State of Alabama
Annual Grant Application
Fiscal Year 2025

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Commonly Used Acronyms

3HSP	Triennial Highway Safety Plan
ADECA	Alabama Department of Economic and Community Affairs
ADPH	Alabama Department of Public Health
AIDPC	Alabama Impaired Driving Prevention Council
ALDOT	Alabama Department of Transportation
ALEA	Alabama Law Enforcement Agency
AOC	Alabama Administrative Office of Courts
AOHS	Alabama Office of Highway Safety
BAC	Blood Alcohol Content
BIL	Bipartisan Infrastructure Law, aka Infrastructure Investment and Jobs Act
CARE	Critical Analysis Reporting Environment system
CIOT	Click-It-or-Ticket
CMV	Commercial Motor Vehicle
CORE	CTSP Online Reporting Engine
CPS	Child Passenger Safety
CRD	Child Restraint-Deficient [Crashes]
CRS	Child Restraint Systems
CTSP/LEL	Community Traffic Safety Project/ Law Enforcement Liaison
CU	Causal Unit
DD	Distracted Driving
DRE	Drug Recognition Expert
DUI	Driving Under the Influence
E-BE	Evidence Based Enforcement
ED	Electronic Devices
ETL	Extract-Translate-Load
F/A	Fatigue/ Asleep [distractions/crashes]
FARS	Fatality Analysis Reporting System (federal)
FHWA	Federal Highway Administration
FMCSA	Federal Motor Carrier Safety Administration
GHSA	Governors Highway Safety Association
HSIP	Highway Safety Improvement Plan
HVE	High Visibility Enforcement (programs)
ID	Impaired Driving
LETS	Law Enforcement and Traffic Safety
MIECE	Model Inventory of Emergency Care Elements
MMUCC	Model Minimum Uniform Crash Criteria
NEMSIS	National Emergency Medical Services Information Systems
NHTSA	National Highway Traffic Safety Administration
PDO	Property Damage Only
PICs	Pedestrian Involved Crashes
PI&E	Public Information and Education
RD	Restraint-Deficient [Crashes]
SHSP	Strategic Highway Safety Plan
SMI	Suspected Minor Injury (related to crashes)
SSI	Suspected Serious Injury (related to crashes)
STEP	Selective Traffic Enforcement Program
TRCC	Traffic Records Coordinating Committee
TSIS	Traffic Safety Information Systems
TSRP	Traffic Safety Resource Prosecutor
TZD	Toward Zero Deaths
UA-CAPS	University of Alabama Center for Advanced Public Safety
VMT	Vehicle Miles Traveled

Coordination with SHSP

Description of Outcomes regarding SHSP and HSIP Coordination

Strategic Highway Safety Roundtable and Implementation Teams

To move towards the Safe Systems Approach under BIL, Alabama created the Strategic Highway Safety Roundtable working group. The purpose of the Alabama Highway Safety Roundtable is to have representatives from engineering, enforcement, education, and emergency medical services work collaboratively to reduce the number of traffic-related fatalities and serious injuries on Alabama roads. With the new Bipartisan Infrastructure Law and the national shift to the Safe System Approach, the Roundtable provides the opportunity for stakeholders to come together to identify the best ways to coordinate existing work and develop new solutions to common areas of concern.

The working group consists of representatives from government agencies, law enforcement, transportation departments, educational institutions, community organizations, advocacy groups, and other key stakeholders with expertise in traffic safety. This group has served as a catalyst for enhanced collaboration and communication among various traffic safety partners, fostering a more coordinated approach to program development and administration.

Quarterly meetings are scheduled to facilitate dynamic discussions on content driven by group interest and focus areas in the Strategic Highway Safety Plan. Meetings typically contain a victim story or focus, a data driven presentation, and time for attendees to update the group on upcoming events or campaigns. The open format ensures that all voices are heard, and perspectives are considered. These meetings have become invaluable platforms for sharing best practices, exchanging data and research findings, and brainstorming innovative solutions to traffic issues in Alabama.

In summary, the creation of the Strategic Highway Safety Roundtable group has become a tool towards Alabama's Safe Systems Approach, uniting traffic safety partners and initiating a culture of collaboration and communication.

SHSP Implementation Groups and HSP Coordination

AOHS has worked collectively with ALDOT in performance measures development and target setting for the common goals of the HSP and SHSP. The major goals of both the HSP and the SHSP are to bring about the most effective and coordinated statewide allocation of traffic safety resources possible, including funding, equipment, and personnel.

The latest Strategic Highway Safety Plan was published June 2022. The plan identified emphasis areas based on data analysis. The suggested programs implemented from the emphasis areas and corresponding action items receive extensive review and recommendations by the state's Strategic Highway Safety Plan working group. The overall performance measures and targets set in the SHSP for the State of Alabama are complementary to, and consistent with, those developed by AOHS. Over the past several years, the AOHS Highway Safety Plans (HSP), have been incorporated into the SHSP, specifically with emphasis areas identified as "Behavioral Based."

