The Prevention Status Reports (PSRs) highlight—for all 50 states and the District of Columbia—the status of public health policies and practices designed to prevent or reduce important health problems. This report focuses on motor vehicle crash injuries and deaths and briefly describes why they are a public health problem, both for Maryland and the United States as a whole. It also provides an overview of solutions (i.e., evidence-based or expert-recommended policy and practice options) for preventing or reducing motor vehicle injuries and deaths and reports the status of these solutions in Maryland.

**PSR Framework**

The PSRs follow a simple framework:

- Describe the public health problem using public health data
- Identify potential solutions to the problem drawn from research and expert recommendations
- Report the status of those solutions for each state and the District of Columbia

**Criteria for Selection of Policies and Practices**

The policies and practices included in the PSRs were selected because they

- Can be monitored using state-level data that are readily available for most states and the District of Columbia
- Meet one or more of the following criteria:
  - Supported by systematic review(s) of scientific evidence of effectiveness (e.g., *The Guide to Community Preventive Services*)
  - Explicitly cited in a national strategy or national action plan (e.g., *Healthy People 2020*)
  - Recommended by a recognized expert body, panel, organization, study, or report with an evidence-based focus (e.g., Institute of Medicine)

**Ratings**

The PSRs use a simple, three-level rating scale to provide a practical assessment of the status of policies and practices in each state and the District of Columbia. It is important to note that the ratings reflect the status of policies and practices and do not reflect the status of efforts by state health departments, other state agencies, or other organizations to establish or strengthen those policies and practices. Strategies for improving public health vary by individual state needs, resources, and public health priorities.

**More Information**

For more information about public health activities in Maryland, visit the Maryland Department of Health and Mental Hygiene website (http://dhmh.maryland.gov/). For additional resources and to view reports for other health topics, visit the CDC website (http://www.cdc.gov/stltpublichealth/psr/).

**Suggested Citation**

Public Health Problem

⚠️ Motor vehicle crashes are a leading cause of death in the United States for people aged 30 years or younger (1).

👨‍WebKitin 2011, motor vehicle crashes killed more than 32,000 people in the United States and injured more than 2.6 million (1,2).

💰 In 2005 alone, motor vehicle crashes cost Americans $99 billion in medical care, rehabilitation, and lost wages (3).

Policy and Practice Solutions

This report focuses on policies recommended by the Community Preventive Services Task Force and the National Highway Traffic Safety Administration on the basis of scientific studies supporting the policies’ effectiveness in preventing or reducing crash-related injuries and deaths. These policies include 1) implementing primary seat belt laws, 2) improving laws mandating the use of appropriate child passenger restraints (e.g., car seats and booster seats) to cover children through at least age 8 years, 3) using comprehensive graduated driver licensing systems, and 4) requiring the use of ignition interlock devices for all convicted driving-while-intoxicated (DWI) offenders (9–16). For information about why certain motor vehicle injury-related indicators were selected, and for links to additional data and resources, visit the CDC website (http://www.cdc.gov/stltpublichealth/psr/motorvehicle/).
Motor Vehicle Injuries

Status of Policy and Practice Solutions in Maryland

Seat belt law

As of August 1, 2013, Maryland had a primary enforcement seat belt law for only the front seating positions (17).

Task Force on Community Preventive Services recommendation: Primary enforcement seat belt laws are recommended on the basis of strong evidence that they are substantially more effective than secondary enforcement laws at reducing motor vehicle-related injuries and deaths (10,11). Rates of seat belt use are an average of 9–14 percentage points higher in primary enforcement states than in secondary states (10,11,18,19).

<table>
<thead>
<tr>
<th>Rating</th>
<th>State had</th>
</tr>
</thead>
<tbody>
<tr>
<td>Green</td>
<td>A primary enforcement seat belt law covering all seating positions</td>
</tr>
<tr>
<td>Yellow</td>
<td>A primary enforcement seat belt law covering only the front seats</td>
</tr>
<tr>
<td>Red</td>
<td>A secondary enforcement seat belt law or no law</td>
</tr>
</tbody>
</table>

Child passenger restraint law

As of August 1, 2013, Maryland required that all motor vehicle passengers aged 7 years or younger be in a car seat or booster seat (17).

Evidence shows that laws mandating the use of car seats and booster seats increase their use (12). Increasing the required age for car seat or booster seat use is an effective way to keep children protected. For example, among states that increased the required age to 7 or 8 years, car seat and booster seat use tripled (13).

