



Teen driving in rural North Dakota: A qualitative look at parental perceptions[☆]

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ABSTRACT

Motor vehicle crashes are the leading cause of death among teens in the United States. Graduated driver licensing (GDL) programs allow new drivers to gain driving experience while protecting them from high-risk situations. North Dakota was one of the last states to implement GDL, and the current program does not meet all of the best practice recommendations. This study used qualitative techniques to explore parents' perceptions of the role teen driving plays in the daily lives of rural North Dakota families, their understanding of the risks faced by their novice teen drivers, and their support for GDL. A total of 28 interviews with parents of teens aged 13–16 years were conducted in four separate rural areas of the state. During the face-to-face interviews, parents described their teens' daily lives as busy, filled with school, sports, and other activities that often required traveling considerable distances. Participation in school-sponsored sports and other school-related activities was highly valued. There was nearly unanimous support for licensing teens at age 14½, as was permitted by law at the time of the interviews. Parents expressed that they were comfortable supervising their teen's practice driving, and few reported using resources to assist them in this role. Although few parents expressed concerns over nighttime driving, most parents supported a nighttime driving restriction with exemptions for school, work or sports-related activities. Despite many parents expressing concern over distracted driving, there was less consistent support among parents for passenger restrictions, especially if there would be no exemptions for family members or school activities. These findings can assist in planning policies and programs to reduce crashes among novice, teen drivers, while taking into account the unique perspectives and lifestyles of families living in rural North Dakota.

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1. Introduction

Motor vehicle crashes are the leading cause of death among teens in the United States (Centers for Disease Control and Prevention, 2010). Crash risk is highest during the first years of independent driving (Ferguson et al., 2007). Driver inexperience and immaturity affect all novice teen drivers; whereas,

other factors such as risk-taking propensity and distracted or alcohol-impaired driving affect a subset of teens, putting them at even higher crash risk (Williams, 2003; Shope and Bingham, 2008; Centers for Disease and Control Prevention, 2009; Braitman et al., 2008). To help address the increased crash risk among novice teen drivers, states have implemented graduated driver licensing (GDL) programs. These programs extend the learner's permit phase, usually up to 6–12 months, and initially limit teens' independent driving under various high-risk conditions, such as nighttime driving or transporting teen passengers (Ferguson et al., 2007). GDL programs are widely credited for reducing crashes among the youngest drivers by roughly 20–40% (Shope, 2007). Because parents are the primary enforcers of GDL, these programs are more effective when parents implement the restrictions and teens comply (Simons-Morton et al., 2008; Brookland and Begg, 2011).

[☆] Disclaimer: The findings and conclusions in this paper of those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

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North Dakota is one of five states in which teens can obtain their learner's permit as early as their 14th birthday (Insurance Institute for Highway Safety, 2012), and, until January 1, 2012, North Dakota teens could obtain a full license at age 14 years 6 months (North Dakota Department of Transportation, 2011). The Minor Drivers License Law that was passed during the 2010–2011 legislative session increased the learner's permit phase from 6 months to 1 year for teens under 15 years of age; those 15 years of age must hold their learners' permit until they turn 16 or a minimum of 6 months, whichever is longer (North Dakota Department of Transportation, Safety Division, 2012). During the permit phase, only supervised driving with an adult who has had a license for longer than 3 years is permitted. The law also introduced a nighttime driving restriction for those under 16 years of age, and a ban on cell phone use while driving (North Dakota Department of Transportation, Safety Division, 2012). However, it did not include a teen passenger restriction during the intermediate licensing phase as a more comprehensive GDL program would (North Dakota Department of Transportation, Safety Division, 2012). Whereas previously, drivers' education was not a requirement, the Minor Drivers License Law requires that teens under 16 years of age complete drivers' education that includes both classroom and behind-the-wheel instruction prior to road-testing (North Dakota Department of Transportation, Safety Division, 2012). Additionally, 50 h of supervised driving experience is required of teens 14 and 15 years of age (North Dakota Department of Transportation, Safety Division, 2012).

