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Teens and Driving in California: Summary of Research and Best Practices

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Abstract:

The purpose of this guide is to present the major risk factors associated with teen driving in California and to highlight policy and program strategies that may be influential in reducing risk.

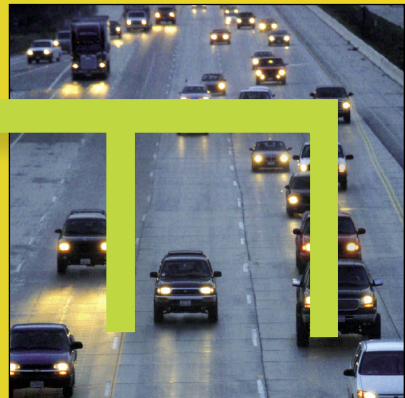
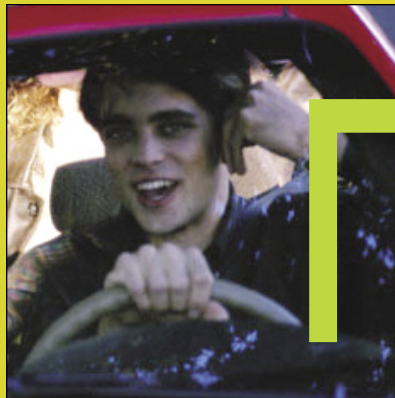
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TEENS AND DRIVING IN CALIFORNIA

Summary of Research and Best Practices



Traffic Safety Center

Setting New Directions in Traffic Safety



Traffic Safety Center

Setting New Directions in Traffic Safety

The mission of the UC Berkeley Traffic Safety Center is to reduce traffic fatalities and injuries through multi-disciplinary collaboration in education, research, and outreach. Our aim is to strengthen the capability of state, county, and local governments, academic institutions, and local community organizations to enhance traffic safety through research, curriculum and material development, outreach, and training for professionals and students.

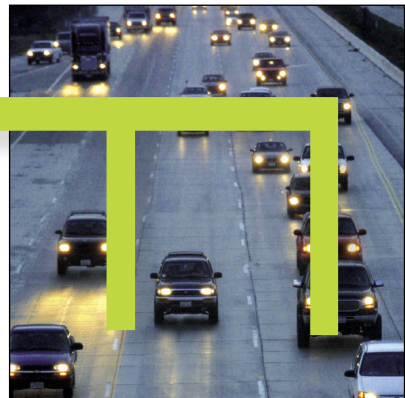
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As part of the project, the Traffic Safety Center collaborated with the Center for Trauma and Injury Prevention Research at the University of California, Irvine School of Medicine to sponsor the workshop "Teens, Driving and Human Development: Research, Policy and Practice" UC Irvine in August 2005. Sixty people attended to hear keynote speaker Jean Thatcher Shope, Research Professor, University of Michigan Transportation Research Institute (UMTRI), outline her model for understanding teen driving behavior and identifying strategies for addressing risk in her talk, "What We Know about Novice Teen Drivers That Could Improve Their Safety."

Dr. Federico Vaca, Associate Professor of Clinical Emergency Medicine and Director, Center for Trauma and Injury Prevention Research at the University of California, Irvine School of Medicine moderated the day, and also presented California data. Along with Dr. Shope, other individuals shared their research, program and policy expertise. They include: Robert Hagge, Research Manager of the California Department of Motor Vehicles (Graduated Driver Licensing program evaluation); Robert Lee, Education Programs Consultant with the California Department of Education (laws related to driver education in CA); Nancy Baer, Manager, Injury Prevention Projects, Contra Costa County Department of Public Health (program development with at-risk teens); Cristy Chen, California Friday Night Live Partnership (teen perspectives on traffic safety and peer pressure); and David Ragland, TSC Director (crash rates).

The presentations by these individuals provided key input to this document.

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PURPOSE OF THIS GUIDE



TEEN TRAFFIC CRASHES ARE A MAJOR CAUSE OF DEATH OF YOUTH IN CALIFORNIA AND THE COUNTRY.

While numbers of crashes, injuries and fatalities have declined for all ages—including teens—over the last few decades, the per driver crash rate among teens is still the highest of any age group.

In the year 2000, the crash rate among teens started increasing after a two-decade decline. This increase has spurred renewed interest in teen traffic safety. Interest has also increased due to a greater understanding of the influences on teen driving behavior, new research highlighting teen driving behavior, and recent evaluations of safety policies and programs.

THE PURPOSE OF THIS GUIDE IS TO PRESENT THE MAJOR RISK FACTORS ASSOCIATED WITH TEEN DRIVING IN CALIFORNIA AND TO HIGHLIGHT POLICY AND PROGRAM STRATEGIES THAT MAY BE INFLUENTIAL IN REDUCING RISK.

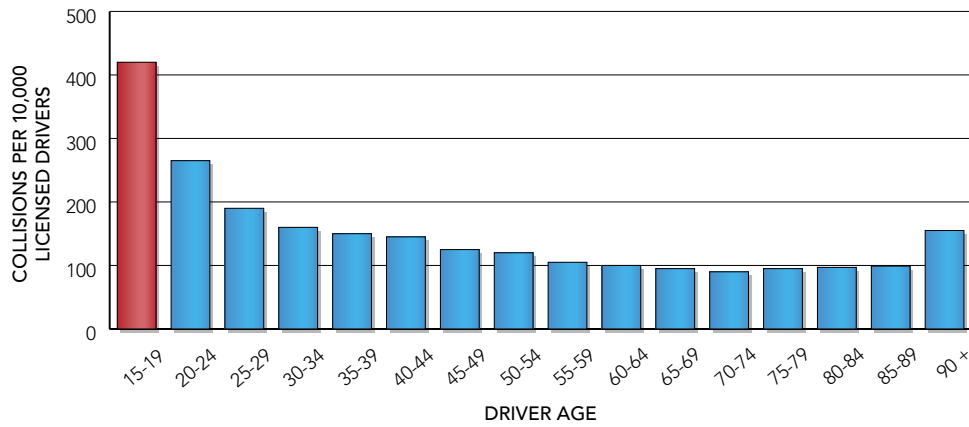
The introduction presents an overview of crash rates among teen drivers in California. In “Teen Driving Behavior,” we summarize what is known about factors associated with teen driving behavior, and possible causes. The section on “Risky Behaviors and Promising or Proven Interventions” describes the most common risky behaviors teens engage in when they are behind the wheel, and suggests interventions that reduce those behaviors. Finally, in “Best Practice Strategies for Policy and Program Development,” we highlight recommendations based on recent research, and provide examples of existing best practices to reduce teens’ driving risk before and after licensure.

