Good Morning,
First I would like to thank the National Center for Rural Road Safety and the Federal Highways Administration and all the speakers for such a tremendous summit. I know I have learned a lot.

I’m Jill Ryan and Eagle County Commissioner, Mountain Resort Area of Vail; by training I am a public health epidemiologist and health planner. I was invited to attend the conference and to speak by Hillary Isebrands from the Federal Highways Administration as we have realized how much our two fields have in common. She asked me to provide a summary and call to action through a public health lens and I am happy to do that, with the comment that the transportation field, really has it dialed in.

I moved to Eagle County from Denver in 2004. I was the State's Director of Health Planning at CDPHE-our state health department. I moved to rural Eagle County—population 52,000 to take the job of public health manager. Eagle County sits in two valleys and is mainly accessed by 3 highways. 60 miles of interstate highway; 34 with a 75 MPH speed limit. 9 months where snow is possible

Right away, I noticed there were always cars on their sides and off the road. I signed up for Eagle County alert. You know, the text you can get alerting you to road closures. This was going off several times a day due to motor vehicle crashes. I had been in Eagle County for one month living with a friend, before I was able to rent an apartment.

Yesterday, we were talking in the tourism group how unfamiliarity with an area can be a safety challenge, and about strategies to plan for the lowest common denominator of drivers not used to the signage, conditions and roadways.

That was my issue when I first came to Eagle County. The day I was moving all of my things up from Denver, I had my Toyota 4 Runner fully packed, I went around a curve too fast in Vail during a rainstorm, I hydroplaned, overcorrected and rolled my 4 Runner 2.5 times. I walked away.

During the crash, I felt cradled and although my SUV hit the median upside down, the carriage stayed completed in tact. I was reminded what I had known for a long time being an epidemiologist and knowing injury statistics. The improvement in the design of motor vehicles due to issuance of Federal Motor Vehicle Safety Standards, beginning in the 1970s has contributed significantly to the long-term
downward trend in motor vehicle traffic crash fatalities, this is of course, in addition to roadway improvements and other programs.

In 1980, the US motor vehicle crash fatality rate was 22 per 100,000 population. In 2014 that had been reduced to 10.2—cut in half. Unfortunately, as we heard that has been an to 11.2 per 100,000 in 2015. But still a remarkable reduction.

I also quickly understood how people die in rollover crashes. We know that 40% rural fatalities are in rollover crashes and rural residents are less likely to wear their seatbelts. The compression in hitting the ground upside down blew out off all of my windows. Everything not nailed down was strewn across on I70. And that was pretty much all of my worldly positions, but not me because I was wearing a seatbelt.

My dad, who was in his late 60s at the time had never worn his seatbelt. Likewise, he never wore a helmut when riding his motorcycle. In fact, growing up, he would run errands with his two kids in the backseat and a beer in his hand. The “man” was not going to tell him what to. But my accident got him to start wearing his seatbelt and he wears it to this day. According to the CDC seat belt use is the most effective way to save lives and reduce injuries in crashes.

Well, I was on a mission. In Colorado, the state and local health departments are required to create public health improvement plans every five years. As Hillary and I discovered, public health’s planning process and the safety planning process required of state DOTs is very similar. We look at data to determine risks, implement strategies and measure the outcomes. One of the indicators that public health considers is the leading causes of death. At the time, MVC third leading cause of death in Eagle County—our death rate was 2.5 times higher than the state. Needless to say, it became a priority in our county public health improvement plan. In the plan, we had strategies like advocating for a statewide graduated drivers license, which we know reduces fatalities by 35%. That did pass in CO in 2006. Advocating for a primary seatbelt law, which hasn’t yet passed in CO.

Our planning process included 20 stakeholders from many different industries. But, at the time, we didn’t think to bring the engineering community or CDOT to the table. The community wanted universal driver’s education as a strategy. It took a lot of convincing that there was not evidence that driver’s ed decreased traffic deaths, in fact the opposite as we heard from Dr. Sleet at the CDC. The fact that teens get to drive earlier actually increases their risk of a fatal accident. We also wanted the 75 MPH speed limit reduced.
We were armed with data about rollovers and fatalities in the 75 MPH zone and took it to CDOT. We soon learned how political it is to change a speed limit in a community—like a lot of safety regulations there is an aspect of personal freedom and people like to go fast.

But CDOT indeed saved the day. They constructed a 34-mile wildlife fence along I70. One year after fence construction, wildlife/Motor vehicle contact had been reduce from 113 to 37. The number of injury hospitalizations from motor vehicle crashes had been reduced from 71 to 33.

On day one of the summit, Dr Sleet from the CDC called traffic injuries and “epidemic on wheels.” He told us that public health and transportation intersect in the area of traffic safety and how the two fields can benefit from collaboration.

It is very heartening that we know what works. For example, at this summit alone, we heard that

- A .08BAC law saves 400 - 600 lives per year
- Alcohol checkpoints reduce fatalities by 9-20%
- Roundabouts reduce intersection crashes by 75%
- Child safety seat reduce fatalities by 35%
- Rumble strips cut down on off the road crashes by 50% and head on crashes by 25-40%

We also heard about challenges. It was pointed out that commercial vehicles have a 28% lower crash rate than other vehicles, and there have been many programs that have influence this. But, we have a driver's shortage and if standards are lowered, it will impact safety. There is a lack of uniformity in state regulations, affecting both safety and efficiency.

We have seen there are disparities in motor vehicle crash injuries. 19% pop living in rural areas but 30% of miles driven and 55% of crash deaths occur there. Death rate 2.5% higher in rural vs urban. We talked about how some communities are disproportionately impacted, like American Indians, and that strategies need to be locally appropriate and culturally meaningful.

We have heard that there is a thirst for data, especially at the local level. That not everyone who wants access has it and the quality can vary.
We also heard the passion. That so many of our first responders in rural areas are volunteers, dedicating their lives to making sure patients reach medical care within the Golden Hour. We heard the Executive Director of CDOT say *we save people’s lives and we make people’s lives better.* Shame on us if we don’t try something new.

We heard about the exciting innovation of automated and connected vehicles and the Mantra-Towards Zero Deaths, which seems achievable in our lifetime.

This was a working summit. The work will be documented and the group will meet again. IN the meantime, there is a lot of expertise in this room and we should do what we can and influence what we can influence.

Eagle County’s engineer attended this conference and she has a personal call to action for our county. We are going to institute Toward Zero Deaths into our strategic plan—that way we can direct our focus and resource toward this goal. I am wondering there are others in the audience who have walked away inspired, with ideas about changes they an make right away in personal calls to action, I would love to hear ideas from anyone who would like to share.

Thank you for the work you do and will continue to do to make our rural roads safer.

Can’t tell the story without the data