

# **Policies and Priorities**

Current as of August 13, 2023

The Governors Highway Safety Association (GHSA) is the states' voice on highway safety. The 501(c)(3) nonprofit association represents state and territorial highway safety offices. Members are appointed by their governors to administer their state's highway safety program. Areas of focus include occupant protection; impaired driving; speed enforcement; and drowsy, distracted and aggressive driving; motorcycle, pedestrian and bicycle safety; as well as highway safety information systems. GHSA's mission is to provide leadership and advocacy for the states and territories to improve traffic safety, influence national policy, enhance program management and promote best practices.

GHSA's members meet annually to discuss highway safety problems and issues and to adopt policies on highway safety issues of national concern and importance. The policy statements found in this document were adopted at the Association's meeting in August 2023. Future policy updates and revisions to this publication will be posted on the Association's website located at <u>www.ghsa.org</u>.

Note: Throughout this document, "States" refers to the 50 U.S. States, the District of Columbia, Guam, Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands.

# **Table of Contents**

A. National Highway Safety Program5
A.1 Federal Role in Highway Safety5
A.2 Authorization of Federal Highway Safety
Program6
A.3 Performance-Based Programming6
A.4 Community-Level Highway Safety Programs.7
A.5 Incentives and Sanctions7
A.6 Research and Demonstration Programs8
A.7 The Safe System Approach9

B. Injury Control10
B.1 Safe Communities10
B.2 Emergency Medical Services and Injury Control
B.3 State Injury Control Programs10

#### C. Financing Highway Safety and Injury Control..11

C.1 Budget Allocation11
C.2 Highway Trust Fund11
C.3 Funding for Highway Safety Grant Programs .11
C.4 Funding for Incentive Grant Programs12
C.5 Funding for Injury Prevention Programs12
C.6 Funding for Emergency Medical Services
Systems

<b>D. Occupant Protection</b>	<u>13</u>
D.1 Mandatory Safety Belt Use Laws and E	Belt Use
Policies	13
D.2 Adjustable Upper Anchorages	13
D.3 Child Restraints	13
D.4 Occupant Protection for Children	14
D.5 Air Bags and Crash Testing	14
D.6 Federal Occupant Protection Training F	Programs
	15
D.7 Pickup Trucks	15

E. Impaired Driving .....16

E.1 .Illegal Per Se Impaired Driving Laws
E.2 Impaired Driving Offenses
E.3 Detecting and Prosecuting Impaired Drivers 16
E.4 Impaired Driving Prosecution, Adjudication,
Supervision and Treatment17
E.5 Administrative License Suspension or
<u>Revocation17</u>
E.6 Vehicle Sanctions17
E.7 High Risk Impaired Driving Offenders 18
E.8 Open Container Laws
E.9 Driving While Suspended 18
E.10 Enforcement of DUI Laws 19
E.11 BAC/Drug Testing and Reporting19
E.12 Designated Driver Programs 19
E.13 Server Training Programs19
E.14 DUI Courts
E.15 DUI Offender Monitoring
E.16 Plea Bargaining and Diversion Programs 20
E.17 Court Monitoring 20
E.18 Alcohol Screening, Assessments and Treatment
E.19 Self-Sufficient Impaired Driving Programs 21
E.20 Underage Drinking and Drug Use 21
E.21 DUI Task Forces
E.22 Alcohol and Cannabis Advertising
E.23 Taxes on Alcoholic Beverages
E.24 Alcohol and Cannabis Equivalency23
E.25 Federal Impaired Driving Training Programs 23
E.26 Victim's Rights
E.27 Drug-Impaired Driving
<u>Research24</u>
E.28 Impaired Non-Motorized Travel24
E.29 Cannabis Legalization and Responsible
<u>Use24</u>

F. Speed, Speeding and Aggressive Driving	
F.1 Speeding-Related Crashes	
	2

## **Table of Contents**

F.2 Speed Limits	25
F.3 Responsible Advertising	25
F.4 Use of Speed Detection Devices	26
F.5 Aggressive Driving	26

#### **G. Bicycles, Pedestrians, Micromobility and Other**

Personal Conveyances	27
G.1 Protective Helmets	27
G.2 Bicycle Safety	27
G.3 Pedestrian Safety	
G.4 Micromobility	
G.5 Low Speed Vehicles	29

H. Motorcycle Safety	30
H.1 Motorcycle Helmet Laws	30
H.2 Motorcycle Operator Training	
H.3 Impaired Motorcycle Programs	30
H.4 Licensing of Motorcyclists	30
H.5 Motorcycle Awareness Programs	31
H.6 Motorcycle Research	

#### I. Traffic Safety and Law Enforcement ......32

I.1 Professional Traffic Stops	32
I.2 Equity in Traffic Enforcement	32
I.3 High Visibility Enforcement	33
I.4 Officer Safety and Wellness	33

<u>J.</u>	Truck Safety	34
	J.1 Commercial Motor Vehicle Licenses	34
	J.2 Motor Carrier Safety Assistance Program	34
	J.3 Data Collection	34
	J.4 Entry-Level Driver Training	35
	J.5 Enforcement	35
	J.6 Fatigue	35
	J.7 Insurance	36
	J.8 Truck Size and Weight	36
	J.9 Hazardous Materials	36

J.10 Speed Detection Devices in Commercial M	lotor
Vehicles	36
J.11 Sharing the Road with Commercial Motor	
Vehicles	37
J.12 Truck Conspicuity	37
J.13 Impaired Driving	37
J.14 Distracted Driving for Commercial Vehicle	es. 37
J.15 Safety Belt Enforcement	37
J.16 Younger Drivers of Commercial Motor	
Vehicles	37
J.17 Speed Limiters on Commercial Motor	
Vehicles	37
K. School Bus and School Related Safety	38
K.1 School Bus Loading and Unloading	38

<u>K.2</u>	School Bus Vehicle Safety and Safety		
	Equipment	<u>38</u>	
<u>K.3</u>	Safe Routes to School	<u>38</u>	

L. Traffic Records	<u> 39</u>
L.1 Uniform Data Collection and Reporting	39
L.2 DUI Information Systems	39
L.3 DUI Records Retention	39

# M. Roadway Safety 40 M.1 Work Zone Safety 40

M.2 Strategic Highway Safety Planning	<u>40</u>
M.3 Highway Rail Grade Crossing Safety	<u>40</u>
M.4 Automated Enforcement	<u>40</u>

#### 

# **Table of Contents**

O. Driver Licensing and Education	43
O.1 Driver Education/Training	43
O.2 Driver Records	43
O.3 Driver License Compact and Nonresident	
Violators Compact	43
O.4 Graduated Driver Licensing for Novice D	rivers
	43

P. Driver Safety Issues	
P.1 Drowsy Drivers	
P.2 Mature Drivers	45
P.3 Young Adult Drivers	45
P.4 Work Place Safety Programs	45
P.5 Distracted Driving	46
P.6 Ride Hailing	47
P.7 Secure Your Load	47

Q. Miscellaneous Issues	48
Q.1 License Plates	
Q.2 Assessments and Training	

In 1966, 50,894 people were killed in motor vehicle crashes and the rate of fatalities per 100 million miles of travel was 5.5. It was projected that, over a nine-year period, the number of fatalities would increase to 100,000 annually if Congress did not do anything to address the problem. Taking heed of these dire predictions, Congress enacted the Highway Safety Act of 1966. This legislation created a unique partnership among federal, state and local governments to improve and expand the Nation's highway safety activities.

The Highway Safety Act of 1966 established the 402 State and Community Highway Safety Grant program and charged the states (including Puerto Rico, the District of Columbia, the Indian Nations and the U.S. territories) with implementation. It also required governors to be responsible for the administration of the federal highway safety program in each state. The governor, through delegation of powers, had the authority to designate a Governor's Highway Safety Representative (GR) to administer the federally funded highway safety program.

Since 1966, Congress has revised the federal highway safety program a number of times, adding new incentive grants, penalties and sanctions. The basic structure of the program, however, has remained the same.

#### A.1 Federal Role in Highway Safety

The Governors Highway Safety Association (GHSA) believes the federal government plays a critical role in highway safety and must continue to be directly involved in highway safety. GHSA commits to strengthening its partnership with federal agencies involved in preventing traffic violence. The federal government should be an active partner with the states and others in the safety community in the development and implementation of safety programs. The federal government should provide national leadership on safety issues, offer technical assistance and training, develop national data systems and provide assistance to states in the development of their data systems, develop and demonstrate new programs and technologies, facilitate technology and information sharing, research issues, evaluate highway safety program effectiveness, convene stakeholders to tackle highway safety problems, and consistently administer the program across its Regional Offices. Additionally, the federal government should encourage meaningful performance-based programming and assist states in developing the capability to undertake such programming.

The federal government and states have a partnership that should reflect an appropriate balance between trust and accountability. GHSA opposes over-regulation of state programs. However, states and the federal government should collaborate on consistent and appropriate oversight, including the use of clear guidance, training, well-crafted program assessments and other technical assistance to improve program delivery.

GHSA commits to strengthening its partnership with the Bureau of Indian Affairs in support of the Indian Highway Safety Program as Native American populations experience a disproportionate number of fatal crashes and underinvestment in highway safety initiatives.

#### A.2 Authorization for Federal Highway Safety Programs

GHSA strongly supports the existing Section 402 State and Community Highway Safety Grant program and urges it be reauthorized. GHSA urges Congress to utilize each reauthorization to ease administrative burdens on states.

GHSA does not support earmarking or set-asides. The states should have maximum flexibility to administer the 402 program and similar federal highway safety programs based on identified state and local needs and problems.

GHSA supports the Section 405 National Priority Safety Program. Section 405 grants should focus on the greatest national priorities, such as <u>impaired driving</u>, <u>safety belt use</u> and <u>speeding</u>, as well as cross-cutting safety initiatives that are at risk of underinvestment, such as <u>traffic records</u>. GHSA opposes the multiplication of safety grant programs for issues that are not associated with a significant proportion of crashes, or the creation of new formula National Highway Traffic Safety Administration (NHTSA) highway safety grant programs outside of Section 402 and 405. GHSA opposes overly burdensome Section 405 grant eligibility requirements that hinge on the technical details of state traffic safety laws.

GHSA believes the minimum required percentage of funds expended for local benefit should remain at 40% if NHTSA can simplify the documentation of local benefit. The current program gives states the appropriate level of flexibility to make funding allocations based on individual state needs, but states need realistic and practical standards to apportion state spending for local benefit.

Notwithstanding the triennial period for highway safety planning, GHSA also recommends that the 402 and Section 405 programs be based on multiyear contracting authority. Such a change would give the states more flexibility in programming their funds and would encourage them to undertake more long-term planning. It would allow the states to program more effectively for large, long-term expenditures such as <u>traffic records</u> improvements without interfering with their ability to program funds annually. Multiyear contracting authority would also address the problems of smaller states whose minimum allocation does not provide sufficient 402 funding to allow them to address many highway safety problems.

