

What you should know about...

Key GDL Influences & Partners



Graduated Driver Licensing

An effective GDL system is the result of many influences and partners that work together.



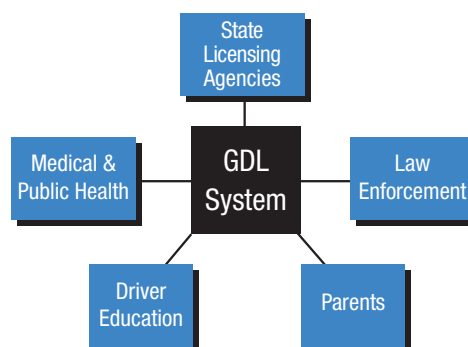
While teenage driver crashes and casualties decreased in the past decade, and in spite of recent attention to the issue, teens are still high risk drivers and unintentional injury from motor vehicle crashes remains the number one cause of death among teens in the United States. In absolute numbers, 3,889 teens aged 16-19 – more than 10 every day – died in passenger vehicles driven by a teen in 2005. Per population, teen drivers age 16-19 are involved in about twice as many crashes, fatal and non-fatal, as drivers aged 30-59 (Ferguson, Teoh, & McCartt, 2007).

The goal of a Graduated Driver Licensing (GDL) system is to prevent injuries and deaths from teen drivers' motor vehicle crashes. Since the presentation of a summary of US GDL evaluation results at the November 2002 Symposium on GDL, many more US states and Canadian provinces have implemented GDL and/or enough time has passed that additional evaluation results are now available. According to Shope, 2007:

- Twenty-one studies of GDL within 14 individual jurisdictions and six nationwide studies of GDL were conducted and made available.
- Positive results (usually crash reductions) of varying degrees were reported from nearly all the studies. Given differences in approaches, study goals, methods, and analyses, the results are surprisingly consistent. Overall, GDL systems reduced the youngest drivers' crash risk by approximately 20-40%.

These studies, together with earlier studies, show conclusively that GDL reduces teen driver crashes. However, crash reductions vary by jurisdiction because of differences in both their pre-GDL licensing requirements for novice teen drivers and in components of their GDL systems. The research does show that:

- In general, crash reductions were greater for stronger GDL systems, as rated by the Insurance Institute for Highway Safety scale (Shope, 2007).
- Crash reductions also were generally larger than those produced by most traffic safety initiatives (Foss, 2007).
- Also, studies showed similar crash reductions for both male and female teen drivers, and no increase in crash risk for 17- or 18-year-old drivers once fully licensed.



Much more can be done to reduce morbidity and mortality from teen crashes. An effective GDL system results from multi-level and system efforts – macro (multinational, regional, national) and micro (community, organizations, groups, parents) – and a variety of approaches.

- Key partners in a GDL effort include state Departments of Motor Vehicles (DMVs), law enforcement, parents, driver education, and medical and public health professionals and organizations.
- Integrated approaches are required to reduce the especially high teen crash rates during the first six months of unsupervised driving, including integrating licensing, driver education, parent involvement and monitoring, peer programs, and insurance systems in a comprehensive community effort (Shope, 2007).
- Public health and traffic safety practitioners can work with policy makers to make GDL's effects even more pronounced – research shows that the public supports reducing teen traffic casualties and there is strong evidence of GDL's effectiveness.

This fact sheet reflects current information presented at the International Symposium on Novice Teen Driving: GDL and Beyond – Research Foundations for Policy and Practice held in Tucson, Arizona on February 5-7, 2007. For more information, go to www.nsc.org/gdl/.

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State Motor Vehicle Licensing Departments

Each state's Department of Motor Vehicles (or Secretary of State office in some states) establishes driver licensing requirements authorized by state laws, issues and monitors all licenses, and is responsible for administering the state's GDL system. DMV efforts range from conducting required knowledge and driving skill tests and issuing licenses, to actively educating parents and teens about traffic safety and working with law enforcement to monitor novice teen drivers in all stages of GDL.

Law Enforcement

GDL requirements must be enforced. To effectively enforce requirements (such as when stopping an unsupervised teen driver), officers must recognize a learner's permit or intermediate license and know their provisions, such as nighttime and passenger restrictions. For example, Omaha, NE recognized this issue and incorporated GDL issues into training received by all officer recruits, substantially increasing GDL enforcement (Scott, 2007).

Parents

Parents are partners with their teens as they learn to drive and they are the primary instructors and guardians of teen safety. In most states, parents must endorse applications for a learner's permit, intermediate license, and full license. Parents provide most of the supervised practice driving during the learner's permit period. In states with a supervised driving requirement, parents must certify that requirements have been met. GDL laws are enforced primarily by parents and nearly all parents impose additional driving restrictions during the initial months of independent driving. Recent studies conclude that risky driving, traffic violations, and crashes are lower among teens whose parents set limits on high risk driving conditions such as teen passengers and night driving (Simons-Morton, 2007).

Driver Education

The driver education model of 30 hours of classroom instruction and 6 hours on the road in existence for many decades (about 40 years) does not produce reduced crash rates. According to Mayhew, 2007, driver education may decrease safety by enabling teens to become licensed earlier, putting more drivers on the road at an earlier age. However, several improvements may help its role in a partnership with parents and GDL, including:

- Adopt a multi-stage approach – teach basic driving skills followed by safe driving procedures and decision-making.
- Update course content to focus on teen driver risk factors.
- Use teaching methods based on sound learning principles.
- Match instruction to the skill levels and needs of individual teens.

Medical and Public Health Professionals and Organizations

Medical and public health organizations and individuals have long been active in many traffic safety areas, including child safety and booster seats, adult seat belts, bicycle and motorcycle helmets, and alcohol and other drugs. Their influence as partners in GDL and other novice teen driver issues are a natural extension of their traffic safety work. As one example, the American Academy of Pediatrics recently released a policy statement recommending that pediatricians counsel teen patients and parents on safe driving issues, including GDL provisions.

References

- Ferguson, S.A., Teoh, E.R., & McCartt, A.T. (2007). Progress in teenage crash risk during the last decade. *Journal of Safety Research*, 38(2), 137-145.
- Mayhew, D.R. (2007). Driver education and graduated licensing in North America: past, present, and future. *Journal of Safety Research*, 38(2), 229-235.
- Scott, L. (2007, February). Project night life: Drive to survive. In *Novice teen driving: GDL and beyond – Research foundations for policy and practice*. Symposium conducted in Tucson, AZ.
- Shope, J.T. (2007). Graduated driver licensing: review of evaluation results since 2002. *Journal of Safety Research*, 38(2), 165-175.
- Simons-Morton, B. (2007). Why parent involvement in novice teen driving safety is essential and evidence of its effectiveness. *Journal of Safety Research*, 38(2), 193-202.
- NOTE:** James Hedlund summarizes information presented and discussed at the Symposium. This summary contains a complete listing of secondary references. See: Hedlund, James. (2007). *Novice teen driving: GDL and beyond*. *Journal of Safety Research*, 38(2), 259-266.