Data Linkage—Motor Vehicle

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Issues Addressed

- What data systems should be linked?
- What is gained from data linkage?
- Why conduct international comparisons?
- What would we like to see happen?

Data Systems to Be Linked

Non Medical
- Crash reports
- Vehicle Registration
- Driver Licensing
- Roadway
- Citation

Medical
- Emergency medical services
- Emergency department
- Hospital
- Outpatient
- Death Certificate

Claim Data
- Automobile Insurance
- Health Insurance

What Is Gained from Data Linkage

Improved Analytical Capability

Medical and financial outcome linked to crash and exposure
Supports injury control efforts and reduces health costs
Population based data for problem identification

Improves Data Systems

Promotes standardization of data
Expands usefulness of current data at small cost

Supports Policy Making Activities

Promotes collaboration between highway safety and health
Supports investment in prevention activities

With linkage, one can
• Measure the burden of disability on the community
• Set priorities for most effective resource allocation
• Enact/retain effective laws; e.g., motorcycle helmets
• Capitalize on existing data systems
• Identify specific areas from linked data, then conduct more in-depth studies; e.g., studies of seat belt injuries
• Get people to think beyond their own role, along the Prevention–Treatment–Rehabilitation Continuum

**Why Conduct International Comparisons?**

• To benefit from experience of others—safety belt laws reduced injury; bicycle helmet programs
• To identify problem unique to a country and investigate reasons
• To access larger or richer data bases on specific populations; e.g., bicyclists
• To identify potential product safety issues
• To evaluate methodology; e.g., applications of Crash Outcome Data Evaluations Systems (CODES) to data bases with personal identifiers

**What Would We like to See Happen?**

• Greater standardization of data, including minimum data sets, at national and international levels.
• Improved timeliness and accessibility of data systems
• Improvements in linkage methodology
• Development and support of partnerships among prevention, treatment and rehabilitation
• Increased use of linked data by researchers, demonstrating value of linkage
• Routine dissemination of successful strategies where data linkage was effective:
  
  APHA Electronic Newsletter
  Electronic bulletin board or Internet

• Routine feedback at all levels to:
  
  Data providers
  Decision makers
  Public

• Data become an integral part of decision making process at all levels
• Linkage with other networks not traditionally identified with injury