediate licenses from using interactive wireless communication devices while driving.

The Problem

- Traffic crashes are the leading cause of death among teenagers today.
- While teen drivers comprise about 6.6% of the driving population, they comprise more than 14% of the drivers involved in fatal crashes. And more than 22% of all highway fatalities occur in crashes involving teen drivers.
- In the past 5 years, more than 16,000 (16,656) people died in crashes involving 14-to -17-year-old drivers.
- 16-year-old drivers driving alone are more than twice as likely to be involved in a fatal crash as older drivers.
- 16-year-old drivers are almost 5 times as likely to be in a crash when traveling with peer passengers.
- Passengers riding with young teen drivers are especially at risk; two-thirds of the fatally injured passengers in these teen driver crashes were teenagers themselves (between ages 15-19).
- The risk of a crash increases greatly with each additional teen passenger riding with a young teen driver.
- Studies from nearly a dozen States show that deaths and serious injuries from traffic crashes involving young drivers declined by as much as 58 percent following enactment of graduated licensing provisions (depending upon the provisions of the law).

Effective Actions

- **Learner's Permit**
  - 6 month minimum holding period (without an at-fault crash or traffic violation)
  - Supervised driving requirement with supervising driver age 21 or older
  - Require seat belt use by all passengers in all seating positions
  - Prohibit driving with any measurable blood alcohol level
  - Prohibit cell phone use by drivers with a learner's permit

- **Intermediate (provisional) Permit**
  - 6 month minimum holding period (without an at-fault crash or traffic violation)
  - Nighttime driving restriction (especially between midnight and 5 a.m.)
  - Teen Passenger restriction (none or 1)
  - Require seat belt use by all passengers in all seating positions
  - Prohibit driving with any measurable blood alcohol level
  - Prohibit cell phone use by drivers with a provisional permit

- **Full licensure**
  - Require seat belt use by all passengers in all seating positions
  - Prohibit driving with any measurable blood alcohol level by all drivers under age 21.

AAA Alaska
(800) 391-4AAA

January 21, 2004

House Transportation Committee
House of Representatives
Alaska State Capitol
Juneau, Alaska 99801-1182

Dear Representative:

Among the very important legislation under consideration this session is House Bill 213, an act to implement Graduated Drivers Licensing. AAA strongly supports this bill and we urge your support as well.

Driving is a skill that is learned by doing. Unfortunately it is also an inherently risky endeavor. The premise of Graduated Drivers Licensing is simple and it works -- extend the learning process and reduce exposure to risk and you'll reduce the number of teen crashes. House Bill 213 does this.

This bill has all the components of the most successful GDL systems. It provides for time to learn – the six-month instruction permit. It provides for behind the wheel experience – the 50 hours of certified driving experience. It provides for responsibility - six months of citation free driving. And finally – it removes two major risk factors for novice drivers – passengers and late night driving.

Please review the enclosed information regarding how injuries, accidents, and fatalities have been reduced with GDL. AAA estimates that through GDL, the state of Alaska over a decade could prevent some 970 injuries, over 3,000 crashes, and save over $21 million dollars.

The time has come for us to change the way we teach our teens to drive, and people are ready. A recent AAA poll shows that 74 percent of Americans support laws limiting teenage passengers who may ride with inexperienced teen drivers, and that 73 percent of adults think that officials should do more to improve the safety of drivers between the ages of 15 to 19.

You have before you an excellent opportunity to protect teen drivers, their passengers, and all on the road. Please support House Bill 213.

Thank you for your consideration.

Sincerely,

Charity Watt Levis

Charity Watt Levis
Manager, Public Relations

enclosures

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