GHSA appreciates ongoing efforts by Congress to consolidate and streamline federal highway safety grant programs in order to simplify the administration of these programs. GHSA supports the use of a single annual grant application and a single or minimum number of application deadlines. All grant funding should be allocated on the first day of the new fiscal year.

#### A.3 Performance-Based Programming

GHSA strongly supports the performance-based administration of the federal behavioral grant programs and urges their continuation and further enhancement. This approach gives states the flexibility to design and implement programs that specifically fit state needs, problems and resources. Performance-based programming links a state's goals more directly with its identified problems and resources, and encourages better evaluation of state programs. Performance-based programming facilitates local input and strengthens highway safety planning and accountability. States are strongly encouraged to use a

minimum set of performance measures with which to identify problems, develop programs and measure progress.

Performance linked to other transportation programs should use harmonized data sets to establish national performance measures, targets and timing.

The establishment of specific performance goals and policies should rest with the states. The federal government should provide states with flexibility to set performance targets, whether strongly data-driven or aggressive and aspirational. States should not face penalties for failing to meet performance goals that are impacted by a wide range of factors beyond the influence of the State Highway Safety Offices (SHSOs).

#### A.4 Community-Level Highway Safety Programs

GHSA strongly supports community-based programs. The local approach gives communities the flexibility to structure highway safety programs in a way that meets their needs in a manner consistent with the state's safety program. Communities can mobilize local resources and reach those at highest risk in their community since they have the greatest familiarity with the resources, problems and opportunities within their jurisdictions. Once a community has established a local highway safety program, it is likely to institutionalize the program within the local bureaucracy, ensuring survival and longevity after federal funding has terminated. GHSA supports the continued federal emphasis on community-level programs and urges that adequate federal funding be made available for program implementation.

GHSA further urges NHTSA and the Federal Highway Administration (FHWA) to accelerate their overtures to other federal agencies that provide funding to local community programs. Greater cooperation and collaboration among the federal funding agencies will foster and encourage the same at the state and local agency levels.

GHSA encourages state and local coalition-building and partnerships with a range of organizations (e.g., associations, faith-based organizations, businesses, etc.) Resources are few and the opportunities for collaborating and leveraging funds are great.

GHSA encourages states to comprehensively involve community and local highway safety program representatives in state highway safety planning to the extent possible.

#### **A.5 Incentives and Sanctions**

GHSA strongly supports incentives and believes they are more appropriate than penalties and sanctions to positively influence highway safety programs. Incentives reward states that have appropriate laws and programs in place and encourage other states to enact or enhance such laws and programs.

GHSA recommends that incentive grant programs be performance-oriented rather than activity- or process-oriented. This would encourage states to satisfy specific goals rather than dictating how those goals are to be met.

GHSA supports existing sanctions that have been in place for many years and are effective, such as the sanction for failure to adopt state minimum drinking age laws. GHSA would vigorously oppose any effort to repeal the National Minimum Drinking Age Act of 1984 that established a nationwide minimum age of 21.

In general, GHSA strongly opposes new sanctions, redirection or other strategies that mandate states to address a particular highway safety strategy within a specified time period. GHSA believes such sanctions and similar strategies are not an effective, targeted approach and are, in the long term, counterproductive.

#### A.6 Research and Demonstration Programs

Under Section 403, NHTSA has broad discretion to deploy their research and demonstration resources to fit the changing needs of the highway safety program. This program has spawned the development of innovative programs and timely, relevant research that, in turn, has benefited state highway safety programs. GHSA strongly supports the enhancement of the Section 403 program and strongly opposes Congressional efforts to earmark Section 403 funding.

GHSA further recommends federal agencies coordinate, for the purposes of notification and feedback, with the appropriate SHSO when 403-funded demonstration projects or projects from the Behavioral Traffic Safety Cooperative Research Program are implemented within their jurisdiction. This would help prevent duplication of efforts within a state and assure that federally funded projects complement each other to the greatest extent possible.

#### A.7 The Safe System Approach

GHSA supports the Safe System approach to highway safety, a holistic, comprehensive strategy to reduce highway traffic deaths to zero. The Safe System approach directs investment in a wide range of countermeasures to ensure safer roads, safer vehicles, safer road users, safer speeds and post-crash care. All of these groups of countermeasures address crash risk in different, sometimes exclusive, but complementary ways. A comprehensive, equitable approach to highway safety necessitates ongoing efforts to address dangerous driver behavior with laws and legislation; enforcement, prosecution, and adjudication; public education; and community outreach and engagement. Highway safety programs must also continue to invest in integrated data collection, research, program evaluation, and the use of innovative technology.

GHSA supports strategic initiatives to dramatically reduce highway traffic deaths to zero, including Toward Zero Deaths, Vision Zero, Road to Zero, and other similar strategies.

GHSA opposes efforts on the federal, state or local level to categorically discard, defund or de-emphasize effective programs to advance safe roads, safe vehicles, safe road users, safe speeds, post-crash care, or any other systemic elements of highway safety.

GHSA commits to strengthening its partnerships with other associations of state government agencies committed to preventing traffic violence.

#### A.8 Equity and Engagement in Highway Safety

Equity is an essential element in highway safety and the Safe System approach. GHSA urges the highway safety community to institutionalize equity throughout their programs in order to promote diversity in the highway safety discipline, involve more communities and deliver safety services more comprehensively and avoid disparities.

Data show that traffic crash fatalities have consistently disproportionally affected racial minorities and there is a historical lack of transportation investment in disadvantaged communities.

GHSA encourages all states to broaden community involvement in the highway safety planning process so diverse communities have a voice in shaping highway safety programs, including the use of traffic enforcement. GHSA urges the highway safety community to tailor public outreach and community programs to optimize their safety impact in diverse communities.

# **B.** Injury Control

GHSA strongly encourages collaborative efforts within the public health community to address the epidemic of motor vehicle-related fatalities and injuries and promote traffic safety.

#### **B.1 Safe Communities**

The Association supports the Safe Communities concept, recognizing the effectiveness of community programs in addressing a range of safety problems. It brings transportation and traffic safety together with enforcement, education, engineering and emergency medical services (EMS).

#### **B.2 Emergency Medical Services and Injury Control**

The EMS community plays an important role by helping prevent and respond to motor vehicle injuries. GHSA strongly encourages ongoing cooperative efforts among SHSO and state EMS divisions and providers to reduce crash-related trauma through the promotion of training, public awareness and other activities.

#### **B.3 State Injury Control Programs**

GHSA strongly supports the efforts of injury prevention and control programs in public health departments. The Association encourages SHSOs to work with state health departments to establish ongoing injury prevention and control programs and develop and implement joint programs to reduce motor vehicle-related deaths and injuries including public health participation in the Strategic Highway Safety Plans.

# **C. Financing Highway Safety and Injury Control**

#### **C.1 Budget Allocation**

Every year Congress allocates a portion of the federal budget to domestic discretionary programs, including transportation programs. GHSA urges Congress to increase the budget allocation for transportation programs so that states can improve the Nation's deteriorated infrastructure, provide needed transportation services and address critical highway safety issues.

#### C.2 Highway Trust Fund

GHSA supports the continued dedication of the Highway Trust Fund revenues to surface transportation and related activities and opposes efforts that compromise the Highway Trust Fund. In addition, GHSA supports spending all available Highway Trust Fund dollars for our Nation's surface transportation systems and highway safety programs.

Highway Trust Fund revenues above a certain level are called Revenue Aligned Budget Authority (RABA). In the past, federal highway safety grant programs have not benefited from RABA dollars. GHSA urges that federal highway safety grant programs receive a proportionate share of RABA funds on an annual basis.

Beginning with the Transportation Equity Act of the 21<sup>st</sup> Century (TEA-21), federal behavioral highway safety grant programs have been funded at guaranteed levels out of the Highway Trust Fund. This has ensured that such grant programs are consistently funded at the authorized level and not at some reduced level. GHSA would vigorously oppose any effort to remove the funding guarantees or to shift behavioral grant funding from the Highway Trust Fund to federal General Funds.

GHSA urges Congress to deploy long-term transportation funding solutions to ensure the continued health and solvency of the Highway Trust Fund.

#### C.3 Funding for Highway Safety Grant Programs

GHSA's highest priority is to save lives, and to do that, it is absolutely necessary to increase the funding for federal driver behavior grant programs. Federal driver behavior highway safety grant programs have been consistently underfunded. Without adequate funding, the rate of progress that has been made in highway safety cannot be maintained in the future. More financial resources will be needed to address the remaining most difficult population group to reach — problem drivers — and to focus on all population groups.

# C. Financing Highway Safety and Injury Control

# C.4 Funding for the State and Community Safety Grant Program and the National Priority Safety Program

Congress' first priority should be the robust funding of the Section 402 State and Community Safety Grant Program. Congress should invest a greater proportion of funding into Section 402 to provide states with more flexibility to assign safety resources with minimum administrative burden. When investing funding in the Section 405 National Priority Safety Program, Congress should prioritize grant programs for issues associated with the greatest numbers of crashes.

#### **C.5 Funding for Injury Prevention Programs**

Motor vehicle crashes are part of a much larger national epidemic of unintentional yet preventable injuries. To address the injury problem, Congress has created the National Center for Injury Prevention and Control of the Centers for Disease Control and Prevention. The Center funds injury research, provides grants to state and local public health agencies, and works to increase the public's awareness about injury prevention. GHSA recognizes and supports the critical work performed by the Center. Additionally, the Association supports sufficient funding for the establishment of injury prevention and control programs in the health department in each state and territory.

#### C.6 Funding for Emergency Medical Services Systems

Adequate EMS is a critical component of any highway safety program. Comprehensive EMS systems, including trauma care, can reduce the severity of injury following motor vehicle crashes if the services are delivered in a timely and appropriate manner. Federal funding for the development and implementation of statewide EMS systems programs and EMS data systems has been woefully inadequate, despite federal legislation authorizing the expenditure of funds for such purposes. GHSA urges Congress to provide adequate funding for the development and implementation of statewide EMS systems, including systems for trauma care and for the collection of EMS data, in order to make these services equally available to all highway users.

# **D. Occupant Protection**

As a behavioral factor affecting highway safety, occupant protection is a priority focus of the Association. Issues that fall into this category include, but are not limited to, <u>safety belts</u>, <u>child restraint systems</u> and <u>air bags</u>.

#### D.1 Mandatory Safety Belt Use Laws and Belt Use Policies

GHSA strongly encourages all states to adopt and enforce primary safety belt use laws that apply to all occupants in all seating positions. GHSA strongly encourages all states to carry out public awareness campaigns to encourage safety belt use in every seat on every trip.