PURPOSES

INTRODUCTION: TEEN DRIVERS IN CALIFORNIA

In California, over 900,000 teens age 15-19 possess a driver's license.¹ This prized possession comes with consequences: teens incur the highest traffic injury and fatality rates of any age group, and motor vehicle injury is the leading cause of death for youth in the U.S. Per 10,000 licensed drivers, their crash rate resulting in injury is over three times that of other drivers, as can be seen in Table 1.¹ In California in 2003, drivers ages 15-19 were involved in 543 collisions that resulted in death and 38,083 collisions that resulted in injury.¹

TABLE I
NUMBER OF FATAL/INJURY COLLISIONS
PER 10,000 LICENSED DRIVERS, CALIFORNIA 2003



SOURCE: SWITRS 2003

TEEN DRIVING BEHAVIOR— ROOT CAUSES AND RISKS

A number of issues including personality, maturity, and environmental conditions affect driving behavior. Lack of experience, coupled with risk-taking behavior, strongly influences crash risk.² By understanding the root causes affecting how a teen makes driving decisions, prevention experts can gain a better understanding of how and where to target policies and programs.

This section presents a “roadmap” of behavioral areas that represent a comprehensive understanding of risky driving behavior in teens.

DEVELOPMENT

People of all ages engage in risk taking behavior, but teens are more inclined to risky behavior than adults, as their ability to self-regulate is not fully developed.^{4,5} Risk taking and novelty-seeking among teens are normal and biologically driven elements of self-discovery, and a certain level of risk taking is necessary for proper psychosocial development.⁶

The area of the brain that exercises judgment and controls risky and impulsive behavior, however, is generally not fully developed until sometime between the ages of 18 and 21.^{7,8} Consequently, mature decision-making capabilities are not completely developed at the point most teens obtain their driver’s license. Research has found that even teens that usually show good judgment tend to regress in moments of excitement or when they are under pressure.⁹

PERSONALITY

Although normal development accounts for some risk taking among teens, characteristics of one’s personality determine individual risk-tolerance. High-risk behavior may be more desirable and pleasurable for some teens than others.

Teens who engage in high-risk behaviors have a higher rate of at-fault collision involvement, both as drivers and as passengers.^{10,11} Self-identified personality traits such as aggressiveness, irritability, and impatience are also important predictors of driving risk.¹²

PERCEIVED ENVIRONMENT

The social environment surrounding teens contributes to their perceptions of acceptable driving behaviors, and ultimately affects the decisions they make. Peer, cultural, and community norms contribute to the social environment, as do advertising and other media. Parental monitoring and expectations also play a large role.

Perceptions of the dangers of drinking and driving and the likelihood of enforcement also are involved in how teens drive.¹³ Studies have shown that adolescents generally fear repercussions if they are caught driving under the influence.¹⁴ Each time a teen drives while intoxicated and no negative consequences occur, the perceived danger of such behavior is lowered.¹⁵

WHAT CAUSES TEENS TO DRIVE LIKE THEY DO?

■ DEVELOPMENT:

Teenagers' brains are still developing. Mature judgment and decision-making skills are not in place until age 18-21.

■ PERSONALITY:

Some teens seek out high-risk situations, and risky behavior is associated with a high rate of at-fault collisions for drivers.

■ INFLUENCE OF OTHERS:

Parents, peers, and community and cultural norms influence teen driving behavior.

■ DEMOGRAPHICS:

Younger age, male sex, and non-white ethnicity are all associated with higher risk.³

■ DRIVING EXPERIENCE:

After 6-12 months (or 500-1500 miles) of driving, there is up to a 65% decrease in at-fault crashes.

■ DRIVING ENVIRONMENT:

Factors associated with a high crash rate include nighttime driving, driving with other teen passengers, alcohol and substance use, cell phone use, speeding and driving errors, and driving to/from school.

DEMOGRAPHICS

A number of different demographic characteristics are associated with teen driving behavior and risk, including:

- **AGE:** Younger teens (16-17 years) have a greater risk than older teens (18-19 years). However, the risk is not completely due to age *per se*; the fact that they are newer, less experienced drivers is also a major contributing factor.^{3,16}
- **SEX:** On average, male teens are more likely to speed, pass illegally, and drive while impaired than females. At the same time, males tend to have greater confidence in their driving skills, and see risky driving situations as less hazardous than do female drivers.¹⁷ Males have greater exposure to risk, as they tend to log more miles than female teen drivers, and are more likely than females to be involved in a *fatal* collision.¹⁸

DRIVING ABILITY/EXPERIENCE

The majority of non-fatal crashes seem to result from teens' failure to adapt to different circumstances (such as weather or visibility) rather than what might be viewed as reckless driving or other forms of deliberate risk-taking.¹⁹ It takes time for new drivers to learn to recognize and respond to hazards, view the driving environment holistically, and execute safe driving skills under demanding conditions.^{3,5}

Research shows that teens' crash rates drop with increasing driving experience, whether measured by miles or months. After 6-12 months (or 500-1500 miles) of driving, there is up to a 65% decrease in at-fault crashes.^{5,20,21} (Please see Figure 1) Developmental maturation may also play a part in this decrease.^{21,22}

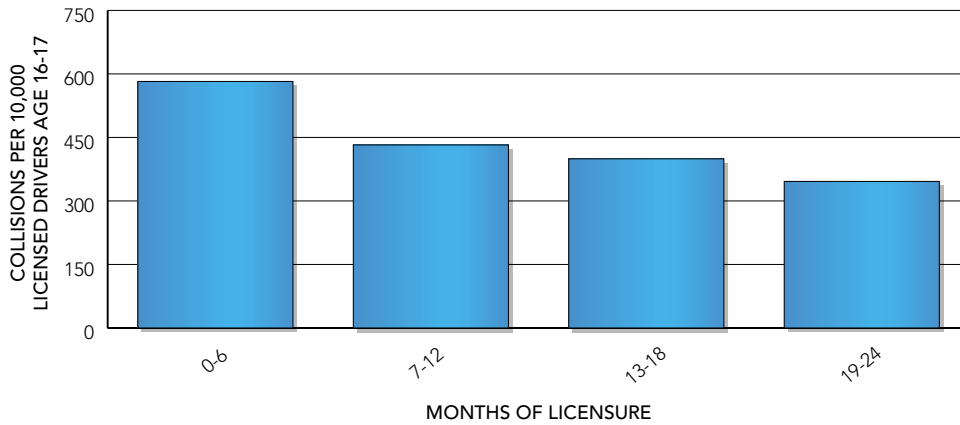
DRIVING ENVIRONMENT

Various aspects of the driving environment can increase crash and injury risk. The primary risk factors facing teens are:

- **NIGHTTIME DRIVING**
- **DRIVING WITH OTHER TEEN PASSENGERS**
- **ALCOHOL AND SUBSTANCE USE**
- **NON-USE OF SAFETY BELTS**
- **DISTRACTIONS WHILE DRIVING (CELL PHONES, MUSIC, ETC.)**
- **SPEEDING AND DRIVING ERRORS**

FIGURE I
NOVICE TEEN DRIVER'S RISK DROPS WITH EXPERIENCE

COLLISION RATE PER 10,000 LICENSED DRIVERS AGE 16-17
 BY MONTHS OF LICENSURE



SOURCE: Mayhew et al., 2003²³

Many of these risk factors occur in combination; for example, safety belt usage is lower when teen passengers are present, and speeding and driving errors may be compounded by use of cell phones or other distractions. Table 2 shows teen driver fatal crashes by type of high risk activity.