The State Highway Safety Plan (SHSP), triennial Highway Safety Plan (3HSP), and Highway Safety Improvement Program (HSIP) work together to develop aligned core performance measure target values to ensure that all agencies are working toward the same goal during the years each plan is updated. The SHSP is updated at least every five years and HSIP updated annually. The 3HSP will be updated every three years; however, the traffic safety performance measure targets are established annually in the annual grant application. As such, the SHSP, 3HSP, and HSIP have the same target values for FY22 when the SHSP was last updated. While these three plans are aligned in the areas and prioritization of traffic safety concerns in Alabama, the alignment of the 3HSP and HSIP annual targets for FY25 is yet to be determined.

Triennial HSP Updates

Items Updated for FY 25 AGA Submission*		
1.0	Data Analysis	Problem Identification Update for FY 2025
2.0	Common Performance Measure	Updates to Goals for C-1), C-2), C-3) using FY 22 FARS and FY 23 State Data
3.0	PP&E Update	Ongoing Engagement Planning and Event Follow Up

* Updates to Program Areas, Countermeasure Strategies, and Planned Activities will be detailed in the respective subject matter section.

1.0 Problem Identification Fiscal Year 2025 Update

Procedure for Problem Identification

The overall problem identification for the Alabama Highway Safety Plan (HSP) begins with the most recently generated data for Table 1. This arranges crash types by the number of fatalities and sets a priority if in fact, "all other things were equal." But all other things are not equal, and further analysis is needed to account for countermeasure effectiveness and cost. Nevertheless, Table 1 effectively gives everyone in the traffic safety community a high-level view of the source of fatalities as well as how these fatalities are reflected in the lower severity crashes.

Two entries in Table 1 are important regarding the Occupant Protection Plan. The following defines these two entries:

- Restraint-Deficient Crashes (RD) – any crash in which one or more of the occupants of any involved vehicle (including drivers) were not properly restrained; and
- Child Restraint-Deficient Crashes (CRD) – any crash in which one or more children who are subject to child restraint laws were not properly restrained, independent of the restraint characteristics of the other occupants.

Clearly RD is at the top of this list, demonstrating that occupant restraint is one of the most critical issues in traffic safety and fatality reduction. Child Restraint Deficiencies (CRD) are near the bottom of Table 1 with only eleven fatalities. This reflects the extreme efforts that have gone into child protection by several agencies throughout the state. Special emphasis is given to children who are quite vulnerable if not properly restrained, and the importance of maintaining child restraint programs is clear. The enforcement efforts for CRD are effectively the same as that for RD.

Table 1 shows that one of the most effective ways of reducing fatalities is to increase restraint use, and this example will be used to further illustrate the problem identification process that is applied to all potential countermeasures. In reading through this example, please do not restrict consideration to only seat belts, but recognize how the same principles apply to all countermeasures under consideration.

The next step in the problem identification process is to analyze the data for these crashes and determine all the demographics related to them (e.g., who, what, where, when, how, how old, and the "why" of crashes involving non-restrained occupants). The goal is to (1) determine the most effective countermeasures that can be applied, and once these are defined, (2) identify the best tactics to be applied within each.

This starts by determining those types of crashes that were going to be targeted for occupant protection countermeasure implementation. For example, a recent study determined a very strong correlation between Restraint Deficiencies (RD) and other risky driving characteristics. DUI (alcohol and

other drugs) and speed were correlated with non-use, and younger drivers 16-25 were particularly vulnerable. Young drivers are particularly susceptible to risk taking behaviors since the part of their brain that properly assesses risk is not fully developed until age 25. While the average seat belt use rate for all occupants has been measured above 90%, for those involved in fatal crashes the use rate was approximately 45%.

Evidence-based enforcement (E-BE) has been determined to be one of the most effective methods for increasing restraint use in general. This requires that specific locations be identified where there were concentrations of crashes involving unrestrained occupants. Once these hotspots are defined using the Critical Analysis Reporting Environment (CARE) software, the Community Traffic Safety Program/Law Enforcement Liaison (CTSP/LEL) Coordinators across the state are given information on the hotspot locations for the state. They are also provided detailed hotspot reports specific to their region to assist them in focusing their area efforts. Using the reports and maps developed for each region, the CTSP/LEL Coordinators develop plans, including the time schedule and work assignments, for their respective regions that focuses on the hotspot locations.

Narrative Description of Categories

The purpose of the narrative descriptions that follow is to give non-technical users of Table 1 a simple description for each of the items. This will enable better comparisons that are essential to optimal decisions regarding traffic safety resource allocations that must be made among the various crash categories.

Unless otherwise indicated, the counts presented in Table 1 are Crashes of various severities. Exceptions are 2023 crash categories 1 and 22, restraint items. These two exceptions are for restraints, and an asterisk (*) is placed on these items for the footnote that describes the reason for the exception.

