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Thank you for the invitation. I value the members of the Washington Automotive Press not only for your reporting but for your potential to make a difference in broadening public understanding of important public health issues.

I am here representing Transportation Secretary Norm Mineta and the President, both of whom continually stress that the safety and security of the American people is their number one transportation priority. Those of you who know me know I take this priority seriously.

Highway safety is the number one threat to Americans' safety. The issue of how many people die on the nation's highway every year far outweighs so many other concerns that we tend to worry about daily. People who do risk analysis understand that when they leave the house in the morning, they are incredibly more likely to be harmed by a neighbor driving a vehicle than by any other outside force. This is how I view our role at NHTSA – reducing this threat to the American public. Secretary Mineta understands this, and he has been a huge supporter of our efforts.

A great deal has happened since I spoke to this group last year. We've had some very encouraging news regarding highway safety in America; we've also had some disappointing news. I would like to review some of those highlights.

I also have an announcement today. Our National Center for Statistics and Analysis has given us the 2002 preliminary estimates for the *Fatal Analysis Recording System*. These preliminary numbers show that we lost 42,850 people last year in highway crashes, including both occupants and non-occupants. The silver lining here is that we are below 3 million people injured for the first time in several years. I attribute that directly to an improvement in vehicle design and to an increase in the number of people buckling their safety belts.

These 2002 numbers represent a slight increase in fatalities over 2001 and a modest decrease in injuries. Even beyond the injuries and fatalities let's not forget the economic losses we have suffered as a result of motor vehicle crashes. The economic impact nationally was about \$231 billion last year.

But I'd like to focus for a minute on the staggering number of lost lives. When we talk about almost 43,000 lives lost, it's useful to put that number into perspective. Earlier this year when we were doing the *You Drink and Drive*. *You Lose* mobilization, we went to the MCI Center in Washington – a large, indoor sports arena. We lose 17,000

Americans a year in alcohol related fatalities – enough people to almost fill the MCI Center.

Now when we speak of almost 43,000 lives lost each year in highway crashes, try to imagine the national impact of someone taking a bomb and wiping Chapel Hill, North Carolina off the map. Try to imagine the national outrage. Try to imagine this happening every year, year after year. What steps would we, as a society, take to avoid that – to prevent it from happening again to some other city?

The puzzling issue for me is how we, as a country, can continue to have a public health crisis of this magnitude, this pervasive and with this persistence, and not have a sense of outrage to take national action. At what point will our sense of outrage lead us to say we're sick and tired of it, and we're not going to take it anymore?

Those of us who have shouted in the wilderness about this issue for a long time depend on the press to help communicate our message – our outrage. I appreciate those of you who do that – who take the time to get it right, to be accurate, and tell the story in a way that helps Americans.

The number of deaths on our national highways each year is a huge public health emergency. And every time I look at a news report about SARS, I want to stick my head out the window and shout, "Is anybody listening to what we have to say?" Yes, SARS is a problem. Yes, the Corona virus is troubling. And yes, there is no immunization for it; there is no cure for it; but there <u>is</u> supportive care.

Well, we have an immunization for motor vehicle crash injury and death. We know what it is – safety belts. It's getting consumers to choose a safe vehicle and drive sober and control their speed. That's how individuals can immunize themselves against this public health crisis that kills tens of thousands of Americans each year and injures millions more.

Yet we continue to observe that motor vehicle crashes are *the* leading cause of unintentional injury death for every age group, from age 12 months to age 65. When will the public understand this? When will the public finally understand that death and injury from motor vehicle crashes are not an inevitable consequence of living in our society? When will they learn that they don't have to put themselves at such high risk of being killed day after day, or having their child killed, or their spouse killed? It makes no sense.

I'm not the first the carry this message to Americans. Former NHTSA Administrators have been promoting this cause for years. Diane Steed and Ric Martinez have said it. Dr. Bill Haddon started on this theme in the late 60's when he was the first NHTSA Administrator.

We have promoted injury control as a disease model. We know that it has a cure. Yet getting people to take the medicine has proven difficult. Moreover, the failure of too

many people to take responsibility for their actions has cost the nation, both in terms of personal energy and money.

So what can we do differently? How can we change what we had been doing before to be more effective?

It's time we begin to look for accountability where the responsibility lays – the individual. This is an issue of personal responsibility. Individuals must accept responsibility for the consequence of their poor choices.

But public information and education also can help individuals. We can make people aware of their choices. We can help them understand the consequences of making bad choices. We also can ensure that we promote sound science-based public policy.

Unfortunately, for far too long the Federal government's hands have been largely kept from helping affect change in this arena. We're held accountable for certain traffic safety goals that we set out every year to accomplish; yet states hold all the cards. We spend our time begging, cajoling and pleading with state legislators, with traffic enforcement officers, and others to get the job done. This is very frustrating. For too long there has been a legislative prohibition against NHTSA speaking to state legislatures once there's a bill on the floor of the state legislature.