TABLE 2
TEEN DRIVERS INVOLVED IN FATAL CRASHES IN CALIFORNIA

	COUNTS	PERCENTAGES
DRIVER AT FAULT	370	68%
DRIVING LATE AT NIGHT (10 PM - 5 AM)	133	24%
DRIVER SPEEDING	79	15%
DRIVER UNBELTED	71	13%
TEEN DRIVER WAS DRINKING	60	11%
OTHER UNSAFE OR IMPROPER DRIVING*	60	11%
DRIVER USING DRUGS	45	8%
FAILURE TO STOP (AT SIGN OR LIGHT)	7	1.3%

*This category includes: improper lane change, improper passing, improper turning, unsafe lane change, following too closely, failure to yield right-of-way (to vehicle or pedestrian)

Categories overlap; hence total to more than 100%.

SOURCE: SWITRS 2001-2003

TEEN DRIVER RISKS AND PROMISING OR PROVEN INTERVENTIONS

It has been observed for decades that teens are more likely to engage in risky driving behaviors than adults.²⁴ This section describes the major risky behaviors that many teens engage in when they are behind the wheel. For each problem area, recommendations are suggested that have been documented as or show promise in decreasing crash rates.



NIGHTTIME DRIVING

THE PROBLEM:

Numerous studies have shown that teens have a much higher rate of fatal nighttime collisions than at any other time. The increased risk of fatal collision among teens at night is due to a combination of inexperience, the inherent difficulty of nighttime driving, and the presence of several possible risk factors. These risk factors include alcohol, fatigue, and recreational driving, and are more likely to be involved in nighttime teen driving than during the day.¹⁸

RECOMMENDATIONS:

- No unsupervised driving allowed during nighttime hours
- Earlier nighttime driving restriction in GDL²⁵
- Increase and enforce required hours of nighttime driving practice
- Greater enforcement of GDL by law enforcement and parents

DRIVING WITH OTHER TEEN PASSENGERS

THE PROBLEM:

Teen drivers carrying one or more teen passengers are more likely to be involved in a fatal collision than those driving alone or with one or more adult passengers.^{3,25} They are also more likely to be at fault in a collision when one or more teen passenger is present than when alone.²⁵ Male teen passengers pose a higher risk than female teens.³ The risk of fatal collisions for male teen drivers decreases when transporting female teen passengers, and the risk is increased when male or female teen drivers transport male teen passengers.¹⁸

RECOMMENDATIONS:

- Teens should not drive with passengers without an adult driver age 25 or older until they receive full licensure
- Teens should not drive with passengers without an adult driver age 25 or older until one year after provisional licensure

NON-USE OF SAFETY BELTS

THE PROBLEM:

Teens are less likely to wear safety belts than adults. One study showed that 46% of teens dropped off at school by their parents are not belted.²⁶ 66% of teens who died in motor vehicle crashes in the U.S. in 2001 were not restrained.²⁷ Teens whose parents use safety belts and remind their children to wear safety belts often are more likely to use safety belts.²⁸ Parental influence appears to be the most important determinant of seat belt use.^{28,29}

RECOMMENDATIONS:

- Incorporate non-use of safety belts as a point of violation in the Graduated Driver Licensing program²⁶
- Highly visible police enforcement of safety belt use³⁰
- Highly publicized safety belt efforts via youth-oriented media³⁰
- Enact stiffer penalties for not wearing safety belt; e.g. higher fines
- Schools should require all students to wear safety belts to and from school functions
- Parents must be model safety belt wearers

ALCOHOL AND DRUG USE

THE PROBLEM:

Impaired driving is a problem in drivers of all ages, especially those who are inexperienced. Driving under the influence of marijuana among teens may be equally prevalent and should be addressed accordingly.³¹ Marijuana use impairs behavioral and cognitive skills, including those related to safe driving.³²⁻³⁵ Use of illicit drugs may also reflect a tolerance for greater risk, also associated with traffic violations and collisions.^{33,35,36} A teen's prior experience with driving while impaired or riding with an impaired driver without collision or apprehension encourages future impaired driving.^{15,31}

RECOMMENDATIONS:

- Prevent teen access to alcohol and drugs
- Start prevention efforts early (in elementary school)
- Increase actual and perceived risk of apprehension
- Increase enforcement of zero-tolerance alcohol and drug laws, including regular and highly visible sobriety checkpoints
- Incorporate school-based programs that include peer-led activities, and outreach to diverse students
- Educate passengers to resist peer pressure to use drugs or alcohol and drive, or ride with a driver who has been drinking or using drugs
- Strengthen the impaired driving component in driver education³⁷
- Encourage communication between parents and teens

COMMENTS:

Prevention programs must not sensationalize the potential negative outcomes of alcohol and drug use, because teens may see this as an overstatement if the teen's own experiences have demonstrated a lack of negative consequences.³⁸

DISTRACTIONS WHILE DRIVING

THE PROBLEM:

A majority of teen drivers report that they engage in behaviors that distract them from driving; e.g., eating or drinking, dialing or talking on the phone, reaching into the glove compartment, or changing a tape/CD or radio station.

The estimated risk of a crash while using cell phones for drivers of all ages is four times higher compared as to when phones are not being used.³⁹ Teen drivers may be at an even higher risk when using cell phones because they are more susceptible to distraction than adult drivers. Hand-free phones may not offer safety advantages over hand-held phones because both are cognitive distractions that prevent the driver from allocating his or her undivided attention on the road.³⁹

RECOMMENDATIONS:

- Incorporate use of cell phones while driving as a point of violation in the Graduated Driver Licensing program
- Parents must model driving without distractions
- Teach teens to take precautionary measures: pre-select CDs, switch cell phones to off position, eat/drink before driving or after getting to destination, review driving directions before heading out, etc.

COMMENTS:

Studies have found that laws prohibiting hand-held cell phone use while driving result in a significant decrease in such use during the first few weeks after the law takes effect.³⁹ However, as in the case of New York, the use of hand-held devices regressed to levels seen before the enactment of law because of the difficulty of enforcement.³⁹

SPEEDING AND DRIVER ERROR

THE PROBLEM:

According to the National Highway Traffic Safety Administration (NHTSA), speeding is involved in 37 percent of all young driver deaths.⁴⁰

RECOMMENDATIONS:

- Include speeding as a violation in the Graduated Driver Licensing program
- Greater enforcement of speeding and aggressive driving laws
- Increase penalties for repeated speeding and aggressive driving violations
- Public information and education campaigns on speeding and driving too fast for conditions

DRIVING TO AND FROM SCHOOL

THE PROBLEM:

The risks of driving to and from school have been indirectly determined using data from normal school travel hours (defined as 6 a.m. to 8:59 a.m. and 2 p.m. to 4:59 p.m. weekdays from September 1 through mid-June). Teens are disproportionately involved in fatal collisions during these hours.⁴¹

Teens are likely to drive with passengers during school travel hours (transporting passengers under age 20 is not permitted without a licensed driver age 25 or older present for the first 12 months of provisional licensure, or until the driver turns 18), which increases risk of collision, and are also more likely to be involved in a lunchtime crash if their school has an open-lunch policy.⁴²

RECOMMENDATIONS:

- Discourage teens from driving to school by, for example, limiting student parking on or near campus
- Provide less risky alternatives, such as the school bus or an adult driver
- Schools should discourage teens from driving off campus during open-lunch hours⁴²

BEST PRACTICE STRATEGIES FOR POLICY AND PROGRAM DEVELOPMENT

Although we cannot accelerate a teen's development, a better understanding of their behavior and choices can help us to provide a supportive and protective environment for our teens, limiting the opportunities for risk-taking.⁶

To do this, new programs and policies need to supplement conventional approaches that focus on providing knowledge and technical instruction. Programs and policies need to incorporate attitudinal, behavioral, and environmental approaches to help teens become safe and responsible drivers.