The descriptions below are given in terms of the Table 1 item numbers that were used in the 2024-2026 3HSP (CY2022 data). A brief rationale will be given for each category so that its use can be placed into a real-world context. The ordering within the current Table 1 is in terms of the number of fatalities that were found for each category during CY2023. This is an update from the table used in the original 3HSP.

These categories are not mutually exclusive. It is easy to imagine crashes that might include five to ten of the categories simultaneously. Users of Table 1 will need to apply their knowledge of traffic crash causes and severities to estimate which of the multiple causes might be the primary cause for the fatalities indicated, and thus, which should have the higher priority to counter.

Descriptions of the categories within Table 1:

1. Seatbelt Restraint Fault* - This item records those restraint faults (generally non-use but could be improper use) of restraint that have been found to normally result in an increased severity in those who are not properly restrained. It covers drivers and all occupants of age 6 and older. Those aged less than 6 are covered in Category 22, Child Restraint Fault.

2. ID/DUI All Substances - This item includes all crashes in which either alcohol or any other drug was indicated to be involved in the crash.

3. Speed Involved - This item includes all crashes in which speed was indicated to be a factor, which is generally indicated as "Over Speed Limit." However, beginning in 2021 the PCC "Too Fast for Conditions" was added to this category.

4. Hit Obstacle on Roadside - This item includes crashes where the vehicle ran off the road and struck an object on the roadside, restricted to obstacles for which the responsible agency would have some capability to either remove or otherwise mitigate the hazard.

5. Wrong Way Items - All crashes where the causal vehicle is in a lane for oncoming traffic; this includes median crossovers and lane departures into oncoming traffic on two-lane or four-lane roads. It also includes violations in no-passing zones since these offenses would put the causal driver into oncoming traffic lanes.

6. Pedestrian Involved - This item includes all crashes that involved pedestrians in any way, independent of whether the pedestrian was the cause of the crash. See the comment under Motorcycle Involved, Category 10.

7. Fail to Yield or "Ran" (All) - This item includes all subcategories of Failure to Yield the Right-of-Way and "Ran xxx," such as "Ran a Stop Sign" or "Ran a Traffic Signal." The reporting of just one or a small subset of these did not seem to be warranted since the underlying cause of such behavior is the same regardless of where it manifests itself.

8. Large Truck Involved - Generally, this covers all trucks larger than the typical pickup truck. The attempt here is to concentrate on the size of the truck as opposed to its function or whether it is a CMV or not (some will be; others are not). See the comment under Motorcycle Involved, Category 10.

9. Mature – Age > 64 Caused - This item includes all crashes for which drivers of age 65 or older were listed as the causal drivers.

10. Causal Driver License Status Deficiency - This item includes all crashes in which the causal driver had one or more of the following driver license status deficiencies: Denied, Expired, Fraudulent, Revoked, and/or Suspended. It serves as an indicator as to whether the change of license status has a significant effect on the crash expectations of those drivers involved.

11. Motorcycle Involved - This item is for those crashes in which a motorcycle was involved either as the causal vehicle or the second unit in the crash. Discussions were conducted as to whether categories that involved vehicle types should be those "involved" or those "caused by." It was determined that countermeasures to these crashes could, and in some cases should, change the behaviors of vehicle drivers that are not of the category type who caused the crash. Thus, it was felt that all crashes in which they were involved should be included, and not just those caused by the driver of the specific vehicle type. This applies to all categories that are defined by a vehicle type, including pedestrians.

12. Youth Age 16-20 Caused - This item includes all crashes for which drivers of age 16-20 (inclusive) were listed as the causal drivers.

13. Aggressive Operation - This code is indicated by officers when there are two or more PCCs that are relevant and thus the indication is that the driver was under some psychological stress to disregard several safety considerations simultaneously. In CY2021, attribute C542 was added as an indicator in addition to C015 and C202 that had been used in the past.

14. Distracted Driving - Many different things tend to distract drivers, and this item is an attempt to count all of them. These would include distracted by: Passenger; Use of Electronic Communication Device; Use of Other Electronic Device; Fallen Object; Fatigued/Asleep; Insect/Reptile; Other Distraction Inside the Vehicle; and/or Other Distraction Outside the Vehicle. Of these, Fatigued/Asleep is redundant with Drowsy Driving (see 16). For purposes of analysis, it is being left as a contributor to this list to be consistent with the way it is reported on the crash report. It should be noted that Drowsy Driving may include items of fatigue and sleep that are not within the Distracted Driving category, see Category 15.

15. Drowsy Driving - This item includes all indications that the driver or drivers were drowsy or falling asleep.

16. Utility Pole - There are many roadside obstacles that are struck by vehicles that run off the road. Utility poles are listed here since generally, utility poles are obstacles that are of special interest to utility companies.