Right now in Florida, there's a primary safety belt law under consideration in the Florida legislature. There is a decision to be made that can save the lives of an additional 173 people a year down there. Yet your Federal government is prohibited from giving data to state lawmakers to enable them to make a scientifically sound decision on this issue. And we're held accountable for the results. Florida had a 75 percent safety belt use after an intensive *Click It or Ticket* campaign last year.

The state could get to 85 percent like that (*snaps fingers*) if these legislators passed the bill. And yet we can't say so.

As a free press, you can say so. And you <u>must</u> say so.

How are we going to do this differently than we've done before? We have a two-pronged approach. First, we're working to place accountability where the responsibility really is. And second, we want to reward good performance.

When the Administration sends its transportation reauthorization package over to Congress, you will see those twin themes throughout. The President's bill would provide significant incentives for states to do the right thing. Again, we're looking for new ways to attack this problem - this same old problem that so many of us have been shouting about for too long in the wilderness.

But it is not simply what we as the Administration can do. Part of the solution lies with what you can do as the automobile press. Based on what we see and read in the press,

one might think that if we simply make vehicles safer, traffic safety problems would be solved. There's so much ink spent on tires and other vehicle parts. Anything dealing with "vehicles" seems to capture media attention.

But less than 10 percent of the safety problem is vehicle-related. Over 90 percent is a people problem. Media coverage, however, is creating a false impression that somehow if we just make vehicles stronger and bigger and better that drivers can somehow escape their personal responsibility to drive sober, to buckle their safety belts and to control their speed. Yet these three factors continue to haunt us; human behavior is responsible for about 90 percent of motor vehicles crashes and fatalities.

During the past year, I have had occasion to sit with and listen to the President talk about certain things. I go to these meeting and madly take notes because I'm very impressed by the man as a leader. He is very clear what he wants and what he wants us to do as his political appointees. The themes that continually come out are that Americans are free to choose. They're free to make choices and if they make bad choices, there should be consequences. This is true for corporate CEO's. It's also true for drivers who may choose to drink and drive or not buckle their safety belts. He also has said that the public cares most about results.

I am committed to fulfilling the President's goals. I have committed NHTSA's resources to getting results.

Unfortunately, some results I would like to see achieved are long in coming. Given my background in emergency medicine, this has been quite a contrast. In emergency medicine, you don't know what's going to happen that day. Sure, you can start to pick up clues even before you step inside. If there are a lot of ambulances out front as you arrive for your workday, you know it's going to be a challenging day. But whatever you do, you know that you can make a difference in the lives of people. Somebody rolls in the door and they're bleeding. You can stop the bleeding. Somebody rolls in, and they're having a heart attack. You usually can turn them around, at least long enough to get them upstairs so they can get some sort of intervention done. You can make a difference each and every day.

Obviously, it's different coming to work in the Federal government. If I want NHTSA to promote change to address a problem today and we begin work today, our efforts may not bear fruit for years to come. And I mean <u>years</u>. So again, this is not about us who are here at NHTSA right now. It's about the mission, and the mission may take a much longer time to accomplish.

Still, how are we going to get there? What are the things we are going to focus on?

We have priorities that we set last year. As I told you at that time, we are focusing primarily on increasing safety belt use, reducing impaired driving, improving our data systems, addressing the issues of rollover crashes and inter-vehicle compatibility. So, I

appointed four integrated project teams to tackle these priorities, and we're going to be publishing their recommendations fairly soon.

Making a difference on the issues of safety belt use and impaired driving requires good policies and enforcement. But too often law enforcement and the potential positive impact of those policies is stymied by a criminal justice system that cannot deal with additional caseloads.

In response to that situation, NHTSA convened a criminal justice summit in November 2002. We brought together experts in criminal justice from various perspectives, including legislative and enforcement. We also had prosecutors and representatives from Departments of Motor Vehicles. The group tackled a variety of issues. Among them: enforcement, prosecution, adjudication, probation, parole, licensing and records, treatment, screening, and intervention.

For example, we set about to figure out what we're going to do about people who get behind the wheel after drinking and whose *average* blood alcohol level in a fatal alcohol-related crash is 0.16. The people at this level are often repeat offenders. Their actions are not social indiscretions. These are people who are drinking to get drunk and who are making a choice to get behind the wheel. It's not enough to have laws and enforcement in place to deal decisively with these people. We need a criminal justice system to follow through so these offenders fully face the consequences of their choices.

Problems with safety belt use and impaired driving benefit from similar solutions over the short term: high visibility enforcement. So you will see that this year we are working with law enforcement agencies nationwide to mobilize action on these issues. And with the financial support from Congress, we are ensuring the word gets out through print, broadcast and electronic media.