This section summarizes the evidence on "best practices" for program and policy efforts.



THE FOLLOWING INTERVENTION AREAS ARE DESCRIBED:

- **ENFORCEMENT AND LEGISLATION**
- **GRADUATED DRIVER LICENSING (GDL)**
- **REDUCING IMPAIRED DRIVING**
- **DRIVER EDUCATION**
- **INTEGRATING TECHNOLOGY WITH DRIVER EDUCATION**
- **PARENT INVOLVEMENT**
- **SCHOOL-BASED PREVENTION PROGRAMS**
- **YOUTH OUTREACH**
- **COMMUNITY INVOLVEMENT**
- **COALITION BUILDING**

ENFORCEMENT AND LEGISLATION

Among the most effective strategies to decrease traffic crashes among drivers of all ages are those incorporated into law and fully enforced.⁴³ High-level and visible enforcement shows the extent of importance and seriousness of the law, and also holds out the threat of punishment, leading to higher compliance. Conversely, low-level enforcement may lead to a higher likelihood that the risky behavior will be repeated.⁴³

The use of enforcement and education/publicity together are important. For example, the CLICK IT OR TICKET program of intensive media coverage and enforcement of safety belt laws increased safety belt usage among participating states. However, states that increased enforcement but did not publicize via paid media did not reap as substantial a rise in safety belt use as did states that used both enforcement and paid media.²⁷

GRADUATED DRIVER LICENSING (GDL)

Graduated driver licensing benefits new teen drivers by limiting their exposure to driving situations proven to be particularly dangerous. Teens begin driving with mandated restrictions, which are gradually relaxed as drivers mature and develop greater driving skills. As shown in the chart below, GDL in California restricts drivers under age 18 in terms of nighttime driving and age of passengers, and sets a minimum of 12 months of driving experience before allowing unrestricted driving.

California instituted GDL for 16-17-year-old drivers in 1998. Some research studies found that GDL reduced overall injury collision rates between 17% and 40% and nighttime collision rates by as much as 60%. Some of these studies also found declines in alcohol-related collisions resulting from GDL.⁴⁷⁻⁴⁹ However, a study by the California DMV found that GDL did not significantly reduce overall fatal/injury collisions for this age group.⁵⁰ This study, though, did find that GDL's nighttime and passenger driving restrictions resulted in statistically significant decreases in nighttime collisions (10%) and collisions involving passengers under age 20 (14%).

TARGET RESPONSIBILITY FOR ALCOHOL CONNECTED EMERGENCIES (TRACE)

provides a protocol for officers investigating alcohol-related motor vehicle crashes involving underage drinkers to identify the source of the alcohol. Under the protocol, law enforcement officers will immediately try to determine where the youths obtained or consumed alcohol prior to the event of a fatal or injury crash. The Department of Alcoholic Beverage Control (ABC) is notified if the alcohol was purchased or consumed at an ABC-licensed business establishment. If the incident involving under-aged drinkers results in death or injury, ABC will be notified immediately to take the appropriate enforcement action. <http://www.abc.ca.gov/programs/TRACE.pdf>

CALIFORNIA OFFICE OF TRAFFIC SAFETY SOBRIETY CHECKPOINT MINI-GRANT PROGRAM

provides funding for law enforcement agencies to hold checkpoints. Sobriety checkpoints, especially when supported by media coverage, have been found to reduce alcohol-related crashes, which killed 1,274 people and injured 20,638 more in California in 2003.¹ Sobriety checkpoints reduce DUI by increasing drivers' perceived risk of arrest. Media coverage supports this intervention by publicizing this increased risk.⁴⁴ www.ots.ca.gov.

THE OCCUPANT PROTECTION SELECTIVE TRAFFIC ENFORCEMENT PROGRAMS (STEPS)

are a proven method to change drivers' safety belt use behavior quickly, and positive effects have been documented in Canada, Europe, and the United States. These programs feature periods of highly visible safety belt enforcement campaigns combined with extensive media support.^{45,46}

CALIFORNIA GRADUATED DRIVER LICENSING (GDL) RESTRICTIONS FOR TEENS – VEHICLE CODE 12814.6

GDL LICENSE TYPE AND CONDITIONS

STAGE I: LEARNER'S PERMIT

- Must be at least age 15 yrs, 6 months
- Must pass vision and written test
- Must drive with licensed driver age 25 or older
- Must have completed a driver education course
- Must undertake 50 hours of driving practice, including 10 at night
- Permit must be held for at least six months
- Must maintain clean driving record

STAGE II: PROVISIONAL LICENSE

- Must be at least 16 years old, and under 18 years old
- Must complete behind-the-wheel training and pass on-road test
- May drive with no adult present
- No passengers under age 20 for 1st 12 months, unless a licensed driver age 25 or older is present (with some exceptions)
- No driving between 11:00 pm and 5:00 am for first 12 months, unless a licensed driver age 25 or older is present
- Must be held for at least 12 months, or until age 18
- Must maintain clean driving record

STAGE III: FULL LICENSE

- Must be at least age 18
- Must have no outstanding DMV or court-ordered restrictions, suspensions or probation
- May drive without restrictions

Some of the benefits of GDL are: it delays licensure and reduces the amount of driving; it allows for more on-the-road experience with reduced risk factors; and it accelerates sanctioning for points on the driving record. Research has not proven that benefits of current GDL programs extend beyond full licensure.⁴⁹

IMPROVING GDL

GDL could be improved by the following:

- **ENSURING RESTRICTIONS OF GDL ARE ENFORCEABLE AND ARE ENFORCED** by ensuring that law enforcement officers are knowledgeable about GDL restrictions and able to easily identify those driving with a restricted license. High visibility traffic enforcement is crucial in deterring violations of restrictions.^{50,51}
- **ENCOURAGING COMPLIANCE** through education, enforcement, media campaigns, school involvement, and especially parental involvement⁵²⁻⁵⁵
- **COORDINATE DRIVER EDUCATION** components with the phases of the GDL
- **IMPROVE THE BEHIND-THE-WHEEL TESTING PROCESS** to better assess driving skills