17. Vehicle Defects (All) - This includes all reportable vehicle defects, namely: Brakes, Steering, Tire Blowout/Separation, Improper Tread Depth, Wheels, Wipers, Windows/Windshield, Mirrors, Trailer Hitch/Coupling, Power Train, Fuel System, Exhaust, Headlights, Tail Lights, Turn Signal, Suspension,

Cruise Control, Body/Doors, and Other. Paper Report Archive that are no longer reported as separate items in eCrash include: Tires, Lights, Restraint System, and Cargo.

18. Work Zone Related - There are about ten locations within a work zone in which a crash can be specified to have been located. This item includes any or all of them. The work zone does not need to be a cause of the crash in any way for it to be counted; the crash just needs to be in or adjacent to the work zone.

19. Vision Obscured - This covers the following situations in which vision might be obscured by something in the roadway or its environment: Trees/Crops, Buildings, Embankment, Sign/Billboard, Lights/Glare (Roadside), Hillcrest and Curve in Road.

20. Bicycle (Pedalcycle) Involved - This is all crashes in which a pedalcycle (mostly bicycles) were involved independent of who caused the crashes. See comment under Motorcycle Involved, Category 10.

21. Railroad Train Involved - This counts the number of crashes in which a railroad train was involved independent of who may have caused the crashes. See comment under Motorcycle Involved, Category 10.

22. Child Restraint Fault* - This includes the child passengers aged 5 or younger who were not properly restrained.

23. School Bus Involved - This is the number of crashes that involved a school bus independent of the causal unit. See comment under Motorcycle Involved, Category 10.

24. Contributing Roadway Defects - Any crash where a roadway defect was noted as a Contributing Circumstance. Contributing Circumstances are recorded as “Roadway/Sign/Signal Defect” in the eCrash system.

Summary of Crash Severity by Crash Type (Table 1)

Beginning in 2010 it was determined that a tool should be established to enable decision makers to view the state's traffic safety issues at the highest possible level. This tool was named "Table 1" and it appears below. It was reasoned that, all other things being equal, traffic safety resource allocations should go to address those issues that cause the greatest number of fatalities. While this is a good default position to start from, all other things are rarely equal, and optimal resource allocations must also consider the cost of the countermeasures being considered and the proportion of the crashes that can reasonably be reduced by any given countermeasure. Thus, an item with a lower number of fatalities could become optimal to address if a lower cost countermeasure would reduce a larger number of its crashes and fatalities.

The eCrash system that went into effect July 1, 2009, creates data that meets most of the Model Minimum Uniform Crash Criteria (MMUCC). It provides data that are much timelier, since in many cases these reports are available the same day as the crash. Careful work was done to ensure that no variables or codes that could indicate a particular crash category of Table 1 were missed, and that the search criteria captured all the crashes for each of the categories for this evidence-based analysis.

The category with the highest number of fatal crashes is listed at the top of Table 1, descending to the crash type category with the lowest number of fatal crashes listed last. The number and percent of crashes by severity are listed for each category. This enables an easy comparison between the various crash types. It is important to realize that the categories of Table 1 are not mutually exclusive. However, since this is true in all the categories, these numbers serve to give the relative criticality of the categories that most often are the targets for funding or other resource allocations.

Table 1: Top Fatality Causes Alabama CY2023 Data

	Crash Type (Causal Driver)	Fatal Number	Fatal %	Injuries	Injury %	PDO No.	PDO %	Total
1.	Seat Belt Restraint Fault*	407	4.13%	3,731	37.87%	5,660	57.46%	9,851
2	ID/DUI All Substances	168	3.43%	1,703	34.73%	2,882	58.78%	4,903
3.	Speed Involved	165	2.28%	2,252	31.14%	4,691	64.86%	7,233
4.	Hit Obstacle on Roadside	138	2.58%	1,600	29.93%	3,534	66.12%	5,345
5.	Wrong Way Items	122	3.69%	725	21.92%	2,365	71.49%	3,308
6.	Pedestrian Involved	120	16.06%	554	74.16%	31	4.15%	747
7.	Fail to Yield or Ran (All)	111	0.36%	8,236	26.98%	21,591	70.74%	30,522
8.	Large Truck Involved	99	1.06%	1,684	18.01%	7,434	79.49%	9,352
9.	Mature (65 or Older) Causal	98	0.72%	2,813	20.80%	10,364	76.65%	13,522
10.	License Deficiency Causal	90	1.73%	1,517	29.23%	3,463	66.72%	5,190
11.	Motorcycle Involved	89	5.60%	1,040	65.41%	423	26.60%	1,590
12.	Youth (16-20) Causal Driver	82	0.41%	3,905	19.48%	15,728	78.46%	20,047
13.	Aggressive Operation	69	2.51%	708	25.80%	1,879	68.48%	2,744
14.	Distracted Driving	55	0.42%	2,532	19.11%	10,454	78.90%	13,249
15.	Drowsy Driving	40	1.27%	1,129	35.76%	1,931	61.17%	3,157
16.	Utility Pole	27	1.20%	674	30.08%	1,434	63.99%	2,241
17.	Vehicle Defects – All	21	0.59%	741	20.84%	2,728	76.72%	3,556
18.	Work Zone Related	19	1.07%	358	20.10%	1,386	77.82%	1,781
19.	Vision Obscured	11	0.97%	263	23.13%	844	74.23%	1,137
20.	Bicycle Involved	11	4.68%	168	71.49%	46	19.57%	235
21.	Railroad Trains	7	11.86%	19	32.20%	32	54.24%	59
22.	Child Restraint Fault*	5	0.21%	313	12.89%	2,111	86.91%	2,429
23.	School Bus Involved	3	0.51%	76	12.97%	494	84.30%	586
24.	Roadway Defects – All	0	0.00%	27	23.48%	83	72.17%	115

