



Road Safety in Native American Communities

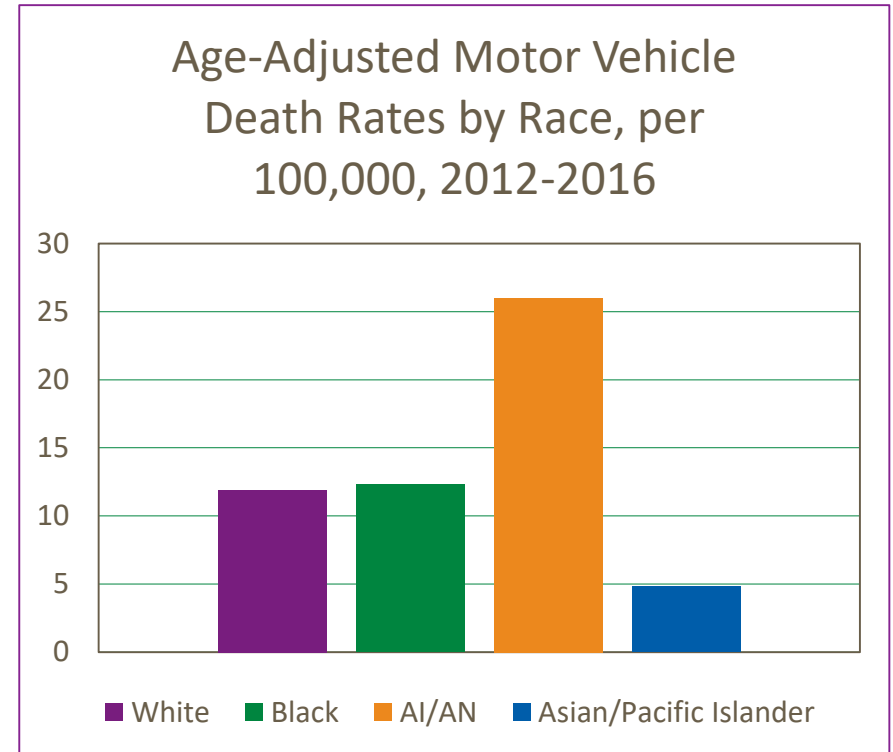
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Division of Unintentional Injury Prevention**

**2nd National Summit on Rural Road Safety
December 5, 2018**

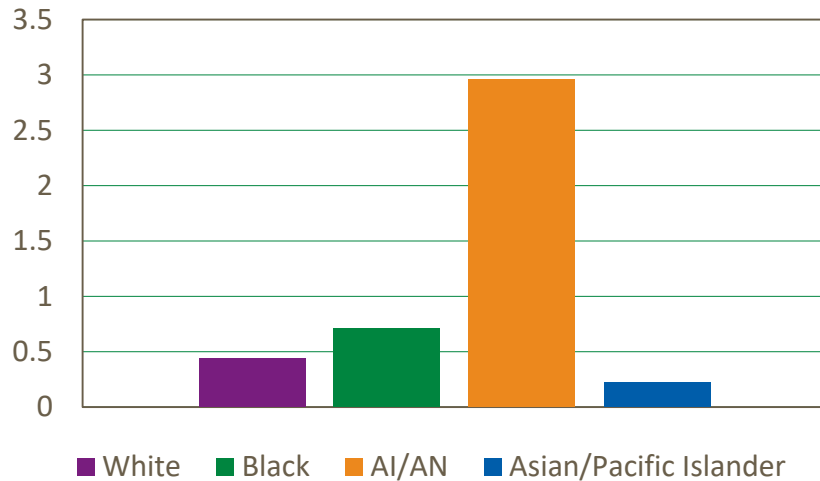
What We Know

- **American Indians and Alaska Natives (AI/AN) are disproportionately affected by injuries and deaths caused by motor vehicle crashes (MVC)**
 - Rates are more than double those from other races



