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# CHILDREN : 2015

## INDIANA TRAFFIC SAFETY FACTS

### IN 2015:

- **3,482 children** (ages 0 to 14) were killed or injured in Indiana motor vehicle collisions. Approximately 1 percent of children injured in crashes in the state were killed (**35 fatalities**).
- The overall rate of restraint usage among child occupants and drivers involved in Indiana crashes was **81 percent**.
- Restraint use was highest (**92 percent**) among the less-than-1-year-old age group.
- **228 child pedestrians** were injured in collisions in Indiana in 2015; **9 were killed** and 94 suffered incapacitating injuries.
- In 2015, **171 pedacyclists** aged 14 years and younger were injured in Indiana crashes; **1 was killed** and 68 sustained incapacitating injuries.
- **86 children** were involved in alcohol-impaired traffic collisions, which involved a driver with a blood alcohol content (BAC) test result at or above 0.08 grams per deciliter (g/dL).

Research has shown that the use of child restraints, including child safety seats and lap/shoulder belts, reduces the risk of fatal and serious injuries. NHTSA strongly recommends that child occupants progress through four stages of restraint usage from birth to adulthood (Figure 1). Current Indiana child passenger restraint law requires all child occupants ages 15 and under to be properly restrained in a child restraint device or seat belt in all seating positions in all vehicles. In addition to legislative efforts, child passenger safety experts have developed further recommended safety standards and best practices. NHTSA and several safety partners sponsor Parents Central (<http://www.safercar.gov/parents/index.htm>), a website that provides parents and caregivers access to a wide variety of tools and resources for keeping children safe in and around motor vehicles.

Figure 1. Car Seat Recommendations for Children



#### Birth — 12 months

Your child under age 1 should always ride in a rear-facing car seat. There are different types of rear-facing car seats: Infant-only seats can only be used rear-facing. Convertible and 3-in-1 car seats typically have higher height and weight limits for the rear-facing position, allowing you to keep your child rear-facing for a longer period of time.



#### 1 — 3 years

Keep your child rear-facing as long as possible. It's the best way to keep him or her safe. Your child should remain in a rear-facing car seat at least until the age of two, and should continue to ride rear-facing until he or she reaches the top height or weight limit allowed by your car seat's manufacturer. Once your child outgrows the rear-facing car seat, your child is ready to travel in a forward-facing car seat with a harness.



#### 4 — 7 years

Keep your child in a forward-facing car seat with a harness until he or she reaches the top height or weight limit allowed by your car seat's manufacturer. Once your child outgrows the forward-facing car seat with a harness, it's time to travel in a booster seat, but still in the back seat.



#### 8 — 12 years

Keep your child in a booster seat until he or she is big enough to fit in a seat belt properly. For a seat belt to fit properly the lap belt must lie snugly across the upper thighs, not the stomach. The shoulder belt should lie snug across the shoulder and chest and not cross the neck or face. Remember: your child should still ride in the back seat because it's safer there.

Source: NHTSA, <http://www.safercar.gov/parents/RightSeat.htm>, current as of September 20, 2016

This fact sheet summarizes information on traffic collisions involving children in Indiana between 2011 and 2015. It examines general trends, injury status by age group, restraint usage and seating position, alcohol-related crashes, and geographical analysis by county. Indiana collision data come from the Indiana State Police Automated Reporting Information Exchange System (ARIES), as of March 17, 2016.