2.0 Changes to Performance Plan

Common Performance Measures- C-1, C-2, C-3

	PERFORMANCE PLAN CHART FY24 -26 Highway Safety Plan		2019	2020	2021	2022	2023*
C-1	Traffic Fatalities	State	930	934	983	988	975
	Reduce the five-year average of 962 by .42% to 958 by 2026	Rolling Avg.	953	970	950	958	962
C-2	Serious Injuries in Traffic Crashes	State	5103	4782	5184	4836	4878
	Reduce the Number of Severe injuries in Traffic Crashes by 7.88% from 5381 to 4957 by 2026.	Rolling Avg.	7300	6505	5911	5381	4957
C-3	Fatalities/100M VMT	State	1.38	1.38	1.37	1.38	-
	Maintain fatality rate to at the current safety level of 1.34 by December 31, 2026.	Rolling Avg	1.36	1.38	1.34	1.35	-

*state data

Performance Measure: C-1) Number of traffic fatalities (State Data)

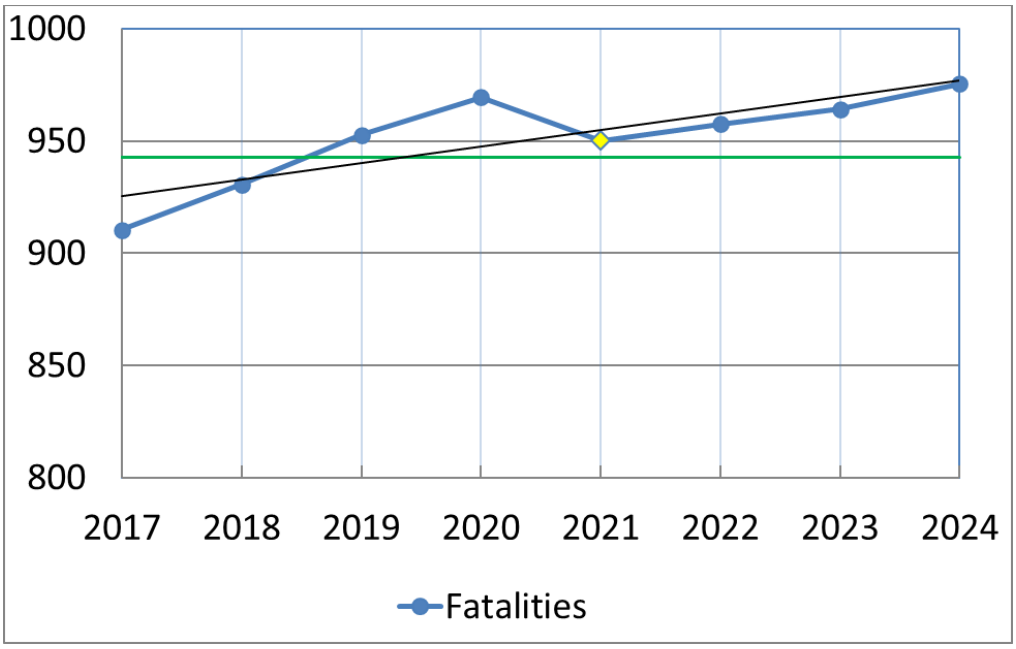
Performance Target Details

2019	2020	2021	2022	2023	Baseline	Goal
930	934	985	988	975	962	**958**

Performance Target Justification

Based on analysis of previous 5-year averages and trends in more recent state crash data, AOHS has projected a goal to reduce the five-year average of 962 by .42% to 958 by 2026.
Our projection model estimates exceed our FY2025 fatality baseline. Both our 5-year rolling average estimate (980) and linear 5-year rolling average projection (1001) are above our FY2025 fatality baseline (962). According to the latest census data, Alabama's population increased .5% between 2020 and 2021, and 1% between 2021 and 2022. Maintaining our FY2024-2026 fatality goal of 958, with these expected increases, will be a highly notable safety achievement.

