Community Delivery of Teen Driving Plan

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Session objectives

• State the importance of parent-supervised driving practice in teen crash reduction
• Describe how the TeenDrivingPlan (TDP) Practice Guide elements facilitate parent participation
• Describe the successes and challenges encountered in implementing a community model of the program
• Identify possible strategies for application in your own community
Wisconsin teen driving snapshot

- Drivers ages 16-19 are more likely to be in a motor vehicle crash than other age groups.

- Drivers ages 16-19 are more likely than other drivers to be involved in crashes caused by:
  - inattentive driving
  - failing to control the vehicle
  - speeding
  - too fast for conditions
  - failing to yield the right of way
  - following too close
  - disregarding traffic control

Source: Teen Monograph, Wisconsin DOT, Bureau of Transportation Safety, Safety Programs Section (2015)
Program background

• Collaboration included:
  – Children’s Hospital of Wisconsin
  – Children’s Hospital of Philadelphia
  – Wisconsin Department of Health Services
  – Local health departments under the Maternal Child Health (MCH) block grant program
• Program was proven effective in clinical trial*
• Our goal was to adapt the program to a community model that allowed for a larger scale delivery of the program

*https://injury.research.chop.edu/teen-driving-safety/teendrivingplan-research#.WrkqwfkbNtQ
Program components

- Program components:
  - Practice Guide
  - Goal Guide
  - Logging and Rating Tool
  - 52 short YouTube videos

- Support tools:
  - Information card
  - Demographic form
  - Parent pre-post tests
  - Fidelity checklist
Methods

• Community model
  – Delivered by community facilitators
  – One hour in-person session with PowerPoint
  – Small groups such as driver education parent meeting

• Employer model
  – Delivered by community health educator
  – One hour in-person session with PowerPoint
  – Small group during the lunch hour at work
  – Health and wellness credit available

• In-home model
  – Facilitated by community health educator and trusted parent representative
  – Self-guided exploration of resources using iPads
  – Organic, small group conversation
Project timeline

2016
- Licensing and branding of materials
- Transfer of surveys into shared data system
- Development of an online facilitator training
- Community model pilots
- Qualitative interviews following each pilot

2017
- Program modifications based on pilots
- Creation of marketing resources
- Community model test
- Employer model test
- In-home model test
- Program data evaluation
Session results

20 sessions

151 participants

5% Teen with a Probationary License
20% Teens with an Instruction permit
73% Teens with no permit or license yet

72% of the parents attending were female

Parent stress level

- Extremely calm: 2%
- Somewhat calm: 17%
- Neither: 2%
- Somewhat stressed: 24%
- Extremely stressed: 4%
Session results

After the sessions, parents agreed that:

- Graduated Driving Licensing (GDL) laws can reduce teen crash risk. 91%
- Involved caregivers that set rules and monitor their teens can lower crash risk. 94%
- I can identify different driving environments in which my teen should practice driving. 94%
- I feel I will be a better supervisor of my teen’s driving practice. 86%
- I am able to enforce GDL requirements with my teen. 100%
- I have a better understanding of the risk factors for new drivers and GDL requirements. 100%
Session results

When a pre-survey component was added to questions without one, it showed significant movement in key areas:

<table>
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<th></th>
<th>In general, I feel I will be a better supervisor.</th>
<th>Overall, I have a better understanding of the risk factors for new drivers and GDL requirements.</th>
<th>Overall, I am able to enforce GDL requirements with my teen.</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>After</td>
<td>Before</td>
<td>After</td>
</tr>
<tr>
<td>Strongly agree</td>
<td>86%</td>
<td>14%</td>
<td>43%</td>
</tr>
<tr>
<td>Agree</td>
<td>14%</td>
<td>29%</td>
<td>57%</td>
</tr>
<tr>
<td>Neither</td>
<td>0%</td>
<td>29%</td>
<td>0%</td>
</tr>
<tr>
<td>Disagree</td>
<td>0%</td>
<td>29%</td>
<td>0%</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>0%</td>
<td>0%</td>
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</tbody>
</table>
Results

• Successes included
  – Engaged stakeholders
  – Transfer of TDP tools
  – Survey revisions
  – Creation of additional tools
  – Adaptability of TDP to various environments

• Challenges included
  – Facilitator training
  – Program fidelity
  – Competing programs
  – Engaging parents
  – Sustained “human touch”
Conclusions

• TDP can be implemented in a wide variety of settings
• TDP can help parents understand new driver risks and how GDL and quality practice are protective
• Once parents understand the need, they show interest in using the TDP resources
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