All states are encouraged to continue their <u>high visibility enforcement</u> of safety belt laws and to conduct sustained, equitable occupant protection enforcement efforts. In addition, states should undertake nighttime enforcement campaigns since nighttime belt usage is typically lower than daytime usage.

In many, if not most states, the safety belt usage rate is such that only the most resistant person is unbuckled. These remaining holdouts require stronger measures. Consequently, GHSA encourages states to consider the assignment of drivers' license penalty points and/or increased fines for safety belt violations. GHSA also encourages states to conduct focused education, community and enforcement campaigns for high-risk populations.

GHSA urges all SHSOs require that entities contracting with the SHSOs to initiate and maintain a mandatory safety belt use policy for that entity. This would include state and local governments, nonprofits and others.

GHSA encourages motor vehicle manufacturers to install safety belt reminder systems in all new vehicles to encourage the use of safety belts, particularly by part-time users. GHSA encourages services providing for-hire transportation to actively promote and, if possible, require safety belt and child safety seat use for all passengers.

#### **D.2** Adjustable Upper Anchorages

GHSA urges manufacturers to install adjustable upper anchorages in all new model vehicles because misuse of safety belts is a frequent problem that reduces the effectiveness of these lifesaving devices, particularly for older children and short stature adults.

#### **D.3 Child Restraints**

GHSA urges the promotion of the proper use of child passenger protection systems; endorses child restraint clinics, fitting stations, other educational programs; and endorses education and awareness regarding the proper maintenance of restraints.

GHSA recommends that the motor vehicle manufacturing industry and NHTSA take additional steps to reconcile existing problems of compatibility between child restraints and the vehicles and vehicle restraint

## **D.** Occupant Protection

systems with which the seats are to be used. GHSA encourages these parties to maintain a close collaboration in order to prevent incompatibility problems from arising in the future.

#### **D.4 Occupant Protection for Children**

Many state child restraint laws contain gaps in coverage or provide exemptions that allow children to go unrestrained in certain circumstances. GHSA supports the closing of these gaps and urges states to enact laws that cover every child in every seating position for all vehicles.

GHSA endorses the child restraint recommendations of the American Academy of Pediatrics, currently including the use rear-facing child restraints until age two, then the use of forward-facing child restraints, and then the use of a booster seat, all as long as possible per manufacturer guidelines. Children should not graduate to an adult seat belt until it fits properly.

GHSA supports the policy that rear-facing infants should never be placed in the front seat of passenger side air bag equipped motor vehicles (unless the vehicle has no rear seat but has an air bag shut-off switch.) NHTSA and GHSA members are encouraged to undertake educational campaigns to inform parents of the dangers of putting infants and young children in the front seat.

GHSA strongly concurs that children 12 years old and under, particularly those riding in vehicles with passenger side air bags, should be encouraged to sit in the rear seat of motor vehicles. In order to increase restraint use by older children, GHSA supports research and development of restraint systems for children up to and including those 12 years of age or those above 65 lbs.

Based on currently available research, GHSA believes that design and compartmentalization provide strong pupil protection on <u>school buses</u>. GHSA recognizes the challenges of retrofitting three-point belts on older buses but recommends that communities consider the use of such equipment on newly purchased buses to lower the risks posed by side-impact and high-speed rollover crashes.

GHSA encourages states to enact booster seat legislation in order to protect young children who are too large to be placed in child restraints.

GHSA endorses the LATCH (Lower Anchors and Tethers for Children) requirements and urges states to undertake educational programs explaining how LATCH-equipped child restraints should be used with LATCH-equipped vehicles.

#### **D.5** Air Bags and Crash Testing

GHSA urges NHTSA to test the efficacy of air bags using crash dummies of various sizes, belted and unbelted, in various positions at various speeds in order to duplicate real world crash experiences to the greatest practicable extent. GHSA further urges auto manufacturers, under the guidance of NHTSA, to develop, test and offer expeditiously advanced air bag technology that protects all-sized occupants in new model vehicles.

GHSA supports deactivation of air bags only under controlled circumstances (such as for medical conditions) in which NHTSA makes the final approval on deactivation requests in accordance with the

## **D. Occupant Protection**

federal regulations of November 21, 1997. GHSA also recommends establishing a registry with deactivation approval that customers of used vehicles could consult prior to purchase.

GHSA urges the federal government and others to utilize a wide range of crash test dummy types to ensure crash tests and ensuing engineering changes can better protect all vehicle occupants.

#### **D.6 Federal Occupant Protection Training Programs**

GHSA supports and encourages the certification and adoption of NHTSA's current occupant protection curriculum by the states and the inclusion of the curriculum or its equivalent in the required training for police recruits and for the in-service training of officers. Furthermore, GHSA supports holding regional or state police fleet safety workshops in those areas where additional commitment to occupant protection on the part of law enforcement executives would be desirable.

#### **D.7 Pickup Trucks**

Ejection from the cargo space of pickup trucks accounts for needless highway safety injuries and deaths, particularly of children and teenagers. GHSA strongly encourages all states and territories to adopt and enforce laws prohibiting all passengers from riding in the cargo areas of pickup trucks.

Impaired driving is a serious problem threatening the safety of our nation's highways. There are, however, methods of combating this crisis, particularly in the areas of law enforcement, legislation, training programs and evaluation and treatment for offenders.

#### E.1 Illegal Per Se Impaired Driving Laws

GHSA supports laws setting the Blood Alcohol Content (BAC) level for driving under the influence (DUI) at .08, and acknowledges the benefits of laws setting the per se BAC level for DUI .05, for drivers not already covered by stricter standards. GHSA recommends that states set their per se BAC at .05 when practical and feasible.

GHSA encourages states to adopt zero tolerance drug impairment laws for illicit drugs, and for all drugs (barring legal prescriptions and other legal use) for drivers under age 21. Currently available research has not identified a scientifically sound illegal per se limit for marijuana, or for many other drugs.

#### **E.2 Impaired Driving Offenses**

GHSA urges states to amend statutes to provide separate and distinct sanctions for alcohol- and drugimpaired driving that could be applied individually or in combination to a single case. States should adopt enhanced penalties for multiple (poly-) drug use (including alcohol) while driving as the combination of alcohol and other drugs should be considered an aggravated offense.

#### E.3 Detecting and Prosecuting Impaired Drivers

Detection of impaired drivers is an important component of any impaired driving system.

New technologies can help streamline impaired driving enforcement and adjudication. Passive alcohol sensors, preliminary breath and saliva test devices, roadside evidential testing instruments and in-car video cameras have all been shown to be effective tools for identifying impaired drivers. GHSA supports the use of electronic warrants and criminal justice data systems to expedite and improve law enforcement operations generally, and drug impaired driving investigations in particular.

GHSA supports the use of these devices technologies and encourages states to enact enabling legislation allowing their use. GHSA encourages industry partners to continue developing and improving testing devices and other technologies so that drug impaired driving investigations can eventually mirror the efficiency and affordability of alcohol impaired driving investigations.

GHSA encourages all states to provide increased training to law enforcement on identifying drugged drivers. GHSA supports the use of the NHTSA Drug Evaluation and Classification (DEC) training program that trains Drug Recognition Experts (DRE) to detect and apprehend drug-impaired drivers. As a means of expanding the enforcement of drug-impaired driving laws, GHSA calls on states to train officers in the 16-hour Advanced Roadside Impaired Driving Enforcement (ARIDE) program. GHSA supports the use of law enforcement phlebotomy programs.

States should invest in necessary forensic testing laboratory staff, equipment and training. GHSA urges the federal government, states and the private sector to collaborate to develop and adopt standard protocols, toxicology metrics and procedures for forensic testing laboratories to use in identifying drugs that impair driving.

#### E.4 Impaired Driving Prosecution, Adjudication, Supervision and Treatment

High-risk impaired drivers require closely tailored sanctions, supervision and treatment to prevent recidivism. GHSA encourages a comprehensive, multi-disciplinary, individualized approach to impaired driving criminal justice that identifies the root causes of offender behavior and determinates appropriate consequences, including evidence-based treatment.

Prosecutors, judges, defense attorneys, other court officials and others in the criminal justice system should work collaboratively to ensure both the public's and the offender's interests are served.

States should provide increased training for prosecutors and judges to help in the successful prosecution of drug-impaired drivers.

GHSA supports repeat impaired driving laws that provides that individuals convicted of second or subsequent offenses receive: a) at least thirty days of community service or five days of imprisonment; b) at least a one year or either suspension of driving privileges, required use of an ignition interlock and/or participation in a 24/7 sobriety program; and c) assessment and treatment. Third and subsequent offenders should receive at least 60 days of community service or 10 days of imprisonment.

#### E.5 Administrative License Suspension or Revocation

GHSA supports prompt administrative license suspension or revocation for persons arrested for driving under the influence (DUI), refusing to take sobriety tests or failing such tests. GHSA urges all states to enact such provisions to reduce the instances of impaired driving. GHSA encourages States to consider expanding their existing Administrative License Revocation (ALR) laws or enacting new ALR laws for drug-impaired drivers who fail or refuse a drug test.

#### **E.6 Vehicle Sanctions**

GHSA encourages states to enact penalties that will deter convicted DUI offenders from driving such as plate or registration confiscation, vehicle impoundment or immobilization or ignition interlock devices and vehicle seizure.

Ignition interlock devices have been found to reduce impaired driving recidivism. GHSA supports the use of ignition interlock devices by states for convicted or administratively sanctioned first time offenders and strongly encourages states to enact interlock laws for that purpose. Offenders should be granted access to ignition interlocks as soon as possible, including between arrest and court proceedings. Ignition interlock programs should be coupled with assessment and treatment programs to address potential underlying substance abuse issues. Programs should be designed to keep offenders that violate program rules in the program or under other supervision. Graduation from required ignition interlock use should be based on

program compliance. To the extent practicable, ignition interlock programs should be offender funded. The use of ignition interlocks should be coupled with other sanctions, supervision and treatment to discourage future recidivism.

GHSA also urges the federal government to fund further research on the use of interlock devices by convicted or administratively sanctioned drunk drivers.

GHSA supports research on advanced impaired driving detection technology and urges Congress to adequately fund such research.

#### E.7 High Risk Impaired Driving Offenders

GHSA urges states to adapt impaired driving prevention systems to identify high-risk impaired drivers who have a high likelihood of recidivism, which includes offenders that have a substance abuse or mental health disorder, high-BAC offenders, repeat offenders and poly-substance offenders.

GHSA supports enhanced penalties for first time offenders with high BAC levels (e.g. .15 and above) and repeat DUI offenders and urges states to enact high BAC laws. These penalties should be graduated, based on the BAC of the driver and/or the number of convictions. The penalties should include increased fines, license revocation, home detention and electronic monitoring, vehicle sanctions (such as registration cancellation and license plate seizure, impoundment, immobilization and ignition interlocks), intensive supervised probation, professional evaluation and treatment. GHSA strongly advocates for the integration and coordination of administrative, criminal justice and treatment systems affecting these higher risk drunk drivers.