5 Year Rolling Averages of Traffic Fatalities



Performance Measure: C-2) Number of serious injuries in traffic crashes (State crash data files)

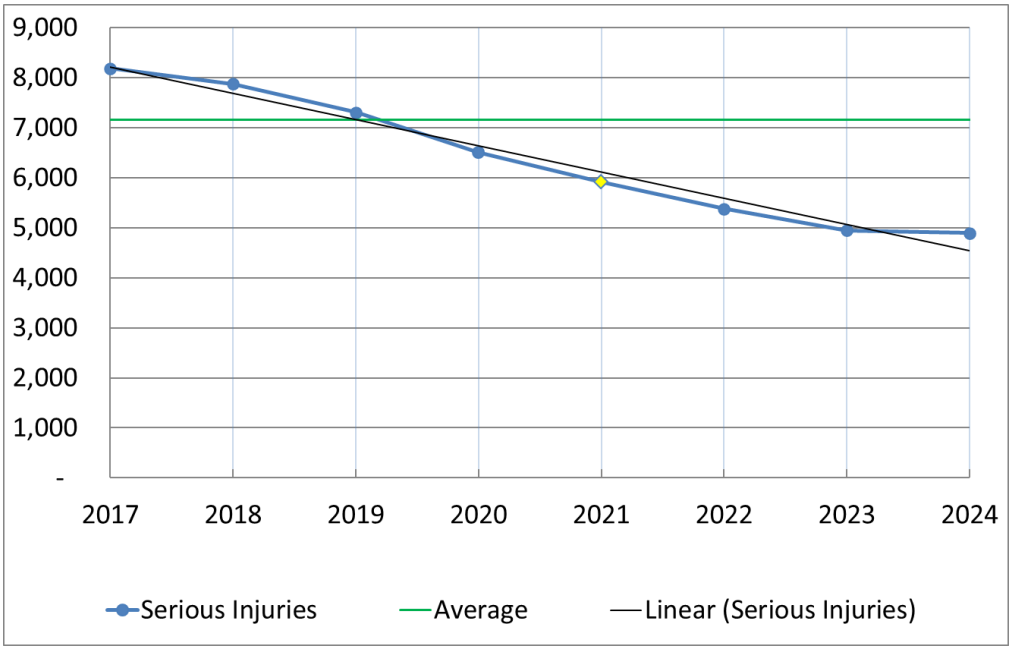
Performance Target Details

2019	2020	2021	2022	2023	Baseline	Goal
5103	4782	5184	4836	4878	4957	**4957**

Performance Target Justification

Based on analysis of previous 5-year averages and trends in more recent state crash data, AOHS has projected a realistic goal to reduce the Number of Severe injuries in Traffic Crashes by 7.88% from 5381 to 4957 by 2026. Our projection model estimates are below our FY2024 severe injury baseline. However, according to the latest census data, Alabama's population increased 1% between 2021 and 2022, and then an estimated .68% increase from 2022 to 2023. Our severe injury data shows a significant decrease in severe injuries in 2019. This creates an unrealistic scenario for the upcoming years based on linear projects alone. Our 2020 severe injury count is notable given it is the lowest on record. Furthermore, the increase in 2021 and the similar numbers in 2022 and 2023 being higher than our 2020 count suggests severe injuries are no longer in constant decline. Meeting a goal of 4957 by FY 2026 is below our historical averages and will allow us to monitor severe injury trends as future estimates become more consistent.