Surveys in several rural states demonstrate that parents of teens support GDL, and that support in rural areas tends to be equivalent to urban areas within a given state (AAA Kansas et al., 2008; Center for the Study of Young Drivers, University of North Carolina – Chapel Hill, 2010; University of Iowa Injury Prevention Research Center, 2010; University of North Carolina, Highway Safety Research Center, 2001). However, the Kansas and North Dakota surveys identified some differences between urban and rural residents. In Kansas, rural parents were more likely to support teens beginning the learner permit phase at age 14 years rather than 15 years (AAA Kansas et al., 2008). In North Dakota, parents living in rural areas indicated less support for increasing the learner permit phase and restricting nighttime driving (Center for the Study of Young Drivers, University of North Carolina – Chapel Hill, 2010).

Research suggests that parental support for GDL is somewhat dependent on their knowledge of the driving environment and conditions in their area, in addition to their understanding of driving risks in young, inexperienced drivers (Keating and Halpern-Felsher, 2008; Simons-Morton et al., 2008; Williams et al., 2006). However, the North Dakota telephone survey did not inquire about parental perceptions of their teens' driving environment or their understanding of teen driving risks (Center for the Study of Young Drivers, University of North Carolina – Chapel Hill, 2010). Furthermore, the telephone survey, which contained structured, closed-ended questions, did not attempt to identify unique aspects of rural North Dakota life that may influence parental perceptions of the need for teens to drive, and the crash risks that novice teen drivers face (Center for the Study of Young Drivers, University of North Carolina – Chapel Hill, 2010). In the current study, these topics were explored through semi-structured interviews with parents of teens who lived in four rural communities in North Dakota.

2. Aim

This study aimed to: (1) gain a better understanding of rural North Dakota life and the role teen driving plays in the daily family routine; (2) explore parental perceptions of teen driving crash risks;

(3) inquire about specific parental concerns with their teen driving; and (4) explore parental support for GDL nighttime and passenger restrictions. In order to descriptively capture parental views in their own words, qualitative methods were used.

3. Methods

3.1. Study questionnaire

A semi-structured questionnaire with open-ended questions was developed and reviewed by all members of the study team and an external subject matter expert. The questionnaire was designed to cover 4 study aims: how teen driving fits into daily rural life, initiation of teen driving, teen driving practices, parental concerns about driving risks for their teen, and support for GDL nighttime and passenger restrictions in North Dakota (Table 1). The questionnaire included general questions such as "To help us understand how your teen's driving affects your daily life, can you tell me about how you spend a typical week day?" and "Are there any driving situations or conditions that you think are particularly risky for teenage drivers in your area?", and more specific questions such as "Do you have concerns about your teen having their friends in the car while he/she is driving? What types of concerns?" (Table 1). Parents were also encouraged to express any views or thoughts that may not have been covered. In addition to the questions listed in Table 1, rapport-building questions were asked and demographic information on the teen was collected.

The study protocol and questionnaire were reviewed and approved by the Institutional Research Board of the North Dakota Department of Health. The questionnaire was pilot-tested with five parents of teen drivers to determine length of interview and appropriateness of language. Based on the pilot-testing, the interview length was determined to be between 30 and 45 min. Upon completion of the pilot testing, members of the study team conducted practice interviews with each other to gain familiarity with the questionnaire.

3.2. Sample selection

Four communities in rural regions of the state were selected as interview sites; communities were located in the south-west, south-central, north-east and north-central regions of the state. These communities were chosen because they are recognized as farming or ranching areas.

Purposive sampling was used to collect names of parents with teens between 13 and 16 years of age. Employees of the North Dakota Department of Health or their family members, who grew up in the selected regions, were asked to identify parents of teens in their hometowns, or teachers and other community workers who could recommend potential candidates for interviews. Parents were eligible to be interviewed if they had at least one child between the ages of 13 and 16 years, whether or not the teen had begun to drive, had a learner's permit or driver's license. Once telephone numbers were obtained, parents were contacted by phone to confirm eligibility and to request an interview. Parents were informed of the study's aims, and as part of the verbal consent procedure, parents were informed that participation was voluntary. No incentive to participate was provided.

3.3. Data collection

Face-to-face interviews were conducted either at the parents' homes or at convenient locations such as workplaces or local restaurants. To facilitate rapport, interviews began by asking the parent(s) about the area, and how long he/she has lived there before

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