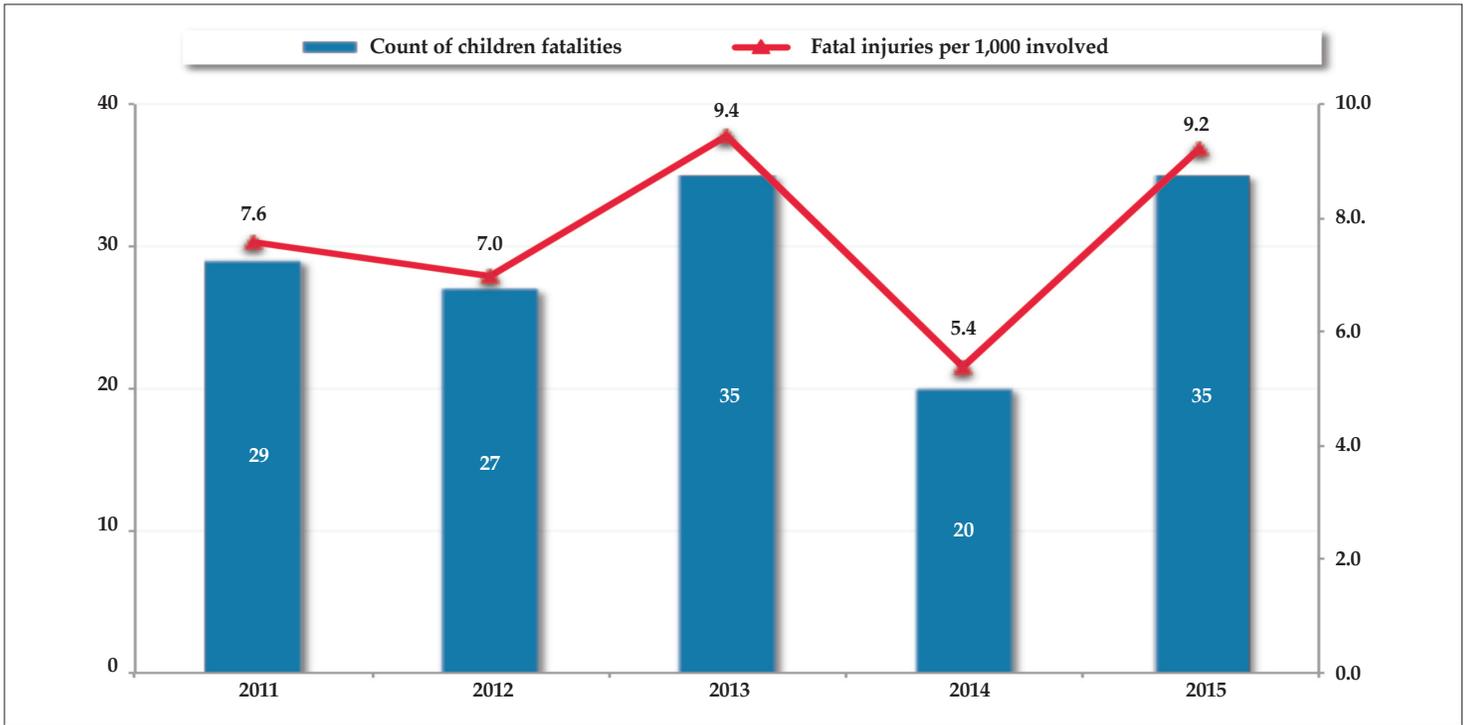


## GENERAL TRENDS

From 2011 to 2015, the number of children killed in Indiana traffic collisions increased 4 percent annually. Between 2014 and 2015, the total number of child fatalities in Indiana traffic collisions rose by 75 percent,

from 20 to 35 (Table 1 and Figure 2).<sup>1</sup> The number of children experiencing incapacitating injuries increased dramatically between 2014 and 2015. As noted in the table, these increases reflect a definitional change and should be interpreted with caution. The rate of fatal injuries per 1,000 children involved in crashes nearly doubled from 5.4 to 9.2.

Figure 2. Child fatalities and fatal injury rates in Indiana collisions, per 1,000 involved, 2011-2015



Source: Indiana State Police Automated Reporting Information Exchange System, as of March 17, 2016



<sup>1</sup>Due to possible ARIES reporting errors designating very young children as *drivers*, this fact sheet's analysis does not include children aged 7 years old or younger who were categorized as *drivers* or *animal-drawn vehicle operators*.

**Table 1. Children involved in Indiana traffic collisions by injury status and age group, 2011-2015**

	2011		2012		2013		2014		2015		Annual rate of change	
	Count	%	2014-15	2011-15								
<b>Fatal</b>	<b>30</b>	<b>100.0%</b>	<b>27</b>	<b>100.0%</b>	<b>35</b>	<b>100.0%</b>	<b>20</b>	<b>100.0%</b>	<b>35</b>	<b>100.0%</b>	<b>75.0%</b>	<b>3.9%</b>
Less than 1 year old	3	10.0%	0	0.0%	2	5.7%	3	15.0%	2	5.7%	-33.3%	-9.6%
1 to 3 years old	5	16.7%	11	40.7%	8	22.9%	1	5.0%	6	17.1%	500.0%	4.7%
4 to 7 years old	7	23.3%	7	25.9%	8	22.9%	4	20.0%	7	20.0%	75.0%	0.0%
8 to 14 years old	15	50.0%	9	33.3%	17	48.6%	12	60.0%	20	57.1%	66.7%	7.5%
<b>Incapacitating</b>	<b>152</b>	<b>100.0%</b>	<b>207</b>	<b>100.0%</b>	<b>193</b>	<b>100.0%</b>	<b>305</b>	<b>100.0%</b>	<b>1,204</b>	<b>100.0%</b>	<b>294.8%</b>	<b>67.8%</b>
Less than 1 year old	9	5.9%	10	4.8%	3	1.6%	17	5.6%	49	4.1%	188.2%	52.8%
1 to 3 years old	17	11.2%	27	13.0%	28	14.5%	35	11.5%	202	16.8%	477.1%	85.7%
4 to 7 years old	30	19.7%	53	25.6%	35	18.1%	68	22.3%	284	23.6%	317.6%	75.4%
8 to 14 years old	96	63.2%	117	56.5%	127	65.8%	185	60.7%	669	55.6%	261.6%	62.5%
<b>Non-incapacitating</b>	<b>3,258</b>	<b>100.0%</b>	<b>3,253</b>	<b>100.0%</b>	<b>3,110</b>	<b>100.0%</b>	<b>2,986</b>	<b>100.0%</b>	<b>2,148</b>	<b>100.0%</b>	<b>-28.1%</b>	<b>-9.9%</b>
Less than 1 year old	169	5.2%	167	5.1%	116	3.7%	131	4.4%	109	5.1%	-16.8%	-10.4%
1 to 3 years old	441	13.5%	450	13.8%	389	12.5%	417	14.0%	284	13.2%	-31.9%	-10.4%
4 to 7 years old	788	24.2%	796	24.5%	825	26.5%	768	25.7%	541	25.2%	-29.6%	-9.0%
8 to 14 years old	1,860	57.1%	1,840	56.6%	1,780	57.2%	1,670	55.9%	1,214	56.5%	-27.3%	-10.1%
<b>Other injuries</b>	<b>43</b>	<b>100.0%</b>	<b>41</b>	<b>100.0%</b>	<b>56</b>	<b>100.0%</b>	<b>41</b>	<b>100.0%</b>	<b>95</b>	<b>100.0%</b>	<b>131.7%</b>	<b>21.9%</b>
Less than 1 year old	12	27.9%	10	24.4%	9	16.1%	11	26.8%	13	13.7%	18.2%	2.0%
1 to 3 years old	15	34.9%	13	31.7%	15	26.8%	5	12.2%	20	21.1%	300.0%	7.5%
4 to 7 years old	1	2.3%	5	12.2%	15	26.8%	5	12.2%	27	28.4%	440.0%	128.0%
8 to 14 years old	15	34.9%	13	31.7%	17	30.4%	20	48.8%	35	36.8%	75.0%	23.6%
<b>Not injured</b>	<b>339</b>	<b>100.0%</b>	<b>351</b>	<b>100.0%</b>	<b>315</b>	<b>100.0%</b>	<b>363</b>	<b>100.0%</b>	<b>308</b>	<b>100.0%</b>	<b>-15.2%</b>	<b>-2.4%</b>
Less than 1 year old	8	2.4%	7	2.0%	11	3.5%	5	1.4%	5	1.6%	0.0%	-11.1%
1 to 3 years old	13	3.8%	10	2.8%	7	2.2%	7	1.9%	9	2.9%	28.6%	-8.8%
4 to 7 years old	19	5.6%	16	4.6%	16	5.1%	18	5.0%	31	10.1%	72.2%	13.0%
8 to 14 years old	299	88.2%	318	90.6%	281	89.2%	333	91.7%	263	85.4%	-21.0%	-3.2%