For a two-week period around the upcoming Memorial Day holiday, our next big safety belt campaign will take place. You're going to see national *Click It or Ticket* ads with a strong enforcement message. Our efforts are geared largely towards males under age 35. Our data tell us that these are the people we need to reach. It's the portion of non-belt users who are not responding to the laws of logic. But they might respond to the law of the land. If they don't believe they'll be in a crash, they might believe they'll get a ticket.

We also will run a similar campaign about impaired driving. *You Drink and Drive. You Lose* will involve two holiday mobilization periods and use media to carry our message, much as we have in done in the *Click It or Ticket* campaign. This is a highly effective way to bring our message to the country.

During last year's *Click It or Ticket* campaign, we went across the nation and selected 12 states that wanted to participate with us in an enhanced and coordinated outreach, education and enforcement effort. We provided \$8 million worth of paid media in those states and then measured the results. The states that followed the model with high visibility enforcement had an average 9-percentage point jump in safety belt use. The

ones that used paid media alone without an enforcement model or didn't use paid media made no significant gains in safety belt use.

So we understand the power of the media. To that end, we'll take as much earned media as we can get. But clearly, paid media also is an important piece that affects behavior change. Our short-term strategy for increasing safety belt use and decreasing impaired driving relies on both paid and earned media. We need both because we need sustained communications on these complex issues.

There's a nexus between these areas: impaired driving, belt use, rollover and compatibility. None of these issues exists in a vacuum. Rollover crashes are a problem because people are not buckling their safety belts. Seventy two percent of people who die in rollover collisions are unbelted. Again, the laws of physics apply. People who are impaired can't stay on the road. If they're driving in a vehicle with a high center of gravity and they leave the road, the odds of rollover are very high. Unless they're belted, their odds of injury and death are also are very high. If we address one issue, we will help mitigate other concerns. We understand that. We are not attacking these issues in a vacuum.

Rollover and inter-vehicle compatibility are on the list, too. The automotive industry has taken it upon itself to contribute to the compatibility issue on a parallel track with us. Vehicle manufacturers are moving toward their own solutions that are design-based and self-protection based. This is very, very important.

As the fleet changes over time - and it has changed over time - rollover and compatibility will continue to rear their ugly heads, but even higher. About half of all new vehicle sales are light trucks. Light trucks include vans, sport utility vehicles and pickup trucks. There are now more than 79 million of these vehicles on the road, or about 36 percent of all registered vehicles. The percentage will get higher as old passenger cars die off and as new light trucks are being purchased in the marketplace.

I'm sure you're familiar with the compatibility numbers. The bottom line: if you're a passenger car driver, you should have a great interest in what NHTSA and manufacturers are doing with vehicle compatibility. The worst statistic that gets quoted here: for every one fatality in a van, SUV or light truck, there are 26 fatalities among drivers of passenger cars when the passenger car is hit by the larger vehicle. That's a bad number. That's not playing fair. We want more fair play on the highways.

One of our major areas of focus is with rollovers. The early assessment 2002 *FARS* data show that rollover crashes in SUVs and pickup trucks accounted for 53 percent of the increase in total auto fatalities. This validates our concern, but it causes us huge alarm at the same time.

When you go to the auto show, you see that new vehicles are always changing. The marketplace already is addressing these issues. But these vehicles last a long time; vehicles with a high propensity for rollover are already out there in wide use. They will

continue to rollover, and it's absolutely essential that the automakers, the press, the government, *everyone*, talk about the seriousness of wearing one's safety belt when you are in any vehicle - but particularly one that has a high center of gravity and a narrow track width.

The preliminary 2002 Fatality report also highlights other areas of concern. Overall alcohol-related fatalities are up slightly. Deaths in crashes where drivers had low levels of alcohol are down. That suggests a couple of things. First, the educable are continuing to be educated. People who don't have an alcohol problem, those who can control their drinking, are drinking less. They are heeding the warning. This is represented by fewer low-level alcohol crashes.

I'm sure this is also aided by the proliferation of states - now 38 of them - that have .08 laws. We have seen the number of states with .08 laws go from around 14 in 2001 to 38 as of this week. That's a huge and welcome change. If it's portrayed accurately in the press, those changes in law will result in people making better choices before they get behind the wheel of a car.

Data also suggest that the heavy drinker remains the root of the problem. Therefore the solutions for the year - for this decade - are very different from the solutions that we needed back in the 1980's. All of us who were drinking alcohol in the 1980's, I will wager, behave differently today than we did back then. That's the direct result of the educable being educated and social norms changing. What we have to do now is to focus on the problem drinker. We need to get these people into the system so the system can offer help.