#### E.8 Open Container Laws

GHSA encourages all state and local governments to pass laws that prohibit the consumption of alcoholic beverages and the possession of open alcoholic beverage containers in the passenger compartments of motor vehicles.

GHSA encourages states where marijuana is legal to possess to pass laws that prohibit the use of marijuana and the possession of unpackaged marijuana or open or unsealed marijuana containers and paraphernalia in the passenger compartment of motor vehicles.

#### **E.9 Driving While Suspended**

Impaired drivers who drive with a suspended or revoked license are a growing problem in this country. Vehicle sanctions (e.g. license plate seizure; vehicle impoundment, immobilization, or seizure, ignition interlocks) have been shown to be effective against driving while suspended. States should ensure that their vehicle sanction laws also apply to those impaired drivers who drive with a suspended or revoked license.

#### E.10 Enforcement of DUI Laws

GHSA supports the use of sobriety checkpoints or saturation patrols in a comprehensive traffic safety program to detect and apprehend alcohol and other drug-impaired drivers. GHSA further encourages states and localities, to the extent current resources permit, to establish dedicated DUI patrols whose sole responsibility is to enforce DUI laws. The enforcement of DUI laws should be carried out in an equitable manner.

#### E.11 BAC/Drug Testing and Reporting

Improved BAC/Drug testing should be a priority for every state because BAC/Drug data will give states an accurate picture of the impaired driving problem in their state. All states are encouraged to enact mandatory BAC/Drug testing laws for deceased and surviving drivers and pedestrians involved in a fatal crash or where there is a likelihood of a fatality. States are encouraged to support law enforcement officers, medical examiners, lab criminalists and coroners with the training and equipment they need for BAC/drug testing and reporting. States should also develop specific procedures for the Fatality Analysis Reporting System (FARS) analysts so they can accurately report BAC/drug test results. States are also encouraged to convene state forums on BAC/drug testing which would bring all the responsible agencies together to identify and overcome state BAC/drug testing and reporting problems.

GHSA also urges states to: 1) enact tougher penalties for impaired driving offenders who refuse to take BAC/drug tests; and 2) make test refusal admissible in court. The penalties should be greater than those for failing a BAC/drug test. The intent is to discourage test refusal and to close a significant loophole in state impaired driving laws.

The provisions of state insurance law (referred to as Uniform Accident Sickness Policy Provision Laws or UPPL) or insurance codes that deny payment for the treatment of impaired persons should be repealed because such laws/codes hamper state BAC/drug reporting efforts. States should also explicitly prohibit insurance companies from excluding coverage for injuries suffered under the influence of alcohol and/or drugs. Without an explicit prohibition, medical personnel may be reluctant to test BAC/drug levels on injured persons in emergency settings.

#### **E.12 Designated Driver Programs**

GHSA supports community-based designated driver and safe rides programs and urges states and localities to implement them for persons aged 21 and above.

#### **E.13 Server Training Programs**

GHSA recommends that NHTSA, state highway safety agencies, industry representatives, liquor control agencies and grassroots organizations with an interest in the issue of server training meet and develop a model program and establish strategies for implementing such a server training a model program. States are also encouraged to enact mandatory server training laws.

#### E.14 DUI Courts

DUI courts are a promising strategy to change the behavior of offenders who are repeatedly arrested for driving while impaired by addressing the offender's abuse of alcohol. Typically in a DUI court, there is prompt intake and assessment, court-ordered individualized sanctions for offenders, frequent drug and alcohol testing, treatment and aftercare services, and frequent monitoring and ongoing judicial interaction with the offender. Prosecutors, defense attorneys, judges, probation, law enforcement and treatment professionals usually function as a team to systematically change the impaired driver's behavior. The individualized sanctions are structured to maximize the probability of rehabilitation and minimize the likelihood of recidivism.

These courts can involve specialized court calendars or dockets for individuals, juveniles or families rather than specifically designated district courts.

GHSA supports DUI courts and urges states to work with their state criminal justice agency counterparts to implement them where appropriate.

#### **E.15 DUI Offender Monitoring**

Dedicated DUI detention facilities, home confinement and electronic monitoring, intensive supervised probation and close monitoring by individual judges have all been shown to significantly reduce recidivism by convicted DUI offenders. States should enact a DUI offender monitoring program and offenders should be required to bear a substantial share of the program costs.

GHSA supports the use of continuous alcohol monitoring, 24/7 sobriety, and similar programs, in conjunction with compliance-based monitoring, treatment, and other interventions, especially to address offenders' underlying substance abuse issues and provide flexibility and cost-savings to communities for offender supervision.

#### **E.16 Plea Bargaining and Diversion Programs**

Diversion programs allow a drunk driving offense to be dropped if the offender agrees to enter an education, treatment or other rehabilitation program. Plea bargaining allows a DUI offender to avoid being convicted by accepting the penalty for a lesser or non-alcohol offense. Both of these approaches allow offenders to escape impaired driving penalties and undermine many elements of a comprehensive DUI system. States should restrict plea bargaining and limit diversion programs to first-time offenders with low BACs or, where possible, eliminate such programs altogether. GHSA opposes programs to expunge, seal or otherwise obscure impaired driving offenses that might prevent the identification of repeat DUI offenders.

#### **E.17** Court Monitoring

Court monitoring is a mechanism for tracking DUI cases to determine how many are handled within a particular time frame, how many go to trial, what kind of sentences are being handed down and whether the sentences are consistent with authorized sanctions.

It is an effective tool for strengthening the adjudication of DUI cases. States are encouraged to use court monitoring to the extent practicable.

#### E.18 Alcohol Screening, Assessments and Treatment

Screening and brief interventions (SBI) in emergency settings have been shown to effectively reduce a first-time offender's future alcohol or drug consumption and the incidences in which he/she drives impaired. A comprehensive assessment can determine if an offender is a substance abuser or a high-risk impaired driver. Offender assessments — including first time offenders — combined with treatment have been shown to be effective in reducing recidivism. States should enact new laws or strengthen existing laws requiring all offenders to receive a screening and brief intervention, or if warranted from the SBI results, an alcohol assessment, as soon after arrest as practicable. Where appropriate, offenders should be referred to certified treatment facilities and (except for indigent offenders) should bear the costs of treatment.

#### **E.19 Self-Sufficient Impaired Driving Programs**

While federal impaired driving incentive grants provide an important source of funding for state impaired driving programs, the federal funding has been insufficient to meet state needs. States are encouraged to enact impaired driving programs funded by fees and fines on offenders. This source of funding can supplement federal funding and provide states with a much broader base of resources with which to fund impaired driving programs.

#### E.20 Underage Drinking and Drug Use

GHSA shares the national concern about underage drinking and drug use and joins other national organizations in addressing this pervasive problem comprehensively.

With respect to underage access to alcohol and drugs, GHSA encourages states to support a systematic approach to reducing access and availability through frequent compliance checks and programs such as Cops in Shops which are directed at the sale, purchase and consumption of alcohol or drugs by persons under the age of 21. Sellers of alcohol or drugs to underage persons should face substantial fines and the suspension of the business or liquor license and states should consider graduated penalties which increase with each conviction. GHSA strongly opposes the internet sale and direct shipment of alcoholic beverages or drugs to underage youth and urges that steps be taken to penalize sellers who engage in such practices.

With respect to public policy initiatives, GHSA supports the continuation of state laws that specify zero alcohol and drug use for drivers under age 21 (barring legal prescriptions and other legal use). GHSA strongly supports the continuation of uniform minimum drinking age of 21 and urges that such laws prohibit the purchase, possession and consumption of alcoholic beverages or drugs by those under 21, the sale or provision of alcohol or drugs to minors by adults and underage drinking or drug use in private clubs and establishments. GHSA supports beer keg registration laws that require the identity of the purchaser to be recorded and encourages states to enact such laws.

GHSA also urges states to enact or strengthen their dram shop liability laws so that commercial establishments can be held liable if they sold or provided alcohol to a minor who subsequently caused injury. States also should enact social host laws that hold parents and guardians liable for underage drinking or drug use in their house and anti-happy hour laws that eliminate drink specials in which alcohol is rapidly consumed over a short period.

With respect to enforcement, GHSA supports programs to enforce underage drinking and drug laws (such as shoulder tap and controlled dispersal programs) and programs that facilitate underage enforcement (such as juvenile holdover programs and teen courts). GHSA urges states and localities to use nuisance and loitering laws as a means of discouraging youth from congregating outside alcohol or drug outlets in order to solicit adults to purchase alcohol or drugs. GHSA encourages states to strengthen efforts to prevent and detect the use of false identification by minors in order to purchase alcohol or drugs. States are also encouraged to publicize any underage drinking or drug use law that is enacted.

With respect to community interventions, GHSA urges communities to assess the underage drinking or drug use problem in their community and adopt evidence-based, effective countermeasures. NHTSA and other federal agencies should offer technical assistance to communities and encourage community assessments through materials and processes developed by GHSA and others.

With respect to college programs, colleges and universities should adopt evidence-based, comprehensive approaches to prevent underage drinking and drug use. These could include alcohol and drug screening, educational strategies combined with other interventions, enforcement, policies that limit access to alcohol and drugs for those under 21 (particularly on campus or in the vicinity of the college or university) and social norming. NHTSA, the National Institute on Alcohol Abuse and Alcoholism (NIAAA) and other federal agencies should continue to evaluate college programs to determine which are effective and which are not.

With respect to program coordination, GHSA supports the federal Interagency Coordinating Committee on the Prevention of Underage Drinking, coordinated by the U.S. Substance Abuse and Mental Health Services Administration.

With respect to resources, GHSA urges that additional federal resources should be devoted to addressing the problem of underage drinking and drug use (and impaired driving) in a comprehensive manner.

#### **E.21 DUI Task Forces**

States are strongly encouraged to establish and maintain statewide DUI task forces of state and local officials, law enforcement, prosecutors, judges, motor vehicle administrators, treatment officials and other stakeholders deemed appropriate by the state. The DUI task force should be responsible for managing improvements in the state's DUI system by conducting a comprehensive assessment of the state's DUI system, establishing performance benchmarks for the system, setting up communications mechanisms between different components of the DUI system, making recommendations for improvements and ensuring that steady and reasonable progress is made in implementing the recommendations. States should periodically review the activities of the task force.

#### E.22 Alcohol and Cannabis Advertising

GHSA strongly encourages the alcohol and spirits industry and the cannabis industry to utilize advertising messages to discourage combining drinking and drug use with driving and to market all products responsibly. GHSA offers to work with other organizations in the transportation and highway safety communities to develop plans and support for responsible corporate advertising.