5 Year Rolling Averages of Serious Injuries



Performance Measure: C-3) Fatalities/VMT FARS Data

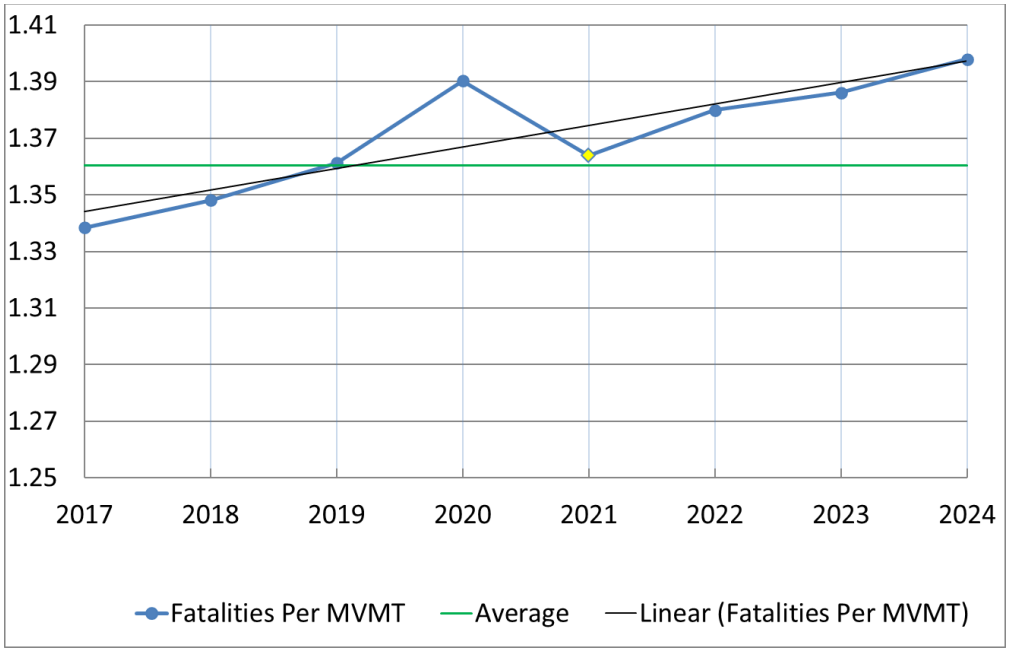
Performance Target Details

2018	2019	2020	2021	2022	Baseline	Goal
1.34	1.30	1.38	1.37	1.38	1.35	**1.34**

Performance Target Justification

Based on analysis of previous 5-year averages and trends in more recent state crash data, AOHS has projected a realistic goal to maintain the Total Fatality Rate/VMT at 1.34 by 2026. Our projection models estimates are above our FY2024 Fatalities per MVMT baseline. Both our 5-year rolling average estimate (1.40) and our linear 5-year rolling average projection (1.41) are above our baseline (1.38) for fatalities per MVMT in 2026. According to the latest census data, Alabama's population increased 1% between 2021 and 2022, and .68% between 2022 and 2023. Our state's population increases over the past two years indicate a continued population increase through our goal timeframe. Likewise, our yearly fatalities have increased year-to-year since 2019. With the projected higher number of fatalities and the population increases, maintaining our FY2025 fatalities per MVMT goal of 1.34 is a modest safety achievement.

5 Year Rolling Averages of Traffic Fatalities/100 MVMT



3.0 Changes to PP&E

Engagement Steps

After the engagement events conducted in 2023, the AOHS identified the following goals and next steps:

1. Continue to engage rural populations on child restraint information throughout the state. In years two and three of the 3HSP our office plans to expand engagement events to rural health fairs to engage a larger audience.
2. Continue partnering with non-profits to reach targeted communities.
3. Use paper surveys at events as well as Spanish language materials when appropriate to increase accessibility.
4. Craft a targeted survey to administer to attendees at seat check events, especially those held in rural locations, that helps to identify resource or access issues that are faced by the participants, (how far did they have to travel, was cost a prohibitive factor in car seat safety, are there issues related to childcare, etc.)
5. Continue engagement events at sporting events. This is a great way to interact with target demographic males. These events can be in rural and urban locations to cover both impaired driving and pedestrian issues.
6. Another upcoming issue is the effect of the recent legalization of medical marijuana. Questions were built into the initial input survey, and those responses will be mapped to best track knowledge levels and media platform preferences. This will allow the SHSO to determine a baseline to create educational campaigns on the dangers of driving while under the influence of marijuana.
7. The HSO will also work to engage with the underserved military population by collaborating with our partners and hosting Seat Checks at various military bases throughout the state.

The following lists the ongoing Public Participation and Outreach efforts and their connection with the goals and next steps identified by AOHS staff. These activities supported the programming implemented throughout the year and the planning process for upcoming projects.

FY 2024 Engagement Event Tracker	
Continue engagement events at sporting events. This is a great way to interact with target demographic males. These events can be in rural and urban locations to cover both impaired driving and pedestrian issues.	
Name and Location of Event:	Tuscaloosa Community Health Fair Event
Target Population Identification:	The event was scheduled based on the target population identification process outlined in the PP&E Plan submitted to NHTSA in the 3HSP. Tuscaloosa County specifically was identified as overrepresented in pedestrian fatalities and no belt fatalities and has several risk factors related to poverty and other resiliency score indicators. The event was held on the same day as the Spring scrimmage game at the University of Alabama, so it was a good opportunity to talk to a younger, more heavily male audience.
Attendees:	The event was open to the public. DCH Health System and other vendors had tables and stations set up throughout the plaza. Healthcare professionals, first responders, and auxiliary professionals were present. The attendees covered all demographics. There were men, women, infants, and senior citizens. The event was held in a plaza square downtown that was on the walking route to University of Alabama's sporting facilities. University of Alabama's a A-Day Spring football game was the same day, and it was a coincidence that was most likely the reason for the high turnout. While the event was held in the city of Tuscaloosa, the HSO staff was able to determine based of the online survey offered and verbal feedback given on the day, that people traveled from surrounding counties to attend the event and receive free health checks. Tuscaloosa County is considered urban and several census tracts in the area are identified as disadvantaged using the Climate and Economic Justice Screening Tool especially regarding health and transportation. The surrounding counties that were captured in our survey results were Greene, Hale and Bibb which are