- **COUNT VIOLATIONS OF GDL RESTRICTIONS AS POINTS** on the driving record, and accelerate sanctions for points on the driving record
- **STRENGTHEN CONSEQUENCES OF VIOLATIONS** by prohibiting teens from advancing to unrestricted licensure if they have a point of violation on their driving record⁵⁶
- **RESTRICT CELL PHONE USE AND EXTEND NIGHTTIME DRIVING RESTRICTION HOURS** during provisional licensure^{18,39}

REDUCING IMPAIRED DRIVING

Prevention plays a large role in addressing impaired driving. Teens who delay starting to drink alcohol are less likely to develop dependence in their lifetime.⁵⁷ A large number of proscriptive measures have already been instituted, including the criminalization of drugs, a minimum drinking age, and strict fines for establishments or individuals that are found to provide alcohol to minors. Further gains may be possible through providing additional training or disincentives for people who provide alcohol to minors.³⁷

Preventing teens from drinking alcohol and using drugs can also be addressed through changing social attitudes about alcohol and drug consumption, as teen substance use is affected by the attitudes of parents, schools and communities. Attitudes among teens—either for or against drinking—may have the greatest impact on drinking habits among their peers. Comprehensive community projects which have reduced youth drinking and alcohol-related problems typically bring together schools, health, law enforcement, alcohol sellers, parents, youth, and citizen organizations to focus on school-based programs, law enforcement, media, and other types of interventions.⁵⁸

SCHOOL-BASED DRIVER EDUCATION PROVIDES A KEY OPPORTUNITY FOR REACHING YOUTH WITH MESSAGES ABOUT IMPAIRED DRIVING.³⁷ CALIFORNIA CODE REQUIRES THAT INFORMATION ABOUT IMPAIRED DRIVING BE PROVIDED IN DRIVER EDUCATION, BUT DOES NOT SPECIFY TIME ALLOTMENT OR REQUIRED CURRICULUM.³⁷

DRIVER EDUCATION

The intended safety mission of driver education is to help teens perform safely as they become more mature and experienced drivers and to reduce the crash risk of teens during their first few years of driving.⁵⁹ However, it is not certain how effective driver education programs are in achieving these safety goals. While some evaluations have shown that driver education programs produce better drivers,⁶⁰ other evaluations have shown that driver education makes no difference in crash rates among young drivers.^{20,61} Currently, driver education is mandated in California post secondary public schools; however, it is only provided by one-third of these schools.⁶²

Some of the reasons why traditional driver education does not appear to affect the teenage crash rate may include the following:

- It produces higher numbers of younger teen drivers
- There are too few hours to adequately teach the knowledge and skills critical for safe driving
- It generally does not address lifestyle issues such as risk-taking
- It tends not to motivate students to use safety skills acquired
- It may foster overconfidence in students
- Driver education schools and their courses are not standardized or evaluated for consistency or quality.⁶²

TECHNOLOGY-BASED PROGRAMS FOR TEENS:

COMPUTER PROGRAMS:

- **DriversEd.com** provides an online Driver's Ed for Teens course approved by the California Department of Motor Vehicles. This course fulfills 30-hour classroom course requirements, readying students for behind-the-wheel training. <http://driversed.com>
- The AAA Foundation for Driver Safety's **Driver-ZED** DVD puts teens in the virtual driver's seat to navigate more than 80 live-action scenarios in a variety of environments, such as driving in the city and highways. The program teaches participants to identify, assess, and react to a wide range of potential risks. www.driverzed.org

SIMULATORS:

- **Simulator Systems International** has developed several simulator models and accompanying curriculum that are used in several accredited driver training programs in California. Drivers can experience the effects of driving while impaired, as well as driving in various weather and traffic conditions. <http://www.simulatorsystems.com>
- **I-Sim** was developed by **GE Driver Development** as modular driving simulator for training use by law enforcement as well as by accredited driving schools. <http://www.cefcorp.com/driverdev>

Increasing parental involvement in driver education may help reduce the number of crashes among teens.⁶³ In addition to focusing on knowledge and skill development, appropriate driver education should address social influences on driving.⁵⁹ Competency-based programs that concentrate on the evaluation of teen performance and train teens according to their varying levels of knowledge and skills may have some advantage.⁵⁹ Continuing post-licensure education may be an integral part of creating safer teen drivers and can be coordinated with the phases of GDL.

IT IS ESSENTIAL THAT THE FIELD OF DRIVER EDUCATION, ESPECIALLY THE INCREASINGLY POPULAR INTERNET-BASED DRIVING SCHOOLS, BE BETTER REGULATED AND MORE RIGOROUSLY ENFORCED BY THE STATE.

INTEGRATING TECHNOLOGY WITH DRIVER EDUCATION

Increasingly sophisticated technologies are being developed that have potential use in driver education. Some traffic safety researchers are suggesting that computer-based driver education has a role in increasing student's knowledge and skills.⁶⁴ These technologies use interactive software to provide computer-based home study instruction as well as to enable teen drivers to learn safe driving skills in a simulated environment where errors do not have damaging consequences. One such program, Risk Awareness and Perception Training (RAPT), focuses on increasing young driver awareness of hazards on the road in a variety of scenarios.⁶⁵ RAPT has proven to be effective at increasing drivers' detection of hidden risks, both in a simulated driving environment and on the road, and these results were lasting.⁶⁵ More research is needed to determine the effectiveness of computer-based programs at reducing teen crash risk.⁶⁴

Simulators go beyond interactive computer software by offering novice drivers a more realistic driving environment. Rather than controlling the program through a keyboard and mouse, as is done with interactive computer programs, simulators use devices such as steering wheels, foot pedals or large screens through which the user can engage with the scenario. Simulators expose teens to complex and hazardous traffic scenarios in a more realistic environment, without putting lives at risk. They may be particularly useful for practicing driving tasks that involve sensory-perceptual, psychomotor, cognitive, and decision-making skills.⁶⁶

One limit of simulators is that a portion of users may experience “simulator sickness,” a type of motion sickness experienced in virtual environments with possible symptoms including dizziness, nausea, vomiting, blurred vision, and confusion.⁶⁷ Simulator sickness prohibits some drivers from using simulators, but also influences driving performance in those who can tolerate it, by affecting subjects physically and psychologically.⁶⁷

PARENTAL INVOLVEMENT

PARENTS HAVE SIGNIFICANT OPPORTUNITIES TO SHAPE THEIR TEENS’ DRIVING HABITS BECAUSE THEY ARE TYPICALLY INVOLVED IN THEIR TEENS’ DRIVING FROM THE BEGINNING, TEACHING THEM TO DRIVE AND CONTROLLING THEIR ACCESS TO VEHICLES.⁶⁶

Appropriate parenting practices—such as parental monitoring, behavioral control, and restrictions on driving—are related to lower levels of risky driving behavior, traffic citations and injuries among newly licensed teen drivers.^{53,68} Teens with low parental monitoring are three times more likely to engage in high-risk driving behavior.⁶⁹