Source: Indiana State Police Automated Reporting Information Exchange System, as of March 17, 2016

Notes:

- 1) The most recent ARIES upgrade added a clarification to reporting officers on the definition of incapacitating injuries criteria to include "transported from scene for treatment"; therefore, 2014 and 2015 increases in incapacitating injuries reflect a definitional change and should be interpreted with caution.
- 2) Includes individuals identified as drivers, injured occupants, pedestrians, and pedalcyclists and in the 8 to 14 year old age group, animal-drawn vehicle operators.
- 3) The less than 1, 1 to 3, and 4 to 7 year old age groups exclude data records coded as driver or animal drawn vehicle operator, due to unavailable or invalid age reporting. Unknown age or birthdate often result in age assignment in the ARIES database that is not an accurate value of driver age.
- 4) "Not injured" definition included at end of report.



Based on the 2014 Indiana child population estimates (Table 2), the 8- to 14-year-old age group is over-represented among child injuries—8- to 14-year-old children comprised 48 percent of the Indiana child population but 56 percent of percent of child injuries in 2015. This age group also represented the highest injury rate (309 per 100,000 population). The

lowest injury rate (204 per 100,000 population) was among the 1- to 3-year old age group. Among the 1- to 3-year old age group that represents 19 percent of the Indiana child population, this cohort accounted for 15 percent of injuries among children.

**Table 2. Indiana child population estimates (2014) and traffic injuries (2015)**

Age group	Estimated IN population	Share of IN child population	2015 total injuries	Share of IN child injuries	2015 injury rate per 100K
Less than 1 year old	82,993	6.3%	173	5.0%	208.5
1 to 3 years old	251,491	19.2%	512	14.7%	203.6
4 to 7 years old	348,472	26.6%	859	24.7%	246.5
8 to 14 years old	627,293	47.9%	1,938	55.7%	308.9
<b>Total</b>	<b>1,310,249</b>	<b>100.0%</b>	<b>3,482</b>	<b>100.0%</b>	<b>265.8</b>

Source: Indiana State Police Automated Reporting Information Exchange System, as of March 17, 2016

- Notes:
- 1) The most recent population estimates available by age are for 2014.
  - 2) Total injuries are sum of children with *fatal, incapacitating, non-incapacitating, possible and other injuries*. Excludes individuals classified as *not injured*.
  - 3) Total injuries for *less than 1, 1 to 3, and 4 to 7 year old* age group exclude individuals classified as *driver or animal-drawn vehical operator*.

The number of children killed or injured in traffic collisions by person type (*drivers, vehicle occupants, pedestrians, and pedalcyclists*) is depicted in Table 3. In 2015, child *occupants* experiencing incapacitating injuries (1,022) accounted for 83 percent of all fatal and incapacitating injuries (calculated from table). Between 2014 and 2015, the number of fatalities among child occupants increased by 127 percent, from 4 to 5. The

number of child pedestrian fatalities also rose by 125 percent, from 4 to 9. Figure 3 depicts the proportion of children involved in crashes by person type and injury status. In 2015, pedestrians account for 7 percent of children involved in Indiana collisions. When considered by fatal injury, the proportion of child pedestrians jumps to 26 percent of all child fatalities.

**Table 3. Children killed or injured in Indiana traffic collisions by injury status and person type, 2011-2015**

	2011		2012		2013		2014		2015		Annual rate of change	
	Count	%	2014-15	2011-15								
<b>Fatal</b>	<b>29</b>	<b>100.0%</b>	<b>27</b>	<b>100.0%</b>	<b>35</b>	<b>100.0%</b>	<b>20</b>	<b>100.0%</b>	<b>35</b>	<b>100.0%</b>	<b>75.0%</b>	<b>4.8%</b>
Driver	0	3.4%	1	3.4%	2	3.3%	2	3.7%	0	5.7%	-	na
Injured occupant	21	69.0%	23	62.1%	25	70.0%	11	85.2%	25	71.4%	127.3%	4.5%
Pedalcyclist	1	0.0%	0	3.4%	2	3.3%	3	0.0%	1	5.7%	-66.7%	0.0%
Pedestrian	7	27.6%	3	31.0%	6	23.3%	4	11.1%	9	17.1%	125.0%	6.5%
<b>Incapacitating</b>	<b>152</b>	<b>100.0%</b>	<b>207</b>	<b>100.0%</b>	<b>193</b>	<b>100.0%</b>	<b>305</b>	<b>100.0%</b>	<b>1,203</b>	<b>100.0%</b>	<b>294.4%</b>	<b>67.7%</b>
Driver	10	7.6%	5	3.1%	6	6.6%	7	2.9%	19	3.6%	171.4%	17.4%
Injured occupant	98	64.5%	145	68.7%	121	64.5%	237	69.7%	1,022	62.4%	95.9%	79.7%
Pedalcyclist	16	7.6%	21	7.7%	20	10.5%	21	10.1%	68	10.3%	5.0%	43.6%
Pedestrian	28	20.3%	36	20.5%	46	18.4%	40	17.3%	94	23.7%	135.0%	35.4%
<b>Non-incapacitating injuries</b>	<b>3,256</b>	<b>100.0%</b>	<b>3,253</b>	<b>100.0%</b>	<b>3,110</b>	<b>100.0%</b>	<b>2,983</b>	<b>100.0%</b>	<b>2,146</b>	<b>100.0%</b>	<b>-28.1%</b>	<b>-9.9%</b>
Driver	67	2.2%	52	1.9%	52	2.4%	45	1.9%	19	2.0%	-57.8%	-27.0%
Injured occupant	2,752	83.9%	2,802	85.3%	2,661	84.3%	2,597	85.8%	1,900	85.3%	-26.8%	-8.8%
Pedalcyclist	191	7.0%	177	5.8%	168	5.8%	147	5.4%	102	5.4%	-30.6%	-14.5%
Pedestrian	246	6.9%	222	7.0%	229	7.5%	194	6.8%	125	7.4%	-35.6%	-15.6%