In addition, GHSA opposes any advertising aimed at the underage youth market. GHSA urges the alcohol and cannabis industries and their trade associations to support voluntary alcohol and drug advertising standards that prohibits alcohol or drug advertising if more than 15% of the intended audience is underage. Further, GHSA urges the Federal Trade Commission or other appropriate federal agency to monitor underage exposure to alcohol and drug advertising on a continuing basis and periodically report to Congress and the public.

#### E.23 Taxes on Alcoholic Beverages

GHSA is opposed to any legislative initiative to reduce the cost(s) of all regulated alcoholic beverages by lowering alcohol excise taxes. GHSA supports all efforts to reduce underage drinking and driving; therefore, the Association finds that lowering the cost(s) of all alcoholic beverage is extremely poor public policy and should not be enacted.

If states enact legislation that affects alcohol taxation, as a direct or indirect result of federal alcohol legislation, the resultant funds should be made available for impaired driving education and enforcement purposes.

#### E.24 Alcohol and Cannabis Equivalency

Federal agencies such as NHTSA and NIAAA of the U.S. Department of Health and Human Services have adopted the definition of an alcoholic drink as: 12 oz. of beer = 5 oz. of wine = 1.5 oz. of distilled spirits such as whiskey, gin or vodka. GHSA supports public education messages designed to increase awareness of alcohol equivalency as defined by the federal government and urges state motor vehicle administrations to include alcohol equivalency information in their drivers' manuals.

Though research is still developing, GHSA encourages the development of scientifically supported standardized dose equivalency for cannabis products to the extent possible for the purpose of encouraging responsible use.

#### **E.25 Federal Impaired Driving Training Programs**

GHSA supports and encourages the certification and adoption of the NHTSA DUI Detection and Standardized Field Sobriety Testing (SFST) curriculum or its equivalent and the inclusion of the curriculum or its equivalent at key points: required recruit training, Police Officer Standards and Training, an emphasis for Field Training Officers, and for in-service police officer training levels. GHSA urges states to consider periodic officer re-certification on impaired driving detection training, as practicable. Additionally, GHSA supports training for judges and prosecutors on the science of impairment,

enforcement laws and techniques, effective sentencing, drug impairment and other relevant impaired driving issues.

#### E.26 Victims' Rights

GHSA recognizes the importance of programs that assist victims and educate the public on the impact of impaired driving on victims. The Association recommends that states coordinate such programs as part of their comprehensive effort to address the impaired driving problem in their state.

GHSA supports the addition of DUI victim crash data to the list of violent crimes on the FBI's Unified Crime Reporting (UCR) database in order to acknowledge the impact of these crimes and provide new rights, services, and resources to victims.

GHSA urges that legislation to protect victim's rights continues to allow for the collection, analysis and reporting of crash data.

#### **E.27 Drug-Impaired Driving Research**

GHSA believes more research needs to be conducted on drug impaired driving. Some of the specific issues that need to be evaluated include: the scope of the drugged driving problem, the effects of drugs on driving, strategies to improve drugged driving data collection, more effective methods to detect drug impaired driving, and effective public education and outreach to drug users.

#### **E.28 Impaired Non-Motorized Travel**

GHSA urges states to clarify impaired driving laws addressing bicycling while impaired. States should also direct educational messaging on impairment towards bicyclists, pedestrians, micromobility travelers and other road users.

#### E.29 Cannabis Legalization and Responsible Use

Federal, state and community efforts to decriminalize or legalize marijuana for medical or recreational purposes should be accompanied by consideration of the impact on impaired driving and commensurate investment in traffic safety countermeasures. GHSA urges states that have legalized cannabis to implement evidence-based public education campaigns on safe and responsible use.

# F. Speed, Speeding and Aggressive Driving

#### **F.1 Speeding-Related Crashes**

A significant percentage of all crashes are speeding-related. These crashes are a serious problem and have contributed to the slowdown in the reduction of motor vehicle fatalities. GHSA recommends that NHTSA should maintain speeding-related crashes as a priority and conduct research on effective countermeasures, identify best practices and provide technical assistance to states that wish to address the issue. NHTSA should also examine a number of issues such as: the impact of speed fines and points, the effect of decriminalizing speed violations, the coordination of speed campaigns with those for safety belts and impaired driving, and potential changes to vehicle standards to limit the speed of passenger vehicles. Further, NHTSA should approach speed in an integrated manner by working closely with FHWA on speeding-related engineering issues and with FMCSA on the problem of speeding commercial motor vehicles.

GHSA supports the authorization of a federal incentive grant program to help states combat the problem of speeding. Such a program should encourage state and local speed enforcement initiatives, the use of automated speed enforcement and implementation of local speed education campaigns and speed management workshops.

#### **F.2 Speed Limits**

Speed limits should be part of a comprehensive speed management program including highway engineering, speed enforcement and public education. They should be established based on several factors including, but not limited to: highway design and research, highway operations, highway conditions, differences at state or municipal borders and traffic safety. Decisions regarding speed limits should consider the likely safety consequences (crashes, injuries, deaths and economic costs) of different speed limits. Speed limits should be perceived as reasonable by the public and be well publicized and vigorously enforced.

States should authorize, encourage and provide adequate support to local communities to reduce speed limits to improve safety.

#### F.3 Responsible Advertising

GHSA strongly encourages motor vehicle manufacturers and advertisers to utilize advertising messages to encourage safety instead of speed. GHSA offers to work with other organizations in the transportation and highway safety communities to develop plans and support for responsible corporate advertising.

# F. Speed, Speeding and Aggressive Driving

#### F.4 Use of Speed Detection Devices

GHSA supports state and national efforts to prohibit the sale and/or use of speed detection devices (e.g. radar and laser detectors) by the public because such devices undermine law enforcement efforts to control motor vehicle speeds and enhance highway safety.

#### **F.5 Aggressive Driving**

GHSA recognizes that aggressive drivers who do not follow the rules of the road are a hazard to all motorists, bicyclists and pedestrians on the roadway. GHSA encourages additional research into the issue and the sponsorship of effective countermeasures to detect, apprehend and discourage the aggressive driver.

# **G. Bicycles, Pedestrians, Micromobility and Other Personal Conveyances**

Bicyclists, pedestrians and other non-motorized and low speed travelers are frequently injured on streets and highways. Pedestrians in particular constitute a substantial percentage of injuries and deaths from traffic collisions in many areas. The progress made in reducing traffic trauma in other areas has not been reflected in pedestrian and bicycle injuries which have been declining at a much slower rate. GHSA strongly supports bicycle riding and walking as fundamental means of transportation, not as alternative modes. Roadways, structures and facilities should include bicycle and pedestrian elements in their basic design.

States should update crash reporting systems and practices to capture critical elements related to crashes involving bicycle riding and walking. GHSA urges states and communities to train law enforcement on traffic rules and roadway infrastructure designed for pedestrian and bicycle traffic, conduct education and enforcement campaigns to promote and enforce these laws, and increase awareness of key infrastructure. Generally, enforcement to protect non-motorized road users should focus on vehicle drivers. States should engage in data analysis to identify high-risk corridors and communities in order to allocate resources where most needed.

#### **G.1 Protective Helmets**

GHSA supports the use of helmets by all persons of all ages who ride bicycles and other unconventional vehicles and supports testing to assure all helmets meet mandatory federal safety requirements. GHSA encourages states to support the use of helmets, adopt helmet laws and continue to provide bicycle safety awareness programs. States are also encouraged to collect data on bicycle helmet usage to the greatest practicable extent.

#### G.2 Bicycle Safety

GHSA supports implementation of bicycle safety education programs and enforcement of mandatory bicycle helmet laws. The problem of bicycle safety should be researched, continually monitored and evaluated to determine the effectiveness of countermeasures and to document the progress that has been made in reducing the size and scope of the problem. Special bicycle safety programs aimed at young children and teenagers should also be implemented at the state and community levels.

GHSA urges states and communities to leverage infrastructure countermeasures to separate bicycle riders from traffic or to designate travel areas and traffic signaling specifically for bicycles.

# G. Bicycles, Pedestrians, Personal Conveyances and Motorized Devices

#### G.3 Pedestrian Safety

GHSA supports efforts to raise public awareness about the problem of pedestrian safety and encourages implementation of community-based pedestrian safety countermeasures.

GHSA urges states and communities to adopt evidence-based strategies to increase separation of pedestrians from motor vehicles, manage speed, make pedestrians more visible to drivers, and deploy engineering and enforcement measures to reduce speed on roadways with non-motored traffic.

Additionally, the Association urges state and local jurisdictions to implement special pedestrian safety emphasis programs for young children and older adults since these groups constitute the largest percentage of pedestrian fatalities and injuries.

GHSA also supports further research on pedestrian issues as well as monitoring and evaluating progress toward reducing pedestrian fatalities and injuries.

GHSA supports enforcement of traffic laws to protect pedestrians, in particular those laws protecting pedestrians crossing roadways at crosswalks.

GHSA urges the auto industry to make vehicles safer by exploring engineering changes to better protect pedestrians in collisions and by installing technologies to detect and automatically brake for pedestrians.

#### **G.4 Micromobility**

Many travelers are beginning to increasingly use micromobility devices for travel, either personally owned or as a service. This includes personal conveyance devices, which includes motorized devices like scooters, e-bikes, motorized wheelchairs, golf carts, mopeds, all-terrain vehicles, and self-balancing personal transporters. Travelers also sometimes share the road with human-powered scooters, inline skates, skateboards and motorized toy cars.

GHSA recommends that states and communities educate the public and train law enforcement on the safe and legal use of micromobility and how to share the road with micromobility devices. States should require that users of micromobility be trained in the safe use of their devices. States should also consider requiring protective helmets for micromobility users not protected by the vehicle. States and communities should consistently regulate motorized micromobility devices and establish rules regarding the use of such devices on sidewalks. Traffic rules for the use of e-bikes and e-scooters should be consistent with similar regulations regarding bicycles.

GHSA urges states and communities to collect more accurate data about micromobility crashes on police crash reports and use injury data to better identify the extent of micromobility crashes.

# G. Bicycles, Pedestrians, Personal Conveyances and Motorized Devices

#### **G.5 Low Speed Vehicles**

Low speed vehicles (LSV) are defined by NHTSA as those that are able to travel at 25 mph or less. Low speed vehicles are exempt from almost all federal safety standards applying to cars, and they are not required to meet any crashworthiness tests.

GHSA recommends that LSV's meet additional federal vehicle conspicuity standards so that they are more visible to nighttime drivers. Further, GHSA urges states to review their regulations for low-speed vehicles to ensure that more vehicles are registered, licensed and limited to roadways where there would be few potential conflicts with higher speed vehicles.

# H. Motorcycle Safety

Motorcyclists are nationally overrepresented in traffic crashes and, coupled with the greater vulnerability of the motorcyclist, this represents a serious highway safety problem. Hence, GHSA encourages funding for development, implementation and evaluation of statewide comprehensive motorcycle safety programs. At a minimum, these programs should address rider training, protective gear use, impaired riding, operator licensing, motorist awareness and conspicuity.