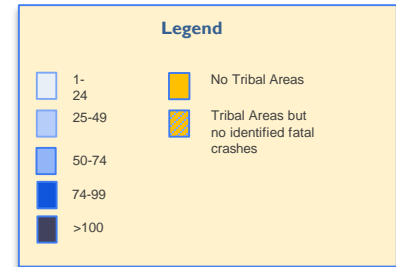
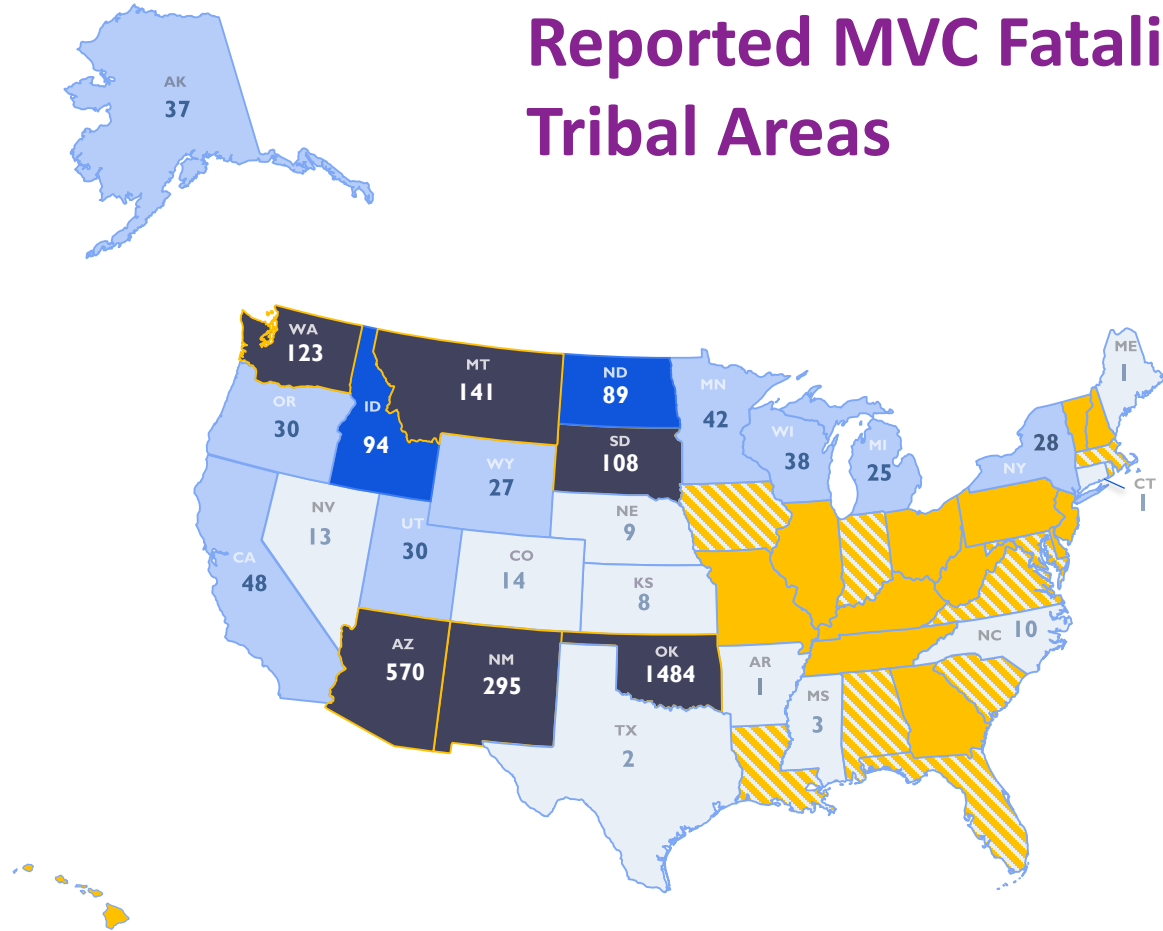
What We Know

Age-Adjusted Motor Vehicle Occupant Death Rates by Race, per 100,000, Age 0-5, 2012-2016