Source: Indiana State Police Automated Reporting Information Exchange System, as of March 17, 2016

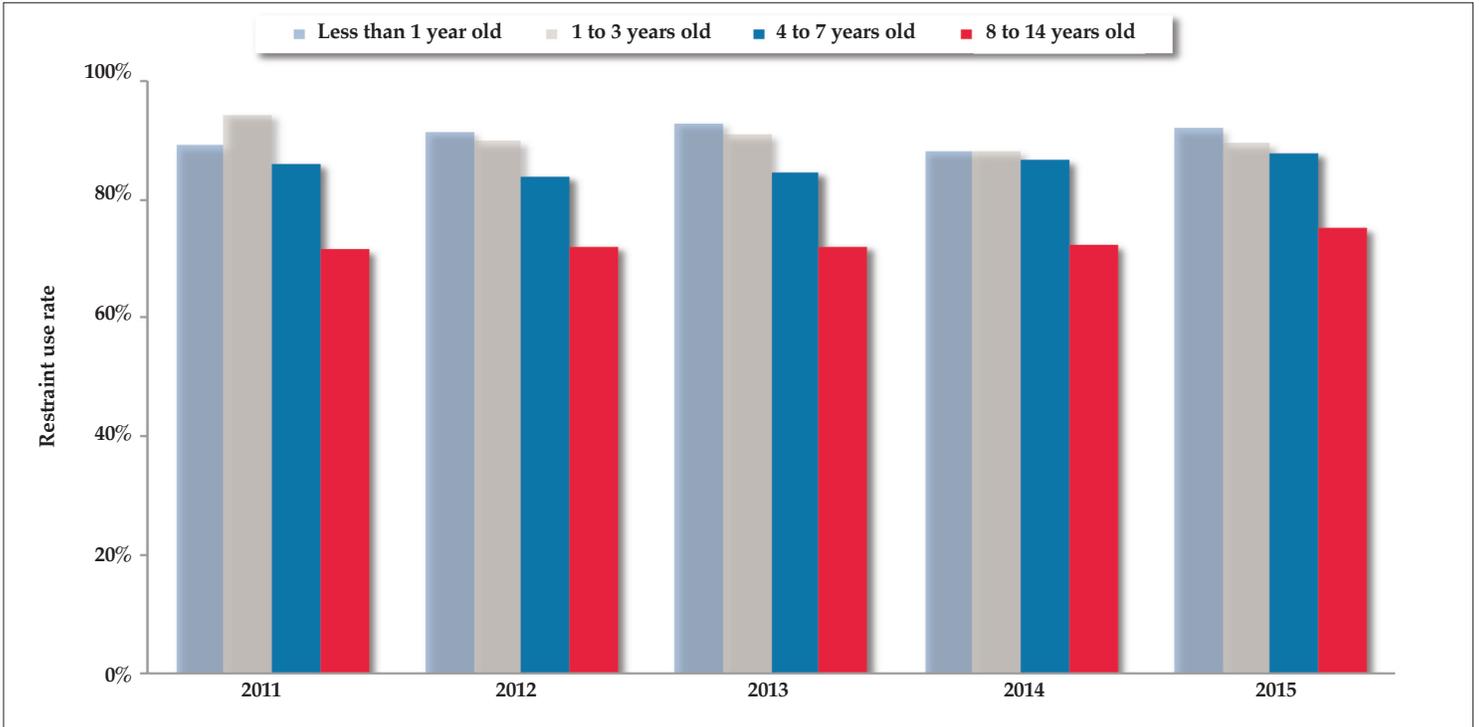
- Notes:
- 1) The most recent ARIES upgrade added a clarification to reporting officers on the definition of incapacitating injuries criteria to include "transported from scene for treatment"; therefore, 2014 and 2015 increases in incapacitating injuries reflect a definitional change and should be interpreted with caution.
  - 2) Excludes animal-drawn vehicle operators.
  - 3) *Non-incapacitating injuries* include those injuries reported as *non-incapacitating or possible*.
  - 4) The *less than 1, 1 to 3, and 4 to 7 year old* age groups exclude data records coded as *driver or animal drawn vehicle operator*, due to unavailable or invalid age reporting. Unknown age or birthdate often result in age assignment in the ARIES database that is not an accurate value of driver age.

## RESTRAINT USE AND SEATING POSITION

Restraint use rates among children in traffic collisions tend to decline as children get older (Figure 3). In 2015, the 8- to 14-year-old age group had the lowest rate of restraint use (75 percent). Between 2011 and 2015, this

age group exhibited rates of restraint use consistently at or lower than 75 percent. The highest rate of restraint use over the five-year period was 94 percent among children 1- to 3-year-old in 2011; the rate of restraint use among children in this age group fell to 88 percent in 2014.

Figure 3. Restraint use among children involved in Indiana traffic collisions, by age group, 2011-2015



Source: Indiana State Police Automated Reporting Information Exchange System, as of March 17, 2016

Notes:

- 1) Restraint use rates are calculated based on individuals identified as *injured occupant* or *driver* where restraint use was known.
- 2) *Unrestrained* and *unknown* restraint use codes are included in totals for restraint use rate calculations.