<table>
<thead>
<tr>
<th>Rating</th>
<th>State law covered</th>
</tr>
</thead>
<tbody>
<tr>
<td>Green</td>
<td>Children through age 8 years</td>
</tr>
<tr>
<td>Yellow</td>
<td>Children through age 6 or 7 years only</td>
</tr>
<tr>
<td>Red</td>
<td>Children aged 5 years or younger only</td>
</tr>
</tbody>
</table>

Graduated driver licensing (GDL) system

As of August 1, 2013, Maryland fulfilled the recommended passenger limit restriction but not the recommended nighttime driving restriction (20).

Research indicates that more comprehensive GDL systems prevent more crashes and save more lives compared with less comprehensive GDL systems. Based on this evidence, the following five components are recommended for more comprehensive GDL systems: 1) minimum age of 16 years for a learner’s permit, 2) mandatory holding period of at least six months for a learner’s permit, 3) restrictions against nighttime driving between 10:00 pm and 5:00 am (or longer), 4) limit of zero or one for the number of young passengers without adult supervision, and 5) minimum age of 18 years for full licensure (9,14,15).

<table>
<thead>
<tr>
<th>Rating</th>
<th>State policy</th>
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<tbody>
<tr>
<td>Green</td>
<td>Required all five of the GDL components</td>
</tr>
<tr>
<td>Yellow</td>
<td>Required both nighttime driving and young passenger limits but not all five components</td>
</tr>
<tr>
<td>Red</td>
<td>Lacked either the nighttime driving or young passenger limits, or both</td>
</tr>
</tbody>
</table>

Ignition interlock law

As of August 1, 2013, Maryland required ignition interlocks for convicted repeat DWI offenders and first-time offenders who had a particularly high blood alcohol concentration (BAC) (21).

Task Force on Community Preventive Services recommendation: Use of ignition interlocks is recommended for all people convicted of alcohol-impaired driving on the basis of strong evidence of interlocks’ effectiveness in reducing re-arrest rates while the interlocks are installed (16).

<table>
<thead>
<tr>
<th>Rating</th>
<th>State had</th>
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<tbody>
<tr>
<td>Green</td>
<td>A law requiring ignition interlocks for all convicted DWI offenders (i.e., offenders with blood alcohol concentrations [BAC] ≥0.08 g/dL, which includes both first-time and repeat offenders)</td>
</tr>
<tr>
<td>Yellow</td>
<td>A law requiring ignition interlocks for convicted repeat DWI offenders or first-time offenders with a particularly high BAC (e.g., BAC≥0.15 g/dL)</td>
</tr>
<tr>
<td>Red</td>
<td>No law requiring ignition interlocks for any convicted DWI offenders</td>
</tr>
</tbody>
</table>
**Simplified Rating System**

A more detailed explanation of the rating system for motor vehicle injuries is available at [http://www.cdc.gov/stltpublichealth/psr/motorvehicle/](http://www.cdc.gov/stltpublichealth/psr/motorvehicle/).

<table>
<thead>
<tr>
<th>Green</th>
<th>The policy or practice is established in accordance with supporting evidence and/or expert recommendations.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yellow</td>
<td>The policy or practice is established in partial accordance with supporting evidence and/or expert recommendations.</td>
</tr>
<tr>
<td>Red</td>
<td>The policy or practice is either absent or not established in accordance with supporting evidence and/or expert recommendations.</td>
</tr>
</tbody>
</table>

**Indicator Definitions**

- **Seat belt law**: A primary enforcement seat belt law allows police to stop a vehicle solely because a driver or passenger is not wearing a seat belt. A secondary enforcement seat belt law requires police to have another reason for stopping a vehicle before citing a driver or passenger for not buckling up. The most comprehensive policies are primary seat belt laws that cover all occupants, regardless of where they are sitting. Some states have primary laws that cover only the front seat occupants.

- **Child passenger restraint law**: A law that requires child passengers to travel in appropriate child passenger restraints, such as car seats or booster seats, until adult seat belts fit them properly. All 50 states and the District of Columbia have some form of child passenger restraint laws; however, the ages covered vary.

- **Graduated driver licensing (GDL) system**: Policy that helps new drivers gain experience under low-risk conditions by granting driving privileges in stages. As teens move through GDL stages, they are given additional privileges, such as driving unsupervised or with a passenger.

- **Ignition interlock law**: A law that mandates the use of ignition interlocks for drivers convicted of DWI. An ignition interlock is a device that analyzes a driver's breath and prevents the vehicle from starting if alcohol is detected.

**References**