When I say help I'm talking in terms of treatment. I'm talking about court interventions such as license revocation that might prevent them from making a bad choice and technology-based solutions, which I hope are on the horizon. We are actively pursuing technology-based solutions to help with this problem that heretofore has been addressed only with behavioral solutions.

The preliminary data report also notes that motorcycle deaths are up for the 5th year in a row. It's a 3 percent increase this year, which is much better than last year's increase. But we continue to be concerned about this ongoing trend in motorcycle fatalities. In 2002 alone the number of motorcycle riders of over age 50 who died increased by 25 percent. That's a big jump in one year, and we're not exactly sure why this is occurring.

Since I came to NHTSA the agency has adopted a comprehensive motorcycle safety plan, developed when we joined forces with the American Motorcyclist Association on a program to reduce impaired riding. Impaired riding continues to be a huge problem with motorcycle fatalities.

Motorcycle fatalities also have an impact on other goals that NHTSA has set for safety. We have set a goal of .53 fatalities per hundred million vehicle miles traveled and alcohol related fatalities by the end of 2004. We're at .63 fatalities now.

For passenger cars and light trucks the rate is about .42 deaths per hundred million miles traveled. For motorcycles, the rate is about 3 times higher. So motorcyclists are pulling the overall numbers up so high that we are not able to meet our goals. We simply have to do something to make motorcycling safer.

My motorcyclist friends tell me that even low levels of alcohol are much more likely to result in disaster when riding a motorcycle than very low levels of alcohol in an enclosed vehicle. So we're on this issue and plan to have some proposed solutions very soon.

The 2002 data also bring some good news. And that's about children. Once again, the deaths of children are down. Deaths for children age 7 and under dropped to the lowest levels in 2002 since record keeping began. This is directly related to the increase in the use of child safety seats and booster seats in this population.

This is a huge victory for public education and scientifically based laws. Ninety nine percent of infants age 12 months and under are restrained in child safety seats - a huge success – and about 94 percent of toddlers. The numbers using restraints continue to drop off from there, however. The lowest point is among teenagers, which is why we are targeting them in this year's *Click It or Ticket* campaign.

As all of you know, Anton's Law was signed by President Bush on December 4^{th.} It will affect children age 4 to 8. In several areas required by the law we're already ahead of the game. We already had an all-position shoulder belt rule in process for a long time, and I hope that will be emerging very shortly. We're in the process of completing work on a 10-year old Hybrid 3 dummy. It has taken years to develop. And we're charged with looking at integrating child safety seats and safety belts.

In addition to our focus on preventing crashes and injuries that result from crashes, NHTSA is also responsible for what happens after a crash. Since 1966, the very first authorization by Congress of the Highway Safety Bureau, we've been charged with trauma system development and EMS advocacy at the Federal level. We continue to do that.

We continue to generate products like the *EMS Curriculum*, the *EMS Agenda for the Future*, the *EMS Research Agenda for the Future* and, due to the events of 2001 forward, we have now been supporting an EMS Federal response to terrorism. We're working with the CDC and with people in the community who have developed courses teaching EMS people how to recognize and prepare for bio-terrorism events.

Finally, there are several items in the President's budget that are important to improve safety. There are some important features in the budget for data improvements. The fifth area of priority that I mentioned is improving our data. We cannot make good decisions without good science. We will be data-driven for as long as I am in this position. We need to get better state traffic data out there. We want states to be able to pinpoint their traffic problems both geographically as well as behaviorally and in other ways. We

actually have a grant program that will go to the states and will help them shore up their state data.

We also have a 10 million dollar crash causation study in the budget - in the President's budget - which will update our 25-year-old data. In fact, we're going to have a new causation study. This is very, very important to me. We want to be able to take off on the infrastructure that we created in a large truck collision study that we just are finishing - will finish this summer - and have those same investigators go out and do a detailed crash causation analysis on vehicles in a large sample all across the country.

So if the budget passes – and by the way there's money to start this in '03 - we're going to start this study in the summer. If the budget passes as the President wants it to, we will have brand new stuff to talk about within a couple of years as to what's causing crashes out there. Lets face it: a lot has changed since the last time a crash causation study was conducted in 1976 in Indiana. I think that our methodology for looking at this will be a huge improvement.

The budget also has \$447 million in state grants in the two key areas of alcohol and safety belts, which we want to be performance based. We want to reward good behavior. We want to reward states that meet the same goals that we have, with belts, alcohol, pedestrian safety, motorcycle safety and bicycle safety.

So our goals are set and they will be something for us to reach, not just during these intermittent mobilizations that we do, but everyday in enforcement, every year in public policy creation, so that we can make some dent in the numbers. That really is the message I wanted to give to you all today. Thank you for hanging in there with me. I'm happy to take any questions that you might have.