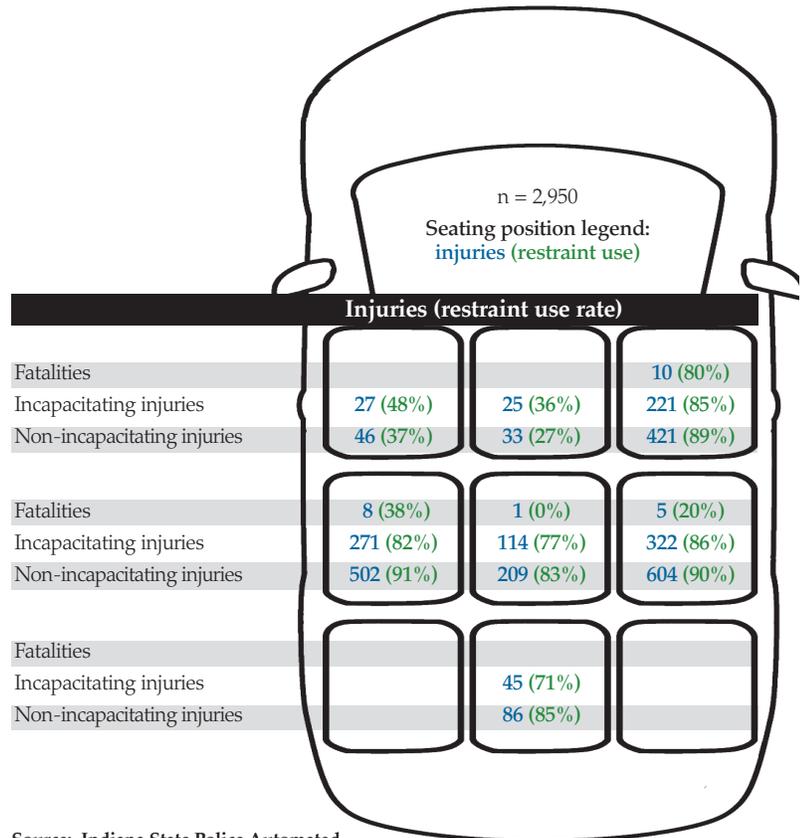




The number and restraint usage rates for children by injury type and seating position are shown in Figure 4. In 2014, the largest number of child fatalities occurred in the *front-right* passenger seating position. Eighty percent of these 10 fatalities were properly restrained. The greatest number of incapacitating injuries was experienced by child passengers in the *rear-right* seating position (322); of those, 86 percent were properly restrained.

Figure 5 illustrates restraint use rates among child occupants in traffic collisions based on whether their respective drivers were restrained or not. Based on known restraint use, between 2011 and 2015, over 99 percent of children were properly restrained when their drivers were restrained. When drivers were unrestrained, less than 10 percent of child occupants were properly restrained over the five-year period.

**Figure 4. Children in Indiana collisions by injury status, seating position, and restraint use, 2015**

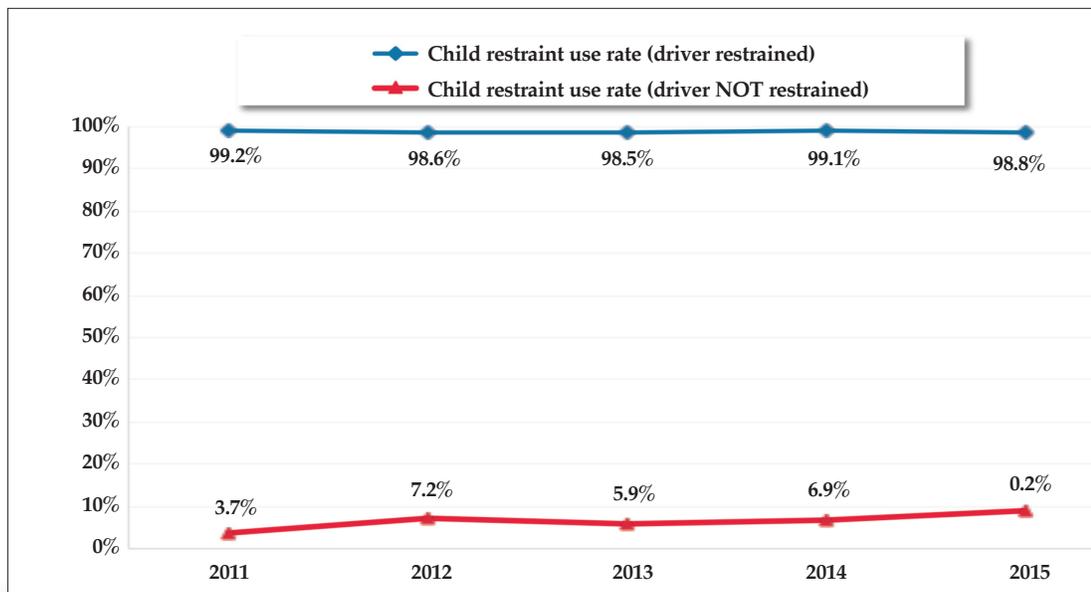


Source: Indiana State Police Automated Reporting Information Exchange System, as of March 17, 2016

Notes:

- 1) Injuries include those children (ages 0 - 14) sustaining *fatal*, *incapacitating*, *non-incapacitating*, and *possible* injuries where valid seating position was reported.
- 2) Percentages shown represent the percentage of individuals reported as properly restrained by injury type in each seating position.
- 3) *Unrestrained* and *unknown* restraint use codes are included in totals for restraint use rate calculations.

**Figure 5. Restraint use among children involved in Indiana traffic collisions, by age group, 2011-2015**



Source: Indiana State Police Automated Reporting Information Exchange System, as of March 17, 2016

The number of children killed or injured in traffic collisions by known driver restraint use is shown in Table 4. When drivers are not restrained, child occupants are more likely to experience fatal or incapacitating injuries. In 2015, approximately 3 percent of child occupants in crashes involving unrestrained drivers were killed. Among child occupants in col-

lisions where drivers were known to be restrained, less than 1 percent of child passengers were killed—making a child in a vehicle with an unrestrained driver 5.2 times more likely to be killed in 2015 crashes than those in vehicles with unrestrained drivers.