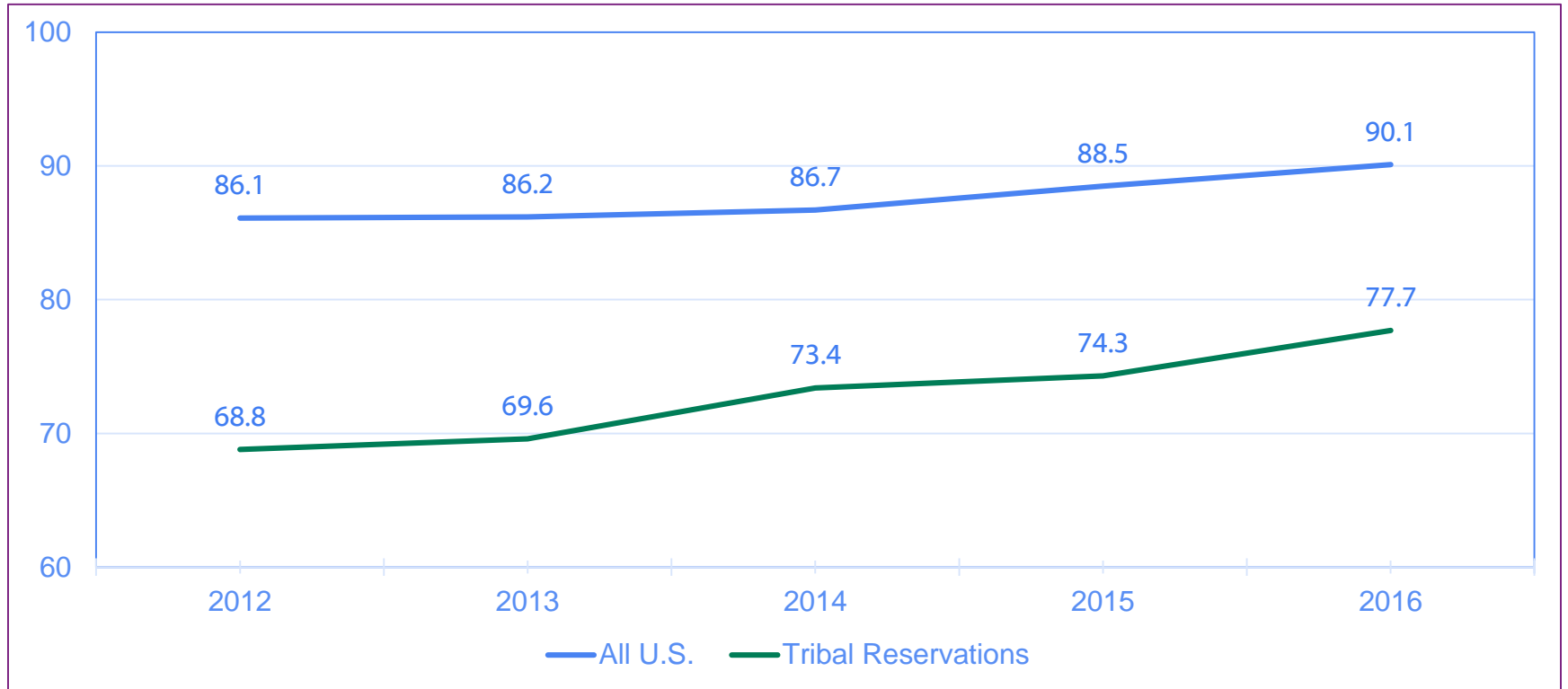


- **Native American children are especially vulnerable when riding in vehicles**
 - Rates for AI/AN children are more than 4 times higher than Blacks and nearly 7 times higher than Whites