#### H.1 Motorcycle Helmet Laws

GHSA urges states to support the use of DOT-certified helmets by motorcycle riders of all ages, oppose efforts to repeal their universal motorcycle helmet laws and adopt motorcycle helmet laws for all riders. States should vigorously enforce their motorcycle helmet laws to ensure that motorcyclists are not using helmets that do not meet DOT standards.

#### H.2 Motorcycle Operator Training

All states should require motorcycle operator training for minors, novice, and re-entry riders by qualified instructors.

NHTSA, along with motorcycle organizations and other stakeholders, should develop a model motorcycle operator training program and quality control guidelines for instructors, deploy them at selected locations and then evaluate their effectiveness. Once the model curricula and instructor guidelines are complete, then states are encouraged to use them. States should also examine their motorcycle crash data to determine if the model training program should address specific state problems by emphasizing certain situations or skills. States should be encouraged to enhance their training to ensure that state-specific needs are met.

#### **H.3 Impaired Motorcycle Programs**

Impaired motorcyclists are a substantial proportion of total motorcycle fatalities and injuries. States should develop and implement programs for the impaired motorcyclist that include enforcement, sanctions (including fines and vehicle sanctions), and publicity about the enforcement effort. States are also encouraged to develop, deploy and evaluate other initiatives that discourage drinking and riding.

#### H.4 Licensing of Motorcyclists

All states should require motorcyclists to obtain a motorcycle operator license and endorsement before they ride on a public highway. In order to obtain the license, motorcycle operators should be required to pass knowledge, skills and vision tests unless the motorcyclist can demonstrate that he/she has completed a state-approved operator training program. States should actively enforce their motorcycle operator licensing laws.

NHTSA, along with motorcycle organizations and other stakeholders, should develop a model motorcycle operator licensing and testing program that includes graduated licensing for motorcyclists. NHTSA

## H. Motorcycle Safety

should ensure that this program measures the minimum skills and knowledge needed for safe riding and should evaluate its potential impact on crashes, fatalities and injuries. Once completed, states should be encouraged to implement the model program statewide, periodically evaluate its effectiveness and modify the program as necessary.

#### **H.5 Motorcycle Awareness Programs**

States should undertake awareness programs to promote motorcycle helmet use, publicize state motorcycling licensing laws, discourage impaired riding and encourage the use of protective and conspicuous clothing as well as increased conspicuity of the motorcycle. Additionally, states should undertake public information campaigns to raise motorists' awareness about sharing the road with motorcycles and should ensure that novice driver education and training courses include instruction on sharing the road with motorcycles.

#### **H.6 Motorcycle Research**

NHTSA should conduct a study on the causes of motorcycle crashes so that effective countermeasures can be developed and implemented.

# I. Traffic Safety and Law Enforcement

The proper enforcement of traffic safety laws is crucial for the safety and well-being of the public and will remain an essential element of safety programs for the foreseeable future. Traffic enforcement and criminal justice elements of highway safety provide significant value, including by reinforcing social norms, creating general deterrence for dangerous driving, stopping dangerous driving when it occurs and preventing recidivism among high-risk offenders.

#### **I.1 Professional Traffic Stops**

GHSA believes that traffic enforcement should be performed in an unbiased and professional fashion. No law enforcement agency should condone or direct the use of race, ethnicity, gender or socio-economic class as a reason for stopping a motorist.

#### I.2 Equity in Traffic Enforcement

Data clearly demonstrate that racial disparities are common in both the frequency of traffic stops and the outcomes of those encounters. GHSA also warns against systemic bias that may result from highway safety planning for where, when and how safety programs may or may not be implemented.

GHSA urges states and highway safety partners to consider steps to eliminate racial disparities and promote excellence in traffic enforcement, including:

- Involving impacted communities in highway safety planning consistent with GHSA's policies on equity and engagement;
- Promoting the collection and analysis of standardized racial data for every traffic stop to better understand potential disparities and allocate funding toward more effective enforcement. GHSA believes drivers should self-report race and ethnicity data in driver licensing records rather than relying on police officers to ask drivers or speculate.
- Encouraging law enforcement partners to work proactively to identify and eliminate bias in traffic stops or traffic enforcement;
- Refocusing traffic enforcement efforts on traffic safety; prioritizing the most dangerous and unlawful driving behaviors, such as speeding and driving under the influence, that put all road users at risk; and reducing pretextual traffic stops for traffic violations that often do not advance safety and thus undermining trust in highway safety programs;
- Encouraging modernized police recruitment and training standards to achieve more equitable enforcement outcomes and ensuring that law enforcement agency demographics more closely align with the communities they serve;
- Partnering with Vision Zero, Road to Zero and Safe System communities to promote holistic and collaborative approaches to highway safety;

# I. Traffic Safety and Law Enforcement

- Supporting driver licensing policies that improve equitable outcomes such as ensuring that license sanctions are limited to moving violations and exploring more flexible fee and payment structures for traffic citations, driver license fees and vehicle registration; and
- Empowering state, community and law enforcement leadership to hold accountable police officers who have violated public trust.

#### I.3 High Visibility Enforcement

High visibility enforcement is a proven, effective countermeasure and a cornerstone of state occupant protection, impaired driving and speed enforcement efforts. States are encouraged to highly publicize their enforcement activities, particularly those relating to occupant protection and impaired driving, in order to increase the effectiveness of those efforts.

#### I.4 Officer Safety and Wellness

GHSA supports law enforcement programs and departmental policies to promote safe driving practices among police officers, including seat belt use, distracted and drowsy driving.

GHSA supports the Below 100 program, which promotes the 5 tenets of: belt use, body armor use, speed management, situational prioritization and vigilance against complacency.

GHSA encourages law enforcement partners to consider a wide range of training to improve officer wellness, professionalism and community relations, including empathy training, stress management, mental health programs, implicit bias, de-escalation, use of force and officer intervention.

GHSA urges states to increase driver awareness of "Move Over" laws requiring vehicles to slow down or move over when passing public safety, emergency response and roadside assistance vehicles.

# J. Truck Safety

#### **J.1 Commercial Motor Vehicle Licenses**

GHSA supports Commercial Drivers Licenses (CDLs). Through the CDL program, many unsafe commercial motor vehicle drivers have been removed from the roadways. The program has proven to be an important safety tool for promoting safe commercial vehicle traffic.

GHSA recommends that the Federal Motor Carrier Safety Administration (FMCSA) consider further improvements in the CDL record-keeping system to eliminate the problem of multiple license issuances and to establish minimum standards for state driver history records of commercial motor vehicle drivers.

FMCSA should work with governors and state legislatures to develop standards that would restrict CDL holders from traffic violation "bypass or diversion" programs that prevent driving offenses from appearing on their driving records.

Additionally, FMCSA should examine the merits of a graduated licensing system for CDL applicants. Issuing an interim or probationary license with restrictions on activities and violations before attaining a full CDL may have safety benefits.

#### J.2 Motor Carrier Safety Assistance Program

GHSA believes that the Motor Carrier Safety Assistance Program (MCSAP) has been a catalyst for improving motor carrier safety in our states. The Association supports the program and urges that it be funded at the authorized levels. While GHSA supports the restructuring of MCSAP into a more performance-based program, we strongly oppose any effort to create performance-based disincentives within MCSAP.

GHSA members are encouraged to work closely with their MCSAP partners and to coordinate data and highway safety plans as required by federal statute. This collaboration will enhance states' ability to address safety comprehensively.

GHSA also supports the use of MCSAP funds for enforcement of traffic laws relating to commercial motor vehicles. The Association encourages law enforcement agencies to enforce aggressively laws involving commercial motor vehicles, particularly at high crash locations. Under the federal surface transportation legislation, MCSAP funds can be used to enforce traffic laws with any vehicle in the vicinity of a commercial motor vehicle. GHSA supports this expansion of MCSAP enforcement and encourages coordination of MCSAP enforcement efforts with enforcement efforts funded by federal behavioral grant programs.

#### J.3 Data Collection

GHSA encourages FMCSA to establish a more accurate annual census of motor carriers, increase the percentage of truck crashes that are reported and link safety compliance, rating and inspection data to crash data in order to identify high risk carriers. FMCSA should also encourage states to improve the collection of truck crash data by motivating them to adopt the Model Minimum Uniform Crash Criteria

(MMUCC) — the federal guidelines that incorporate the uniform data elements recommended by the National Governors' Association— when states revise their crash reporting forms and by providing incentives for the timely reporting of crash data. Additionally, FMCSA should undertake a comprehensive study to identify the factors that contribute to truck crashes. This would allow the Administration to prioritize its policies and programs concerning those factors that make the highest contributions to such crashes.

#### J.4 Entry-Level Driver Training

GHSA supports FMCSA's Entry-Level Driver Training rule for novice commercial motor vehicle drivers. Comprehensive training for new truck drivers will improve the ability and expertise of commercial drivers on the road and ensure that they are thoroughly familiar with federal motor carrier safety regulations and safe driving behavior.

#### **J.5 Enforcement**

FMCSA should continue to place a high priority on the enforcement of federal commercial motor vehicle safety regulations, increase the number of compliance reviews that are conducted each year with a special emphasis on high-risk carriers and increase the fines, particularly for repeat offenders. FMCSA should periodically evaluate the fines that are assessed of non-compliant carriers to ensure that they have the appropriate deterrent effect and increase the fines as necessary.

#### J.6 Fatigue

Fatigue has been identified as a major factor in single truck crashes and it may be a significant factor in all truck crashes. The current hours-of-service requirements may be one of the variables contributing to driver fatigue. Federal limits on hours-of-service are governed by regulations that do not reflect current research on fatigue and circadian rhythms. FMCSA should revise the existing hours-of-service regulations so that, at a minimum, they allow 12 off-duty hours (including eight hours of uninterrupted rest time) in any 24-hour period and do not allow any increase from the driving time currently permitted.

On-board recorders that track the hours of operation of heavy trucks can help to enforce hours-of-service regulations and eliminate falsification of logbooks in which drivers track hours driven. GHSA encourages the use of on-board recorders or other electronic monitoring systems to keep automatic records of truck hours-of-service.

The lack of adequate rest areas also contributes to commercial motor vehicle driver fatigue. FMCSA should continue to assess the adequacy of both public and private sector rest areas. Further, Congress should consider allowing joint public-private partnerships to finance rest areas on roadways with an identified need.

#### J.7 Insurance

Federal minimum insurance requirements for motor carriers help protect the consumer and determine the carrier's fitness for service. FMCSA should frequently examine liability insurance minimums, determine if they are adequate and revise as appropriate.

Additionally, states should be encouraged to adopt mandatory minimum liability insurance coverage levels for intrastate commercial vehicles that are equivalent to the federal minimum levels for commercial vehicles being operated in interstate commerce.