**Table 4. Child occupants involved in Indiana collisions, by child injury status, and driver restraint use, 2011-2015**

	2011		2012		2013		2014		2015	
	Count	%								
<b>Driver restrained (D-R)</b>	<b>2,451</b>	<b>100.0%</b>	<b>2,495</b>	<b>100.0%</b>	<b>2,391</b>	<b>100.0%</b>	<b>2,432</b>	<b>100.0%</b>	<b>2,588</b>	<b>100.0%</b>
Fatal	13	0.5%	14	0.6%	15	0.6%	10	0.4%	14	0.5%
Incapacitating	74	3.0%	94	3.8%	85	3.6%	182	7.5%	831	32.1%
Non-incapacitating	2,307	94.1%	2,336	93.6%	2,238	93.6%	2,206	90.7%	1,640	63.4%
Other	36	1.5%	30	1.2%	39	1.6%	29	1.2%	71	2.7%
No injury	21	0.9%	21	0.8%	14	0.6%	5	0.2%	32	1.2%
<b>Driver not restrained (D-NR)</b>	<b>323</b>	<b>100.0%</b>	<b>359</b>	<b>100.0%</b>	<b>320</b>	<b>100.0%</b>	<b>291</b>	<b>100.0%</b>	<b>283</b>	<b>100.0%</b>
Fatal	7	2.2%	5	1.4%	8	2.5%	0	0.0%	8	2.8%
Incapacitating	14	4.3%	34	9.5%	28	8.8%	42	14.4%	112	39.6%
Non-incapacitating	298	92.3%	317	88.3%	281	87.8%	246	84.5%	157	55.5%
Other	2	0.6%	3	0.8%	3	0.9%	2	0.7%	2	0.7%
No injury	2	0.6%		0.0%	0	0.0%	1	0.3%	4	1.4%
<b>Relative risk of fatal injury</b>	<b>4.1*</b>		<b>2.5</b>		<b>4.0*</b>		<b>na</b>		<b>5.2*</b>	

Source: Indiana State Police Automated Reporting Information Exchange System, as of March 17, 2016

Notes:

1) Relative risk of fatal injury is calculated as % D-NR / % D-R.

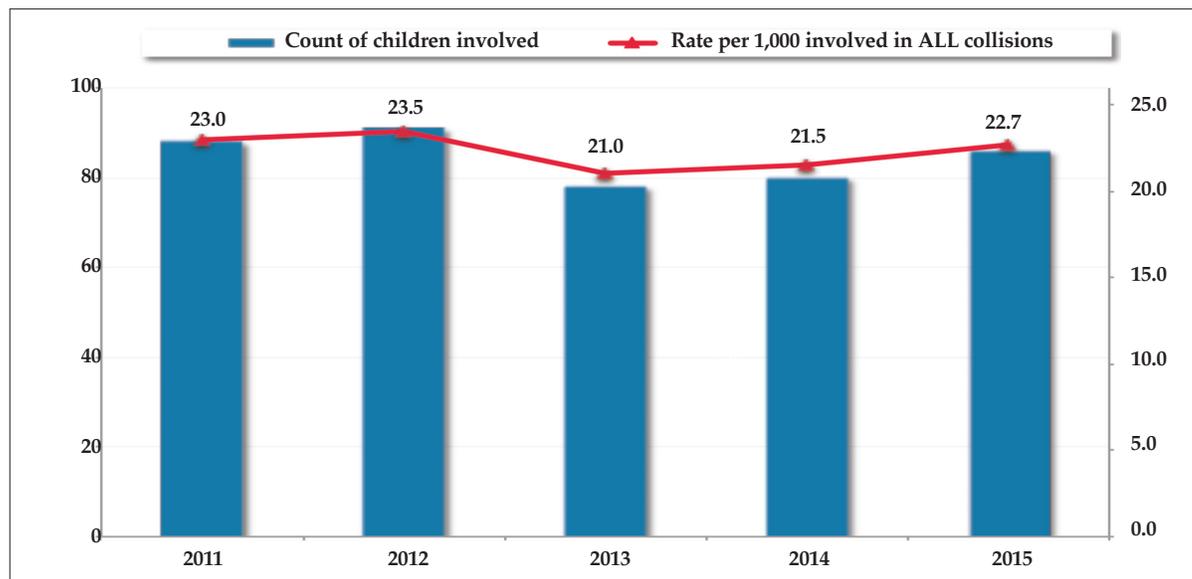
2) \* Relative risk ratios are significant (p<0.05).

## ALCOHOL-IMPAIRED COLLISIONS

In 2015, 86 children were involved in alcohol-impaired traffic collisions (Figure 6), which involved a driver with a blood alcohol content (BAC)

test result at or above 0.08 grams per deciliter (g/dL). The number of children involved in alcohol-impaired collisions increased from 80 in 2014 to 86 in 2015. Over the five-year period, the rate of child involvement in alcohol-impaired collisions peaked in 2012 at 23.5 per 1,000 involved.

**Figure 6. Children involved in Indiana alcohol-impaired collisions, 2011-2015**



Source: Indiana State Police Automated Reporting Information Exchange System, as of March 17, 2016

Note: When considering the reported decreases in 2015 alcohol-impaired crashes and fatalities, it is important to note that these numbers are likely to increase somewhat once BAC results reported after the March 17, 2016, extract are analyzed.