Ultimately, parents need to understand that driving is a privilege, and they have the right and obligation to stop their teens from driving if they are not confident about the teen’s driving habits and level of responsibility. Parental involvement throughout the permit, licensing, and post-licensing phases is very important.⁵⁴ Unfortunately, research shows that many parents are less involved than they should be.^{52,55}

One intervention promoting parental involvement in the teen driving experience is the promising Checkpoints Program, currently being evaluated by scientists at the National Institute of Child Health and Human Development (NICHD). The main component of the program is a written agreement between parent and teen establishing driving rules for the teen driver in the first year after licensure, and consequences for violating these rules. This agreement is augmented by persuasive educational videos and newsletters. Analysis of the effect of the Checkpoints Program on Connecticut teen drivers demonstrates that passive persuasion methods can positively influence parental driving restrictions. There was a decrease in risky driving behavior and traffic violations, but not crashes, among teens participating in the program.⁷⁰

It is also crucial for parents to be good driver models for their teens.⁶⁸ Perhaps not surprisingly, research has shown that there is a strong relationship between parents’ and teens’ driving behavior.⁷¹ Parent education programs should teach parents’ a range of strategies to make them better driving instructors, more effective enforcers on setting limits on their teens’ driving, and better communicators.⁷² (See Appendix 2: Resources for Youth, Parents, and Educators for sample programs for parents.)

SCHOOL-BASED PREVENTION PROGRAMS

Despite the fact that schools are an ideal setting in which to consistently integrate traffic safety concepts and 97% of schools have substance abuse prevention programs, school-based programs alone are generally not very effective at reducing impaired driving or riding with an impaired driver.⁷³ A systematic review of school-based prevention programs by Elder, et al. highlights the need to redesign program content and delivery using an evidence-based approach.⁷³ The review found that the most effective school-based programs focus on resisting social influences and understanding the consequences of alcohol and drug use and driving. Additionally, programs involving peers in delivery rather than instructors alone, and those that are highly interactive are more effective.⁷³

YOUTH OUTREACH

Teens can reach out to teens best; they can most effectively change attitudes and create dialogue among their peers. Therefore, teen involvement and leadership are crucial to any program hoping to make improve teen traffic safety. In fact, studies show that peer-only program delivery is more effective than peer-teacher or teacher-only delivery. The benefits of peer organizations include personal growth, social support, stronger sense of community, and increased knowledge of and access to alcohol-free events.⁷³ (See Appendix 2: Peer Education & Outreach Programs)

Ideally, school-based programs should reach students well before they have started driving and before they have fully shaped their views and attitudes about traffic safety and driving.⁷⁴ Programs have been developed for use as early as 1st grade. Traffic safety concepts can also be incorporated into other school subjects such as physics, math, social studies, health education, and physical education at little or no cost.⁷⁴ The CHP and other groups have developed driver education programs that are available to schools in the state at little or no cost. (See Appendix 2: Resources for Youth, Parents, and Educators)

It is critical to remember that school-based prevention programs are more effective when they are supplemented by community-level activities such as media, outreach, and policy change.⁷³ Initial evaluations of some community-based educational/outreach programs have yielded encouraging results.⁴³ (See Appendix 2: Resources for Youth, Parents, and Educators for examples)

■ **PHYSICIANS** can play an integral role in advocating traffic safety from a very young age through the time teens finish high school. Pediatricians can use office visits to promote proper practices, such as using safety belts and not driving while intoxicated.⁷⁵ The **American Medical Association** has developed **Guidelines for Adolescent Preventive Services** which provides information on office-based prevention strategies for teen patients.⁷⁶ Pediatricians can also provide references to other programs when necessary, and are available as a resource for parents having trouble with their adolescents.⁷⁷

COALITION BUILDING AND COMMUNITY INVOLVEMENT

There has been an increase in collaboration between advocacy organizations, parents and corporate partners to tackle the teen driver problem, and research shows that this collaboration increases the effectiveness and endurance of teen driver safety programs.^{24,30} Teens have said that safe-driving messages would have more impact if they came from or are linked to people in their own communities. Community coalitions and task forces have been used to promote media and public awareness of enforcement programs, such as sobriety checkpoints (see section on Enforcement and Legislation above), and to target environmental approaches to traffic safety; e.g., zoning that allows liquor outlets to be sited near schools.

Groups that can be involved in collaborations are:

- **ENFORCEMENT**
- **MEDIA**
- **SCHOOLS**
- **TRANSPORTATION ORGANIZATIONS (TAXI COMPANIES, TRANSIT, AUTOMOBILE MANUFACTURERS)**
- **HEALTH GROUPS (PUBLIC HEALTH, CLINICAL/MEDICAL PROFESSIONALS)**
- **COURTS**
- **RELIGIOUS ORGANIZATIONS**
- **COMMUNITY-BASED YOUTH ORGANIZATIONS**
- **BUSINESSES (INSURANCE COMPANIES, RESTAURANTS, COMMUNITY BUSINESSES)**
- **SERVICE ORGANIZATIONS**



APPENDIX I: BEST PRACTICES GUIDES ON RELATED TOPICS

This appendix recommends a number of best practices guides that are relevant to issues surrounding teen drivers, such as underage drinking, occupant safety, youth development, and community coalition building. These guides, while not focused specifically on teen drivers, may be useful to organizations wishing to impact teenage driving behavior.

GUIDE TO COMMUNITY PREVENTIVE SERVICES: SYSTEMATIC REVIEWS AND RECOMMENDATIONS

<http://www.thecommunityguide.org/mvoi/Motor-Vehicles.pdf>

In 1996, the United States Centers for Disease Control formed a Task Force to rank the effectiveness of safety belt, child passenger safety, and DUI interventions, and to offer recommendations to community prevention service providers. This publication summarizes that research and is useful in identifying interventions that are effective in preventing injury from motor vehicle crashes.

COMMUNITY HOW-TO GUIDES ON UNDERAGE DRINKING PREVENTION

http://www.nhtsa.dot.gov/people/injury/alcohol/Community%20Guides%20HTML/Guides_index.html

These guides, developed by the National Association of Governors' Highway Safety Representatives, are brief, easy-to-read, and easy-to-use guides to help cities, counties, and neighborhoods plan and implement comprehensive underage drinking prevention programs. A case study of a model community underage drinking prevention program is included.

IMPLEMENTING BEST AND PROMISING PRACTICE, CENTER FOR SUBSTANCE ABUSE PREVENTION

<http://captus.samhsa.gov/Western/resources/bp/index.cfm>

The Center for Substance Abuse Prevention's Centers for the Application of Prevention Technologies provides a resource page on how to build a successful prevention program. The information includes guiding principles, identifies best, promising, and unproven practices and gives examples of prevention programs and strategies that are based on previous evaluations.

KANSAS UNIVERSITY COMMUNITY TOOL BOX: BEST PROCESSES AND PRACTICES THAT PROMOTE COMMUNITY CHANGE AND IMPROVEMENT

http://ctb.ku.edu/tools/bp/en/best_processes.jsp, http://ctb.ku.edu/tools/bp/en/tools_bp_sub_section_37.jsp

The Community Toolbox gives advice on how to examine and implement best processes and practices to increase the effectiveness of interventions and promote community change.