#### J.8 Truck Size and Weight

GHSA is concerned with the potential effect that increased truck size and weight could have on highway safety. Many states have increased speed limits, increasing the speed differential between large trucks and other motor vehicles. This raises concern regarding any increases in truck size or weight.

GHSA encourages the enforcement of current truck size and weight regulations. The Association opposes increases in the current federal truck size and weight limits unless and until it can be shown that such increases will not compromise safety. GHSA supports the use of truck underride guards to prevent underride crash injuries and fatalities.

GHSA also encourages jurisdictions to install commercial vehicle weigh-in-motion and electronic screening technology that, in addition to identifying overweight problem vehicles, can aid in reducing the potential hazards of slower moving commercial vehicles exiting and entering the roadways.

#### J.9 Hazardous Materials

GHSA recognizes that hazardous materials traveling throughout our country are a necessity, but also increase the potential for serious problems. It is critical that response teams are well trained and equipped to ensure appropriate response in the event of an incident. Enforcement of hazardous materials regulations on the roadways is also critical to minimizing the potential threat of serious hazardous materials incidents.

GHSA supports the continuation of quality federal training for hazardous materials inspectors and the provision of technical assistance to states so that they may be able to develop their own high-level training programs that are consistent with federal standards.

GHSA also encourages federal hazardous materials inspectors to work with states to investigate the safety of hazardous materials shippers as well as carriers. Expansion of safety inspections is necessary in order to address all aspects of the hazardous materials transportation problem.

#### **J.10 Speed Detection Devices in Commercial Motor Vehicles**

GHSA supports the ban of all speed detection devices (e.g., radar detectors, laser detectors, etc.) in commercial motor vehicles. GHSA supports the use of speed governors in commercial motor vehicles over 25,000 GVW.

# J. Truck Safety

### J.11 Sharing the Road with Commercial Motor Vehicles

FMCSA has a public information campaign to educate other road users on the physical limitations of large trucks and how to share the road with them. GHSA supports this campaign and encourages its members to participate actively in and promote the campaign in order to reduce the number of crashes involving large trucks.

### J.12 Truck Conspicuity

GHSA supports federal regulations which would require all new and previously marked commercial motor vehicles over 26,000 lbs. to have specific reflective markings on the sides and rear of truck trailers. The required reflective markings will reduce the number of truck-passenger car crashes, injuries and fatalities by allowing motorists to detect commercial motor vehicles better at night and under conditions of reduced visibility.

# J.13 Impaired Driving

GHSA supports federal rules and regulations for legal level of impairment for <u>commercial motor vehicle</u> (CMV) operators at .04 BAC. GHSA urges states to strictly enforce these requirements by providing ongoing impaired driver training detection for commercial vehicle enforcement officers.

#### **J.14 Distracted Driving for Commercial Vehicles**

GHSA supports the federal ban on texting by drivers of commercial motor vehicles. The Association encourages the coordination of distracted driving educational and enforcement campaigns funded under MCSAP with those funded by federal behavioral grant programs.

#### J.15 Safety Belt Enforcement

GHSA recommends that state enforcement of mandatory safety belt laws focus on all drivers, including drivers of commercial motor vehicles. GHSA also urges commercial motor vehicle shippers and carriers to adopt and enforce mandatory safety belt use policies.

#### **J.16 Younger Drivers of Commercial Motor Vehicles**

Although GHSA understands the driver shortage problem in trucking, the Association is opposed to licensing drivers under the age of 21 for CMVs. Motor vehicle crashes are the leading cause of death for 15-20 year olds. Any expansion for younger drivers, therefore, will put the riskiest drivers on the road, regardless of the level and intensity of training.

# J. 17 Speed Limiters on Commercial Motor Vehicles

GHSA supports the use of speed limiters in CMVs and urges the FMCSA to issue rules to leverage the safety benefits of this technology.

# K. School Bus and School-Related Safety

### K.1 School Bus Loading and Unloading

GHSA supports comprehensive training for children, teachers, parents and school bus drivers in the proper loading and unloading of school buses and feels that such comprehensive training should be made a regular part of each state's school transportation safety curriculum. This training should include, but not be limited to: the procedures for loading and unloading a school bus; other related areas such as getting to and from the bus; waiting for the bus; and bus riding behavior as it relates to safety.

#### K.2 School Bus Vehicle Safety and Safety Equipment

GHSA endorses the National Transportation Safety Board (NTSB) and National Academy of Sciences (NAS) recommendations for retiring pre-1977 buses as expeditiously as public finances allow; regulating pre-1977 buses in private use by requiring annual safety inspections and compliance with minimum vehicle safety equipment standards; increasing coordination of research efforts and cooperation in designing safer school buses; and including school bus drivers under all licensing and driver qualification phases of the Commercial Driver's License regulations.

GHSA also endorses the use of school bus safety devices such as stop-arms, cross-view mirrors, crossing control arms, electronic sensors and other devices, and encourages states to implement the use of these devices. GHSA supports the use of automated enforcement to enforce school bus passing and school speed zone rules.

#### K.3 Safe Routes to School

States should take steps to enable children to walk and bicycle to school safely. SHSOs are encouraged to participate in the planning, development and implementation of federally funded projects and activities that improve safety in the vicinity of schools. In particular, SHSOs should provide public awareness campaigns and outreach to press and community leaders, traffic enforcement in the vicinity of schools and curricula for students on bicycle and pedestrian safety.

# L. Traffic Records

# L.1 Uniform Data Collection and Reporting

States rely heavily on traffic records in order to identify highway safety problems, select program alternatives and evaluate the effectiveness of safety programs. GHSA believes that accurate federal and state data collection, reporting, analysis and linkage are critical to the success of highway safety programs and also provide the basis for program evaluation and cost-benefit analysis.

Crash data standardization is needed to measure progress in highway safety across the nation. GHSA encourages state and local jurisdictions to implement the uniform crash data elements of the Model Minimum Uniform Crash Criteria (MMUCC). States are also encouraged to collect the uniform data elements of the National EMS Information System (NEMSIS).

GHSA also supports the development of integrated state traffic records systems with linkage between databases such as MMUCC, NEMSIS, driver, vehicle, roadway, citation and adjudication and other injury databases.

# L.2 DUI Information Systems

GHSA supports states' efforts to create and implement DUI information systems for the purpose of tracking offenders from arrest through imposition and completion of administrative or judicial sanction, identifying high-risk impaired drivers, identifying the problems associated with impaired driving and effectively evaluating countermeasures. NHTSA has developed guidelines for a model state DUI information system. GHSA supports the model guidelines and urges the federal government to provide adequate funding for implementation of state automated DUI information systems that are consistent with the model guidelines to the maximum extent practicable. Additionally, NHTSA should provide the necessary leadership to promote DUI information systems, convey their importance to states, collaborate with other federal agencies to link DUI-related databases, provide technical assistance and promote best practices.

# L.3 DUI Records Retention

In order to identify repeat offenders, it is important to retain drunk driving records for a long time and allow for long "look back" periods. States are urged to retain drunk driving records to allow at least a 10-year look back period.

# **M. Roadway Safety**

# **M.1 Work Zone Safety**

GHSA supports an emphasis on work zone safety and encourages public/private partnerships to address this problem. GHSA encourages enhanced public awareness of work zone safety through training, education, enforcement and the media. GHSA also encourages innovative approaches, such as the use of new technologies, to reduce injury exposure of persons in the work zone.

### M.2 Strategic Highway Safety Planning

Coordination and integration of roadway safety, work zone safety, truck safety, rail grade crossing, emergency medical services and other safety programs with driver behavior programs are critical if safety activities are to reach safety goals and have a positive impact at the state and sub-state levels. GHSA strongly encourages every state to coordinate its overall highway safety program by developing a strategic performance-based highway safety document (a Strategic Highway Safety Plan or SHSP) that sets statewide safety goals and coordinates specific safety plans required by federal statute. The state Highway Safety Plan/Performance Plan (HSP/PP) should be coordinated with the comprehensive statewide safety plan and should strive to reach the safety goals expressed in the strategic state safety document. SHSPs should continue to include behavioral highway safety countermeasures. States should revise their SHSPs at least once in between federal reauthorizations.

# M.3 Highway Rail Grade Crossing Safety

GHSA urges states to continue to address the problem of grade crossing safety; develop plans for systematically correcting safety problems at public grade-crossings; utilize federal, state and other funds for implementing their grade crossing safety improvement plans; and enforce grade crossing laws. GHSA strongly supports Operation Lifesaver and continued federal funding for the program.

#### **M.4 Automated Enforcement**

The Association urges states to utilize automated enforcement to address the problem of red light running, speeding, school bus and school zone violations, work zone violations, and distracted driving.

In order to maximize safety benefits, jurisdictions should use automated enforcement appropriately and effectively. GHSA therefore endorses the following principles:

- Automated enforcement should be deployed in an equitable manner, consistent with GHSA's best practice recommendations on equitable enforcement and community engagement in highway safety planning. Each automated enforcement program should be advised by a comprehensive stakeholder committee.
- Automated enforcement should be used at high crash sites or in situations where traffic law enforcement personnel cannot be deployed safely. If traffic engineering can help address the problem, there should be an engineering analysis of each site before automated enforcement

systems are installed and citations issued. Automated enforcement should focus on violations with the greatest safety impact.

- Automated enforcement is not to fully replace traditional law enforcement personnel. Automated enforcement is also not to mitigate safety problems caused by deficient road design, construction or maintenance.
- Use of automated enforcement should be preceded by a public information campaign. The campaign should continue throughout the life of the automated enforcement program.
- Automated enforcement programs should strive for substantial transparency, due process and focus on safety impact. Program rules, procedures, and outcomes should be clear and publicly available. The program administrators should be highly responsive to inquiries from offenders and the public. Violations should be reviewed and approved by law enforcement or appropriately trained personnel. The program should be advertised by prominent warning signs at automated enforcement locations.
- Automated enforcement should not be used as a revenue generator. Compensation paid for an automated enforcement system should be based on its value and not on the amount of revenue it generates nor the number of tickets issued. Revenues derived from the automated enforcement program should be used solely to fund highway safety functions.
- The implementing jurisdiction should collect and analyze safety data about the program on an ongoing basis, carry out regular field equipment reviews, and undertake a comprehensive evaluation of the enforcement program within three years of the program's initiation. If positive safety outcomes do not occur, then the program should be terminated.

# N. Connected and Autonomous Vehicle Technology

GHSA supports the development and deployment of intelligent transportation systems, connected vehicle technology, driver assistance features, and automated driving to improve road safety, mobility, and convenience. GHSA urges law enforcement and other first responder agencies to train personnel for the new technologies appearing on the roadway.

#### N.1 Connected Vehicles and Intelligent Transportation Systems (ITS)

GHSA urges federal and state government leadership to continue conducting research, organizing demonstration programs, and providing pilot funding for connected vehicle and ITS projects, including vehicle-to-vehicle (V2V), vehicle-to-infrastructure (V2I), and vehicle-everything (V2X) communications.