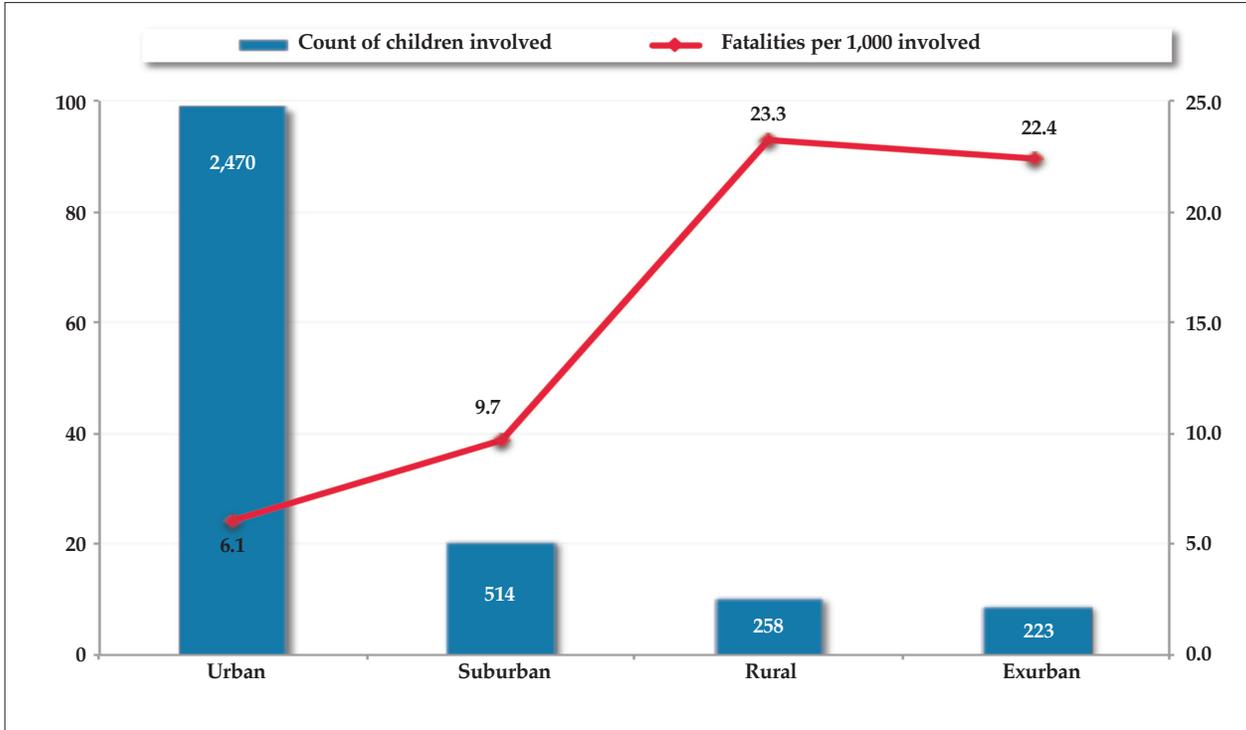


# GEOGRAPHY OF TRAFFIC INJURIES

In 2015, the fatal injury rate per 1,000 children involved in traffic collisions in Indiana was lowest in urban (6.1 per 1,000) but substantially higher in rural (23.3), exurban (22.4), and suburban (9.7) locales (Figure 7). The primary map on page 9 illustrates rates of Indiana child traffic injuries and fatalities for children aged less-than-one to 14 years of age

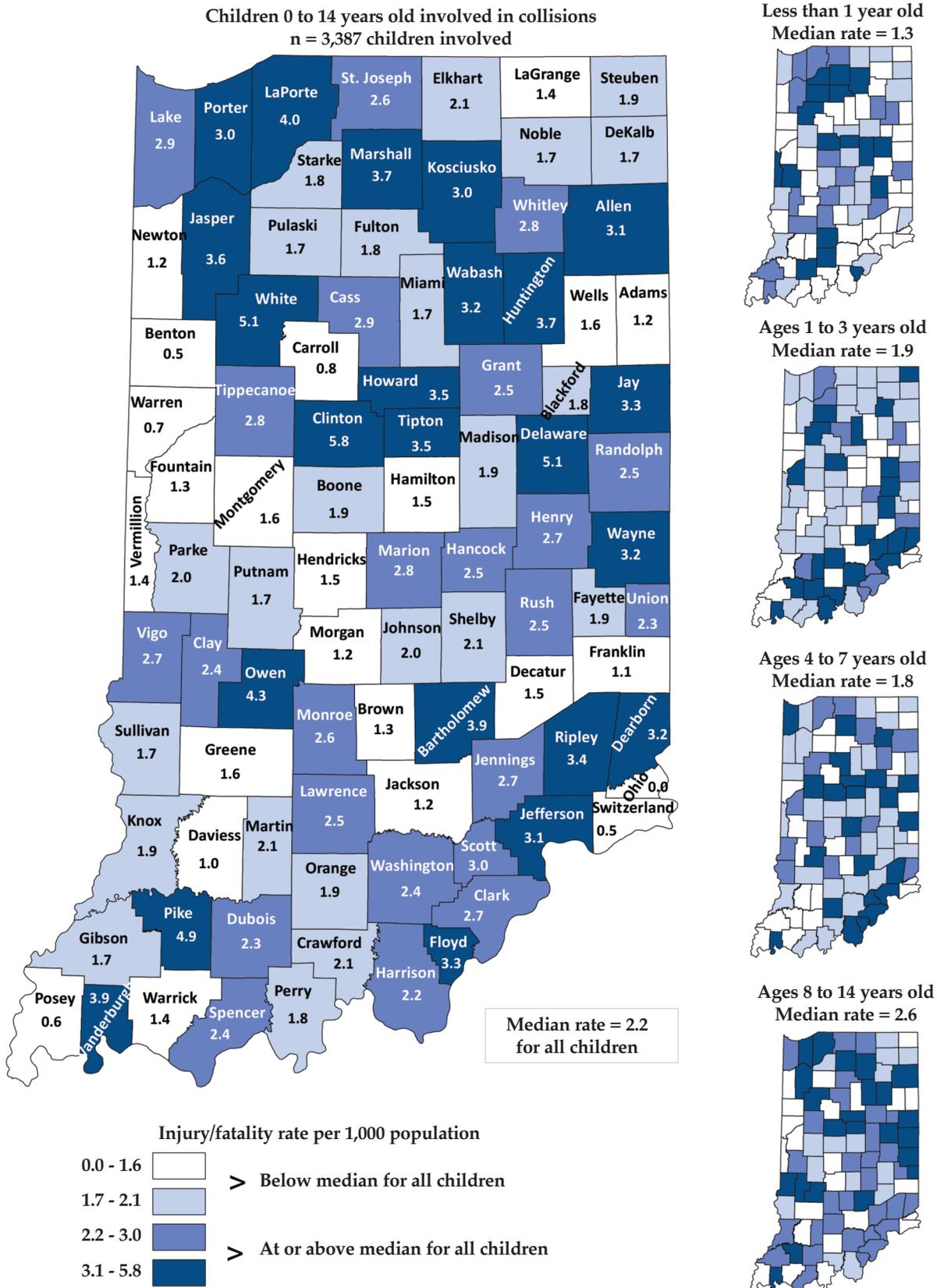
by county. The median traffic injury/fatality rate per 1,000 for children 14 and younger was 2.2. Inset maps depict rates by age group and county. Among the less-than-1-year-old age group, the mean traffic injury/fatality rate per 1,000 was 1.3, while the mean rate for the 8- to 14-year-old age group was 2.6. Child injury rates appear to be higher in counties clustered in the northern half of the state.