PREVENTING PROBLEMS RELATED TO ALCOHOL AVAILABILITY: ENVIRONMENTAL APPROACHES

<http://www.health.org/govpubs/PHD822/aar.aspx>

This reference guide summarizes state-of-the-art approaches and interventions designed to reinforce the role of communities in preventing substance abuse and alcohol-related problems. The guide assesses environmental approaches, including limiting availability to underage youth, raising alcohol taxes and prices, responsible beverage service, and others. The guide is published by the Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Prevention, DHHS Publication No. (SMA) 99-3298.

STRATEGIES FOR SUCCESS: COMBATING JUVENILE DUI

<http://www.nhtsa.dot.gov/people/injury/alcohol/juveniledui/part1/index.HTML>

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) and National Highway Traffic Safety Administration (NHTSA) have collaborated to develop this guide, which empowers criminal justice professionals to take the lead in planning a coordinated response to alcohol-related negligence, especially as it links to traffic offenses. This publication includes short descriptions of innovative programs targeted toward preventing juveniles from impaired driving and contains policies, procedures, press releases, and other resources to facilitate implementation of the program.

GROWING ABSOLUTELY FANTASTIC YOUTH: A GUIDE TO BEST PRACTICES IN HEALTHY YOUTH DEVELOPMENT


<http://allaboutkids.umn.edu/kdwbfvc/Fantastic%20Youth%20Book.pdf>

This guide of best practices for promoting health among families and communities is written for legislators, policymakers, grantors and grantees, and agencies that serve youth. It addresses the role of schools, families, and communities in promoting healthy youth development, and using research to contribute to program development.

DEVELOPING EFFECTIVE COALITIONS: AN EIGHT STEP GUIDE

<http://preventioninstitute.org/pdf/eightstep.pdf>

The Prevention Institute, a nonprofit national center that focuses on primary prevention through community-level intervention has published this guide, which outlines steps to building coalitions to target public health projects.



APPENDIX 2: SAMPLE PROGRAMS IN CALIFORNIA

RESOURCES FOR YOUTH, PARENTS, AND EDUCATORS:

THE CALIFORNIA DEPARTMENT OF MOTOR VEHICLES maintains a website with comprehensive information for teen drivers about the safety hazards associated with driving, especially among new drivers. The site also provides details on obtaining a permit or license and the restrictions included in the GDL.

<http://www.dmv.ca.gov/teenweb/>

THE NATIONAL SAFETY CENTER has developed a **FAMILY GUIDE TO TEEN DRIVER SAFETY** that provides parents with effective strategies to help enforce the rules of the graduated driving license.

<http://www.nsc.org/issues/teendriving/guide.htm>

PROTECTING YOU/PROTECTING ME was developed by **MADD** to reduce alcohol-related injury and death in youth, and is recognized by the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA) as a Model Program. **PY/PM** teaches vehicle safety skills to students starting in 1st grade, with an emphasis on risks associated with alcohol use. Multimedia classroom activities include role-play, small group discussion, art, and music. These activities are reinforced by employing peer-leadership and parental involvement. **PY/PM** has proven effective at improving the vehicle safety skills of elementary school students.

www.MADD.org/pypm

COMMUNITY TRIALS INTERVENTION TO REDUCE HIGH-RISK DRINKING (RHRD) is a SAMHSA Model Program developed by the Prevention Research Center, a division of the Pacific Institute for Research and Evaluation. **RHRD** is designed to decrease alcohol abuse and related problems among people of all ages using environmental interventions. This community-based program has proven effective at reducing alcohol access and use and impaired driving, and at increasing enforcement and awareness of DUI laws.

<http://www.pire.org/communitytrials/index.htm>

The **CALIFORNIA HIGHWAY PATROL** created the **START SMART PROGRAM**, a basic driver safety class taught by CHP officers. Teens aged 15-19 attend the program with their parent(s) or guardian and learn about collision risk and avoidance and safe driving practices geared particularly toward teens. **START SMART** also appeals to teens emotionally using live testimonials by people who have lost loved ones in traffic collisions.

<http://www.chp.ca.gov/community/html/startsmart.html>

EVERY 15 MINUTES is a two-day program that challenges high school juniors and seniors to consider the consequences of drinking, personal safety and the responsibility of making mature decisions when lives are involved. The program involves students, parents, teachers, police officers and emergency medical personnel in a dramatization of the aftermath of a fatal alcohol-related car crash. An evaluation found that the youth who most actively participated in this program reported that they drank less, were more likely to talk to their friends about drinking and driving, and were less likely to ride with a drinking driver than previously. Planned research includes comparing participating schools to control schools, and assessing the program's impact on traffic safety.(78)

www.every15minutes.com

ALIVE AT 25 is a highly interactive 4-hour defensive driving course for drivers ages 16-24. Drivers are taught to take responsibility for their own driving, and recognize the potential consequences of their decisions. The course combines short lectures, workbook exercises, role-playing, and discussion to engage young drivers. 93% of those completing the course said they would change their driving behavior as a result of the behavior. In California, **ALIVE AT 25** is administered by Safety Center Incorporated, which offers monthly courses at fixed locations, but individual school visits can be arranged. Some insurance companies give discounts to drivers who have completed this course.

<http://www.safetycenter.org/aliveat25.html>

DRIVING SKILLS FOR LIFE is a resource for multimedia educational materials provided by the **FORD MOTOR COMPANY** in collaboration with the **GOVERNORS HIGHWAY SAFETY ASSOCIATION** for students, parents, and instructors. **DSFL** focus on 4 key driving skills: hazard recognition, vehicle handling, speed management, and space management. The free program complements traditional driver education with their website, videos and interactive exercises, as well as in schools and malls nationally.

www.drivingskillsforlife.com

DRIVER'S EDGE is a not-for-profit program founded and taught by race car drivers and sponsored by **AAA**. The 4 1/2-hour classroom and behind-the-wheel curriculum includes teaching teens about evasive lane changes, anti-lock panic braking maneuvers, skid control, and what to do after a tire blowout or in icy conditions. Students are also taught in-car strategies, including vehicle dynamics, load transfer and driving in the rain. **DRIVER'S EDGE** is currently being evaluated in Nevada by **NHTSA**. Included in the study are a database of pre-and post-tests of about 10,000 teens, and preliminary analyses suggests a 60% reduction in collisions among drivers completing the program.

www.driversedge.com

TEEN-DASH FOR SAFETY is a school-based program from **DRIVESAFETY** that focuses on teen attitudes toward driving and how these attitudes actually affect driving behavior. The program combines an online survey tool that assesses existing attitudes with classroom instruction during which these attitudes are discussed and teens are taught to understand the dangers associated with certain attitudes. **TEEN-DASH FOR SAFETY** is currently free to all school districts while the program is being evaluated.