### N.2 Advanced Driver Assistance Systems (ADAS)

GHSA supports the expedited deployment of ADAS and crash avoidance systems for their life-saving benefit to the human-operated driving environment. GHSA urges research to document the effectiveness of these features. The safety community should collaborate on solutions to address the driver behavioral risks posed by ADAS systems where driving responsibility is shared by the vehicle and driver. GHSA recommends that the safety community undertake efforts to educate consumers on the benefits and safe use of this technology and the prevention of misuse and abuse.

GHSA supports a federal mandate to require V2V communication on light vehicles to expedite the deployment of ADAS and crash avoidance features across the passenger fleet. The federal government should guarantee the integrity of the 5.9 GHz band of the wireless spectrum for use of vehicle safety-related dedicated short range communication (DSRC) unless the band can be safely shared for other purposes.

#### N.3 Autonomous Vehicles (AVs)

GHSA supports a national framework for AV policy that adapts current federal, state, and local roles in transportation for the automated context. The federal government should set and enforce Federal Motor Vehicle Safety Standards, investigate and manage recalls, regulate interstate commercial vehicle operations, and collaborate with states and communities to develop and implement safety programs. State responsibilities include licensing drivers, registering vehicles, enacting and enforcing traffic rules, investigating crashes, aggregating crash data, and regulating insurance and liability. All levels of government should aim for substantive national harmonization of AV laws and regulations.

GHSA calls for additional research on the intersection of AVs and traffic safety. The safety community should collaborate on solutions to address the driver behavioral risks posed by AV systems where driving responsibility is shared by the vehicle and driver, as well as risks that emerge from a mix of autonomous and non-autonomous vehicles and road users in traffic.

# **O. Driver Licensing and Education**

# **O.1 Driver Education/Training**

Driver education provides safety benefits for novice drivers. Yet, driver education is significantly underfunded and increasingly inaccessible. GHSA urges states and communities to invest in the delivery of driver education to support the learning to drive process.

GHSA supports the model driver education/training curriculum that would complement and be integrated with graduated driver licensing laws. The curriculum should continue, at a minimum, to focus on vehicle handling and crash avoidance, driver behavior and risk reduction, roadway features and their safety implications, and vehicle-road user interactions for all types of vehicles and road users (e.g., car-truck, pedestrian-car). There should continue to be learning components specifically geared to the parents of young drivers that includes information on graduated driver licensing, the risk for teen drivers and the critical role they play in coaching and mentoring their new driver. The curriculum should continue to take advantage of current adult learning research and utilize new technologies as appropriate. NHTSA should continue to promote the adoption of the model curriculum and partner with states and jurisdictions to evaluate the results and make refinements as needed.

GHSA supports the minimum certification standards for driver education teachers/instructors and encourages state adoption. NHTSA should continue to provide technical assistance to states to help them utilize the model curriculum and teacher/instructor standards and make other improvements in their driver licensing systems.

# **O.2 Driver Records**

GHSA supports the concept of one driver, one driver's license record. GHSA supports efforts to develop electronic systems for the collection of driver licensing and driver history information since such a system will facilitate the exchange of driver licensing and history information between states. GHSA supports federal government funding to states so that they can develop an appropriate electronic system that meets both federal requirements and state needs.

# **O.3 Driver License Interstate Compacts**

GHSA strongly encourages state membership in the Non-Resident Violators Compact, Driver License Compact, Driver License Agreement, and successor initiatives, and encourages the adoption of a one license/one record policy, and a classified Driver Licensing Program.

# **O.4 Graduated Driver Licensing for Novice Drivers**

GHSA supports graduated driver licensing (GDL) for novice drivers, particularly teenaged drivers. Recognizing that driving is a complex task and that skills increase with experience, GHSA encourages all states and jurisdictions to adopt a 3-staged GDL system for all new drivers under age 21. GDL programs, at a minimum, should include the following components:

# **O. Driver Licensing and Education**

- A learner's permit available at age 16 with a minimum holding period of at least twelve months;
- Adult supervision of learners permit holders by a licensed driver over age 21, including a requirement for at least 30-50 hours of supervised practice driving;
- Mandatory completion of state-approved driver education, including an on-the-road driving phase, during the learner phase;
- A provisional license that is granted after the learner's permit and must be held until age 18 before a full license is granted;
- Nighttime driving restrictions for provisional license holders starting no later than 10:00 pm;
- Mandatory safety belt use;
- A restriction on passenger under age 21;
- Distinctive provisional driver's licenses;
- Zero tolerance for alcohol and drugs;
- License suspension for any impaired driving conviction or implied consent refusal;
- Extension of the GDL stage for moving violations;
- Programs to support parent engagement in the learning-to-drive process; and
- Prohibition on all use (handheld and hands-free) of mobile electronic devices.

#### **O.5** Fitness to Drive

Since medical impairment has become more frequently identified as a contributing factor in vehicle crashes, GHSA urges states to adopt a comprehensive system to address the needs of drivers with physical or cognitive conditions that may impair the safe operation of a motor vehicle.

States should use in-person license renewal, crash data, and physician, law enforcement, and family referral to identify potentially at-risk drivers for further review. GHSA encourages every state to establish a Medical Advisory Board (MAB) or draw upon independent medical expertise with the capacity to assist motor vehicle administrators in: 1) developing medical guidelines/policies for driver licensing and 2) determining the safety fitness of operators that have been identified as having a medical condition that may impair their ability to drive. States should offer conditional drivers licenses that enable drivers with medical risks to stay safely mobile as long as possible.

# P. Driver Safety Issues

# **P.1 Drowsy Drivers**

Fatigued, drowsy drivers of all types of vehicles are a major cause of crashes on the nation's roadways. GHSA encourages continued data-collection, research and study into the issue of the drowsy driver and the development of appropriate and effective programmatic and legislative countermeasures.

GHSA urges states and communities to educate drivers about drowsy driving, train law enforcement to identify drowsy drivers and the role of fatigue in crashes, consider later school start times, and collaborate with industry, especially with night and shift workers, to encourage appropriate rest policies and practices.

# **P.2 Mature Drivers**

Researchers estimate that the population of older Americans will expand significantly over the coming decades, leading to an increased number of older drivers on the nation's roads.

The needs of mature drivers could be addressed by making highway signs bigger and brighter; maintaining roadway signs and markings to the highest level of accepted performance; passing safety belt use laws; adopting state uniform vision standards; and researching crash protection for mature drivers. In addition, early warning programs should be developed to help mature drivers better understand their driving capabilities. Improvements should be made in the licensing process so that safe mature drivers are kept on the road as long as possible.

The Federal Highway Administration (FHWA) should provide technical assistance to states to help them implement the Older Driver Design Guide, and FHWA should evaluate the effectiveness of these improvements. NHTSA should work with the American Association of Motor Vehicle Administrators (AAMVA) to develop improvements to state licensing processes for mature drivers.

# **P.3 Young Adult Drivers**

GHSA recognizes that the 21-34 year old age group is over-represented in traffic crashes and is one of the highest risk-taking group of drivers. GHSA supports all efforts to identify causes and implement appropriate countermeasures, including enforcement and education, to reach this specific demographic and to reduce its involvement in traffic crashes.

# **P.4 Workplace Safety Programs**

GHSA recognizes that traffic crashes are the leading cause of death, injury and loss of lifetime productivity in the workplace. GHSA supports workplace safety efforts aimed at reducing traffic crashes on and off the job.

As part of a company's or agency's employment policies, employers should forbid impaired driving, ban text messaging and discourage the use of cell phones and other electronic devices when driving except in

emergency situations, require mandatory seatbelt usage and obedience to all traffic laws and safe driving practices.

#### **P.5 Distracted Driving**

There are many distractions which may prevent a driver from focusing on the complex task of driving: physical tasks and activities within the vehicle, talking to passengers, observing objects and events outside the vehicle, using an electronic device, as well as cognitive tasks. Navigational interfaces and dynamic displays are available in most new vehicles and more will be available in the near future. These features may also distract drivers.

The federal government should fund considerably more research to determine the scope and nature of the distracted driving problem and effective countermeasures and the effect of electronic device use on driving behavior. GHSA urges the federal government, states, communities and partners to collaborate to collect more accurate data about distracted driving.

GHSA opposes federal legislation that would penalize states for not restricting the use of cell phones or other electronic devices.

The highway safety community should collaborate to better identify successful culture change strategies to prevent distracted driving. The federal government should fund a comprehensive media campaign to educate the public about the dangers of distracted driving and how drivers can manage driver distractions. Producers and providers of electronic devices and in-vehicle interactive system should also undertake major educational campaigns to inform the public about the proper use of these devices. As part of their federal traffic safety grant agreement, states should encourage grantees to adopt policies that address distracted driving. State agencies should also be encouraged to adopt policies addressing distracted driving.

As part of a state's graduated licensing law, novice drivers should be prohibited from text messaging or using cell phones and other electronic devices for non-emergency purposes while driving.

GHSA supports state legislation that would ban hand-held cell phone use and text messaging for all drivers, electronic devices used for entertainment purposes with video screens that are within view of the driver and school bus drivers from text messaging or using electronic devices except in an emergency. Legislation should include expansive coverage of device types and distracting activities; apply whenever a vehicle is traveling on public roads; minimize exceptions; and impose penalties consistent with other serious traffic violations.

GHSA believes that, when on the road, all drivers should not text message, use cell phones or other electronic devices, computers or other distracting devices except to report a crash to emergency responders. If a driver must use such devices to make a call or report an emergency, the driver should first stop in a parking lot or other protected area.

GHSA urges states to expand initiatives combating distraction to include all road users.

# **P. Driver Safety Issues**

# P.6 Ride Hailing

GHSA recognizes the potential for ride hailing services to reduce risks for all road users. GHSA encourages ride hailing providers to participate in behavioral safety programs.

# **P7. Secure Your Load**

GHSA supports efforts to promote the safe transportation of vehicle cargo and debris, oversize loads and vehicle trailers.

# **Q. Miscellaneous Issues**

# **Q.1 License Plates**

GHSA recognizes the importance of license plates in traffic safety enforcement. GHSA urges states to require front and rear plates, assuring that the plates are readable and reflective, using distinctive numbers that are retrievable through computer systems, thus preserving the value of license plates to the law enforcement community.

# Q.2 Assessments and Training

GHSA encourages its members to take advantage of all of the assessments (e.g., traffic records, impaired driving, occupant protection, EMS, driver education, CPS, motorcycle, pedestrian, as well as road safety audits.) to examine the strengths and weaknesses of their programs and to facilitate strategic short- and long-term planning.

GHSA encourages its members to take advantage of GHSA training (e.g. Executive Seminar on Program Management) to strengthen state programs and enhance them by facilitating short- and long-term planning.