Figure 7. Children involved in Indiana collisions by census locale, 2011-2015



Source: Indiana State Police Automated Reporting Information Exchange System, as of March 17, 2016

Map 1. Child injury/fatality rates in Indiana traffic collisions, by county, 2015



Sources: Indiana State Police; U.S. Census Bureau



## DEFINITIONS

- **Annual Rate of Change (ARC)** is the rate that a beginning value must increase/decrease each period (e.g., month, quarter, year) in a time series to arrive at the ending value in the time series. ARC is a "smoothed" rate of change because it measures change in a variable as if the change occurred at a steady rate each period with compounding. For example, to measure change in a variable from 2011 to 2015, it is calculated as  $(\text{Value in 2015} / \text{Value in 2011})^{1/4} - 1$ .
- **Census Locale:** *Urban* is defined as Census 2000 Urban Areas (2007-2009) or Census 2010 Urban Areas (2010-2011), *suburban* as areas within 2.5 miles of urban boundaries, *exurban* as areas within 2.5 miles of suburban boundaries, and *rural* as areas beyond exurban boundaries (i.e., everything else).
- **Not injured** status includes individuals involved in collisions reported as *null* values in the injury status code field. Reporting officers are instructed to enter only *drivers* in ARIES, if no injury occurs; however, passengers and non-motorists are sometimes mistakenly reported when no injury occurs. For this reason, *not injured* counts should be interpreted with caution.
- **Non-incapacitating** injuries include those injuries reported as *non-incapacitating* or *possible*.
- **Other** injury status includes *not reported*, *unknown*, and *refused* (treatment) status codes.
- **Restraint use** - Vehicle occupants injured in Indiana collisions are counted as having been restrained when the investigating officer selects any one of the following passenger vehicle safety equipment categories on the Indiana Crash Report: (1) *lap belt only*; (2) *harness*; (3) *airbag deployed and harness*; (4) *child restraint*; or (5) *lap and harness*.

## REFERENCES

National Highway Traffic Safety Administration. (2014, September). *Car Seat Recommendations for Children*.

(<http://www.safercar.gov/parents/CarSeats/Right-Seat-Age-And-Size-Recommendations.htm?view=full>)

## DATA SOURCES

- Indiana State Police Automated Reporting Information Exchange System (ARIES), as of March 17, 2016.
- U.S. Census Bureau, Annual Estimates of the Resident Population by Single-Year of Age and Sex for the United States and States (2014), provided by the Indiana Business Research Center, Indiana University.

This publication was prepared on behalf of the Indiana Criminal Justice Institute (ICJI) by the Indiana University Public Policy Institute (PPI). Please direct any questions concerning data in this document to ICJI at 317-232-1233.

This publication is one of a series of publications that form the analytical foundation of traffic safety program planning and design in the state of Indiana.

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An electronic copy of this document can be accessed via the PPI website ([www.policyinstitute.iu.edu](http://www.policyinstitute.iu.edu)), the ICJI website ([www.in.gov/cji/](http://www.in.gov/cji/)), or you may contact the PPI at 317-261-3000.

## Traffic Safety Project

Designing and implementing effective traffic safety policies requires data-driven analysis of traffic collisions. To help in the policy-making process, the Indiana University Public Policy Institute collaborates each year with the Indiana Criminal Justice Institute to analyze vehicle crash data from the Automated Reporting Information Exchange System (ARIES), maintained by the Indiana State Police. This marks the tenth year of this partnership. Research findings are summarized in a series of publications on various aspects of traffic collisions, including alcohol-related crashes, commercial vehicles, dangerous driving, child passenger safety, motorcycles, occupant protection, and drivers. An additional publication provides detailed information on county and municipality data. These publications serve as the analytical foundation of traffic safety program planning and design in Indiana.

Indiana collision data are obtained from Indiana Crash Reports, as completed by law enforcement officers. Crash reports for all Indiana collisions are entered electronically through ARIES. Collisions trends as reported in these publications incorporate the effects of changes to data elements on the Crash Report, agency-specific enforcement policy changes, re-engineered roadways, driver safety education programs, and other unspecified effects. A collision produces three levels of data: collision, unit (vehicles), and individual. For this reason, readers should pay particular attention to the wording of statements about the data to avoid misinterpretations. If you have questions regarding trends or unexpected results, please contact the Indiana Criminal Justice Institute, Traffic Safety Division for more information.

## The Indiana Criminal Justice Institute

Guided by a Board of Trustees representing all components of Indiana's criminal and juvenile justice systems, the Indiana Criminal Justice Institute serves as the state's planning agency for criminal justice, juvenile justice, traffic safety, and victim services. ICJI develops long-range strategies for the effective administration of Indiana's criminal and juvenile justice systems and administers federal and state funds to carry out these strategies.

## The Governor's Council on Impaired & Dangerous Driving

The Governor's Council on Impaired & Dangerous Driving, a division of the Indiana Criminal Justice Institute, serves as the public opinion catalyst and the implementing body for statewide action to reduce death and injury on Indiana roadways. The Council provides grant funding, training, coordination, and ongoing support to state and local traffic safety advocates.

## Indiana University Public Policy Institute

The IU Public Policy Institute delivers unbiased research and data-driven, objective, expert analysis to help public, private and nonprofit sectors make important decisions that directly impact quality of life in Indiana. Using the knowledge and expertise of our staff and faculty, we provide research and analysis that is free of political and ideological bias. A multidisciplinary institute within the Indiana University School of Public and Environmental Affairs (SPEA), our efforts also support the Indiana Advisory Commission on Intergovernmental Relations (IACIR).

## The National Highway Traffic Safety Administration (NHTSA)

NHTSA provides leadership to the motor vehicle and highway safety community through the development of innovative approaches to reducing motor vehicle crashes and injuries. The mission of NHTSA is to save lives, prevent injuries and reduce economic costs due to road traffic crashes, through education, research, safety standards and enforcement activity.



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