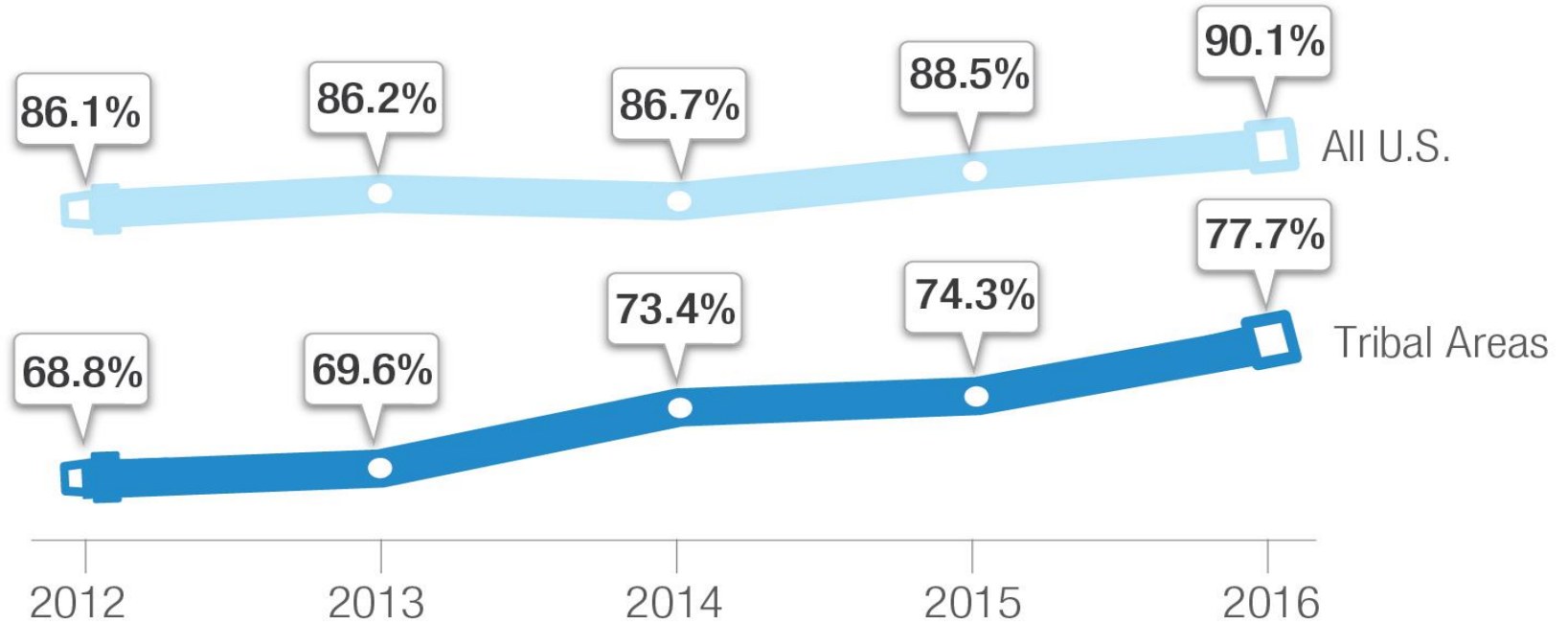
Reported MVC Fatalities in Tribal Areas



Safety Belt Use Estimates, 2012-2016



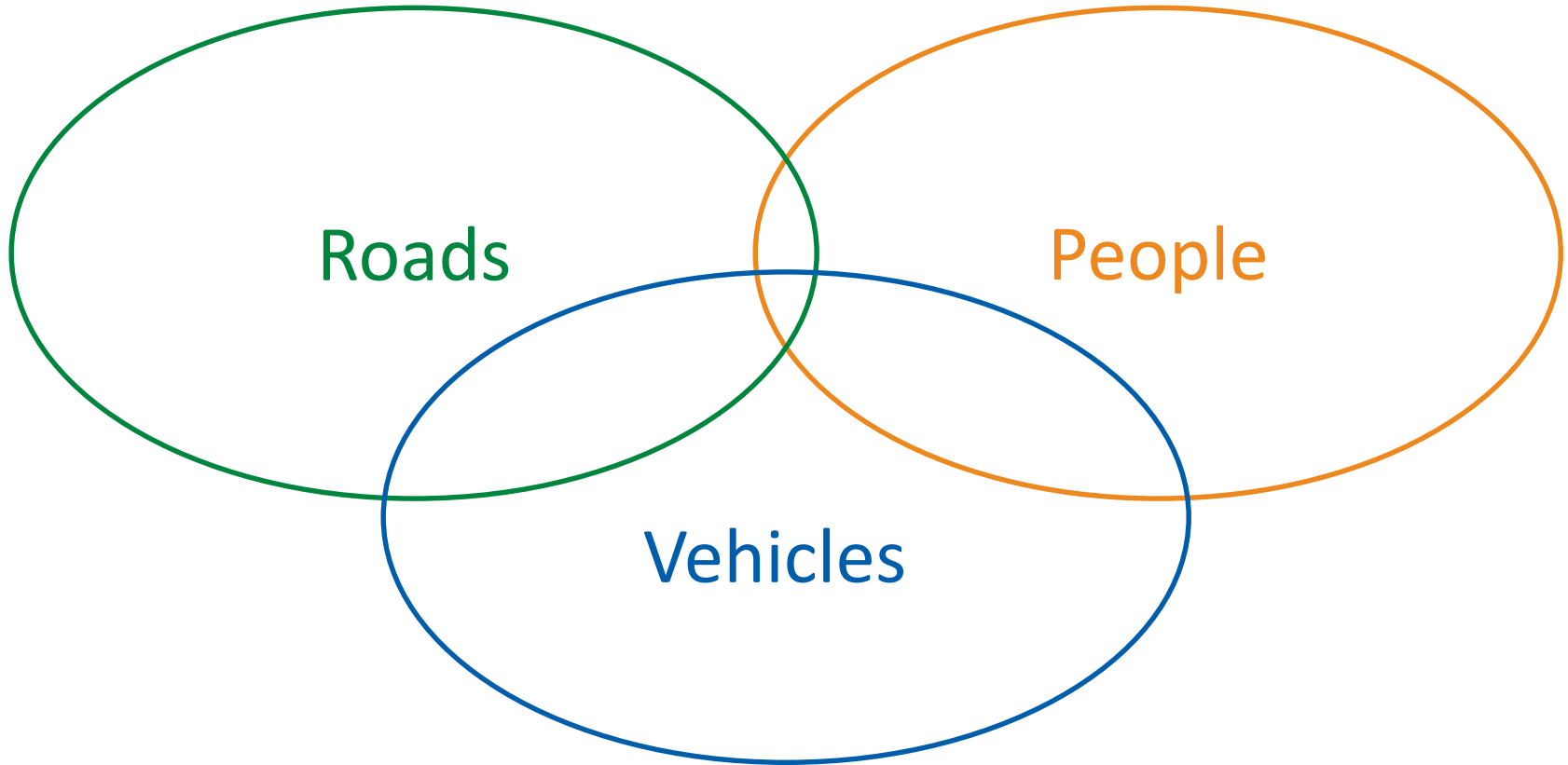
Safety Belt Use Estimate



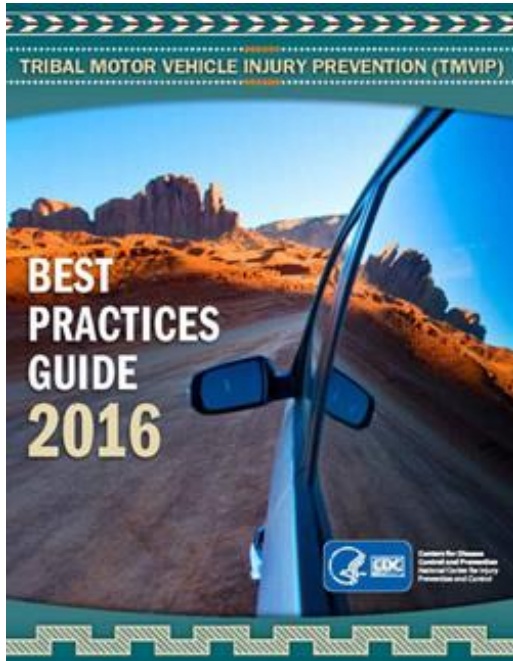
Challenges to Rural Road Safety

- Many Native American communities face the same challenges other rural drivers face
- Tribal communities also face some unique challenges
 - Lack of traffic safety legislation
 - Law enforcement staffing
 - Issues related to crash reporting

Domains of Roadway Safety



Best Practices Guide



- **The CDC Best Practices Guide is based on lessons learned from Tribes funded by several federal agencies**
- **Focuses on:**
 - Increasing child safety seat use
 - Increasing seat belt use
 - Decreasing alcohol-impaired driving

Roadway to Safer Tribal Communities Toolkit

- **The toolkit contains information on tribal road safety and includes:**

- Fact Sheets
- Posters
- A Killer in Indian Country video

Visit CDC's Tribal Road Safety Website to view and download this toolkit and Best Practices Guide:

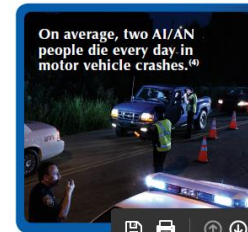
<https://www.cdc.gov/motorvehiclesafety/native/index.html>



The Facts

Motor vehicle crashes are a serious problem in tribal communities:

- Crashes are the leading cause of death for American Indians and Alaska Natives (AI/AN) ages 1–44.¹
- AI/AN people have the highest alcohol-related motor vehicle death rates of all racial groups.²
- AI/AN people use car seats, booster seats, and seat belts at a rate much lower than the national rate.³



What You Can Do

Tribal governments and local health professionals can make a difference. Below are proven strategies to reduce drinking and driving and increase the use of car seats that you can use to reduce crash-related injuries and deaths in Tribal Nations.

Drinking and Driving

Tribal governments can:

- Fully enforce existing laws that address the prevention of drinking and driving. These include:
 - Blood alcohol concentration (BAC) of .08 limit laws,
 - Minimum legal drinking age laws, and
 - Zero tolerance laws for drivers younger than 21 years old.⁵
- Reduce drinking and driving by conducting sobriety checkpoints. Checkpoints can reduce alcohol-related crash deaths by 9 percent.⁶
- Require ignition interlock use for people convicted of drinking and driving, starting with their first offense.⁷

Restrict nighttime driving for teens to at least the first 10 minutes of the night.⁸

Tribal Motor Vehicle Injury Prevention Project

- Outside technical assistance is an important component of a successful tribal MVC prevention program
- This project is designed to enhance technical assistance and training to tribes to help them implement proven strategies to increase restraint use
- Project will be based at the Albuquerque Area Indian Health Board
- Three Traffic Safety Specialists were recently hired

Tribal Transportation Safety Resources

- The tribal transportation safety website is maintained by the Safety Management System (SMS) Committee
- Site contains resources for related to funding sources, safety planning, and several MVC topic areas
- You can sign up for the Tribal Transportation Safety mailing list on the homepage

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

Thank you!

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For more information, contact CDC
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TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