<http://www.drivesafety.com/02teensafety/educators.htm>

ROAD READY is a web-based program sponsored by DaimlerChrysler, in coordination with **AAA**, **MADD**, and the **NATIONAL SAFETY COUNCIL (NSC)**. **ROAD READY** consists of a **TEEN PARENT'S GUIDE** and the **STREETWISE** video game. Evaluation of **STREETWISE** conducted by researchers at the University of Michigan Transportation Research Institute verifies that the game increases awareness of risks among novice drivers, and makes them more likely to protect themselves from these risks. Additionally, researchers found that the video game format is an enjoyable and effective way of communicating safe driving concepts.

<http://www.roadreadyteens.org/index.html>

MADD and **DAIMLERCHRYSLER** also sponsor multimedia shows that travel nationally to secondary schools, including **BACKSTAGE PASS** and **THE SPOT**. These 35-minute videos designed to be shown at school assemblies grab teens' attention with music, movie clips, and celebrity interviews.

<http://www.schoolassembly.org/index.cfm>

FARMERS INSURANCE GROUP sponsors the **YOU'RE ESSENTIAL TO SAFETY PROGRAM (Y.E.S.)**, which includes a video and a roadbook called **WRECKED**.

http://www.farmers.com/FarmComm/WebSite/html/auto/YES/Yes_1.html

GEICO AUTO INSURANCE provides informational brochures and videos to watch with your teen.

http://www.geico.com/auto/safety/teenvideo_min.htm

METLIFE AUTO & HOME provides the free handbook **TEACHING YOUR TEEN TO DRIVE** and other resources for parents teaching their teens to drive. **METLIFE** also encourages safe driving by offering discount rewards to insured teens who maintain a clean driving record.

<http://www.metlife.com/Applications/Corporate/WPS/CDA/PageGenerator/0,4132,P3733,00.html>

STEER CLEAR OF POT is a national media campaign started by the **OFFICE OF NATIONAL DRUG CONTROL POLICY (ONDCP)** to educate parents and teens about the risks associated with driving under the influence of marijuana. Materials are made available through driving schools and other organizations, including **GEICO AUTO INSURANCE**.

<http://www.mediacampaign.org/steerclear/index.html>

TOYOTA DRIVING EXPECTATIONS is defensive driving course for licensed teens 16-19 years old with classroom and behind-the-wheel driving course training developed in conjunction with the **NSC**. Participants are required to be accompanied by at least one parent or guardian, encouraging parental involvement in the ongoing process of learning to drive safely.

<http://www.toyotadrivingexpectations.com>

CINGULAR WIRELESS produced **BE SENSIBLE: DON'T DRIVE YOURSELF TO DISTRACTION** to teach teen drivers how to manage and avoid the risks of distracting driving. The program consists of a video, written materials, and interactive activities to be incorporated into high school and driver education courses.

http://www.cingular.com/sensible_programs/teen_driving

PEER EDUCATION & OUTREACH PROGRAMS:

CALIFORNIA FRIDAY NIGHT LIVE began as a pilot program dedicated to reducing the number of deaths and injuries caused by teen motorists driving under the influence of alcohol and other drugs. It involves community action and outreach, prevention activities, and youth mentoring, and has reached most of California's 58 counties.

<http://www.fridaynightlive.org/About/About.htm/>

TEENWORK is an annual statewide youth development training institute for high school students and adult advisors, sponsored by public agencies, businesses, and private donors. Limited funding is provided by the state. The goal of **TEENWORK** has been to provide a forum for California youth to network, and share ideas and discuss solutions to issues facing young people, such as alcohol, tobacco, and other drug use, academic failure, gang violence, and teen pregnancy.

<http://www.teenwork.com/>

STUDENTS AGAINST DESTRUCTIVE DECISIONS is a peer education organization focused on preventing destructive decisions, such as choosing to drink or use drugs, or drive while impaired. **SADD** resources are available for students from 6th grade through college through school and community-wide activities. **SADD** allows students to tailor prevention strategies to the needs and cultural values of their particular communities, and provides all services free of charge. **SADD** also provides the **CONTRACT FOR LIFE**, a promise of communication between a young person and a parent or caring adult, to ensure that youth have help in making difficult decisions. **SADD** reaches more young people, and for longer, than any other prevention program in the country.

<http://www.sadd.org/>

VOLKSWAGEN OF AMERICA, INC. and **SCHOLASTIC MARKETING PARTNERS** sponsors **FASTEN YOUR SEAT BELT...GO FAR!**, an educational program that challenges teens to create a public service announcement to convince their peers to buckle up. Students who produce the best PSAs receive savings bonds and have their PSA air on national television.

<http://www.vw.com/vwlife/socialaction.html>

REGENERATE is a nonprofit organization based in California that, with the support of **STATE FARM INSURANCE**, enables teens to educate their peers through public service announcements (PSAs) and documentaries. **REGENERATE** is directed by film producer David Lee Miller. Video is available on the organization's website and other linked sites.

<http://www.regenerate.org/>

The **CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT INJURY PREVENTION PROGRAM** staff created a prevention program that combined peer outreach and education with community outreach and education. Staff worked with a group of teens to help these young people educate their peers about risks associated with teen driving, focusing on the issue of driving under the influence of alcohol or other drugs. The teens developed two DUI slogans for part of a regional traffic safety education campaign. The slogans "Don't let this be your final destination" (with picture of gravestone) and "Driving Under the Influence can have a HUGE impact" (with picture of car crashed through concrete wall) are now being displayed as transit ads at BART stations and transit shelters along with other traffic safety messages.

http://www.cchealth.org/services/street_smarts/

The Administrative Office of the Courts (AOC) is administering the two-year grant, **CALIFORNIA PEER COURT DUI INTERVENTION & PREVENTION STRATEGIES PROGRAM**, which is funded by **OTS**. Central to the program is the development of a curriculum that educates at-risk youth on the dangers of driving under the influence of alcohol and/or drugs. The curriculum will become a required component for peer court participants to satisfy court imposed sanctions, and could potentially serve as a supplementary tool to existing driver education programs statewide. For more information about this program, please contact Huong Bui at

huong.bui@jud.ca.gov.

YOUTH IN VIRGINIA SPEAK OUT (YOVASO) ABOUT TRAFFIC SAFETY is a peer education program that trains high school and college students to speak out in schools and communities about the risks teen drivers face. Participants also work to improve upon and create new programs to reduce teen driver injuries and fatalities. **YOVASO** is a model program that may be used by other states. Project guides are included on the **YOVASO** website.

<http://www.yovaso.org/index.htm>

THE NATIONAL ORGANIZATIONS FOR YOUTH SAFETY (NOYS), whose members include the **RECORDING ARTISTS, ACTORS AND ATHLETES AGAINST DRUNK DRIVING (RADD) COALITION** and **NHTSA**, promotes dialogue among teens and their parents as well as among teens and their peers. In collaboration with **HBO FAMILY**, **NOYS** created the documentary **SMASHED: TOXIC TALES OF TEENS AND ALCOHOL** which is available by order free of charge, along with an accompanying media kit, on their website.

<http://noys.org/index.html>

For a list of other programs in California, please see <http://www.ots.ca.gov/profile/casestudies.asp>

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