	considered rural. Therefore, this event was able to reach our target population as it is necessary for many rural communities to travel to larger cities for healthcare services.
Accessibility Measures:	Publication of the event was posted on a variety of platforms, including print flyers and banners in physical locations. There were also social media posts on Facebook and Instagram as well as advertisements in local papers and various new outlets. All attendees spoke English, so there was no opportunity to provide Spanish materials. The online survey had a Spanish language option. The HSO staff member present was fluent in English and Spanish to ensure language access; however, her interpretation was not needed. The Government Plaza Park facilities follow all ADA guidelines
Event Description:	The DCH Health System and City of Tuscaloosa, AL hosts its annual Community Health Fair on April 13th from 10:00am-2:00pm. The DCH Health System's second annual community health fair brought a crowd of people to Government Plaza in downtown Tuscaloosa with free health assessments, educational opportunities, and time for those attending to talk to local doctors. Organizations had table booths to pass out information and advise the public on their services and resources. Many had freebies and promotional items as well as flyers to give out. DCH departments all had tables as well giving information about different units and human body systems. HSO staff requested a table to talk to attendees about National Distracted

	Driving Awareness month and administer a brief survey along with other traffic safety issues like Impaired Driving and Pedestrian Safety.
Feedback:	Feedback from providers at the event spoke about their interest in traffic safety as many of them and their team members regularly operated vehicles for work to provide health services in their community. Many were unfamiliar with the Hands-Free Law that had passed June 2023 and thank the HSO staff member for making them aware. They promised to share the information with their staff to increase their knowledge on traffic laws. Attendees of the event took a survey distributed by ADECA staff and stated that they were appreciative of the program and learned more about Bike/Ped, Impaired Driving, and Distracted Driving.
Connecting with Programming and Ongoing Engagement Efforts:	This event location was perfect for accessibility by the target community. The events surrounding or adjacent to sporting events or significant dates are a great way to reach the rural and underserved populations and communicate traffic safety messaging to the target demographics. The knowledge gap identified by the survey regarding distracted driving will be addressed by media campaign positioning and message components.

FY 2024 Engagement Event Tracker	
Engagement Step- Continue partnering with non-profits to reach targeted communities	
Name and Location of Event:	Montgomery Move Safe Event
Target Population Identification:	The event was scheduled based on the target population identification process outlined in the PP&E Plan submitted to NHTSA in the 3HSP. Specifically, the focus was on pedestrian safety in underserved communities. Montgomery County specifically was identified as overrepresented in pedestrian fatalities and no belt fatalities and has several risk factors related to poverty and other resiliency score indicators. Wares Ferry Road Elementary School is in an area with risk factors and its community is underserved. The initiatives started here at the school are connected to larger project with the Fifty Fund non-profit organization and the HSO hopes to see these ongoing safety efforts.
Attendees:	The event was held at an elementary school during the school day. Only 4th and 5th graders were allowed in the assembly. Community partners present at the event were representatives from Montgomery County Commission, Montgomery City Council, ALDOT, FHWA, Wares Ferry Road Elementary School community, and local residents.
Accessibility Measures:	The Wares Ferry Road Elementary School facilities follow all ADA guidelines.
Event Description:	The Fifty Fund hosted a safety event at Wares Ferry Road Elementary School in Montgomery, Alabama. The event launched the start of the "Move Safe Program" which focuses on pedestrian safety and child passenger safety. Prior to today's event, school leaders, parents, students, and volunteers came together to create educational videos that will be

	used to start similar programs at other schools around the state.
Feedback:	After watching the videos, the students were then encouraged to remember to speak up about safety to their parents. One teacher noted how at dismissal time, children would get in their cars, and the parents would drive off before buckling their seatbelts and ensuring that their children were buckled as well. This observation was one of the reasons road safety was chosen as the topic for this community educational program. ADECA staff were able to speak to the principal and other community leaders following the event. We discussed upcoming programs with the Highway Safety Office including the car seat voucher program. This event was great in finding community partners that are willing to learn more about traffic safety and develop projects or events to share traffic safety messaging.
Connecting with Programming and Ongoing Engagement Efforts:	Events like this showcase the additional need for Occupant Protection education, but it has also shown the need for pedestrian and bicycle safety efforts aimed at school-aged children. AOHS is adding a bike/ped education activity for FY 25 that will focus on training demonstrations.

FY 2024 Engagement Event Tracker	
Engagement Step- Continue partnering with non-profits to reach targeted communities	
Name and Location of Event:	Selma Pedestrian Safety Event
Target Population Identification:	The event was scheduled based on the target population identification process outlined in the PP&E Plan submitted to NHTSA in the 3HSP. Specifically, the focus was on pedestrian safety in rural populations. Dallas County specifically was identified as overrepresented in pedestrian fatalities and has several risk factors related to poverty and other resiliency score indicators.
Attendees:	Community partners present included representatives from Selma Housing Authority, City of Selma, Selma Police Department, ALDOT, FHWA, and local residents. The residents that attended were primarily parents and their children. The event time was around the school dismissal times which probably contributed to the attendance of school-aged children.
Accessibility Measures:	Publication of the event was posted on various social media platforms like Facebook, Instagram, and YouTube. All attendees spoke English, so there was no opportunity to provide Spanish materials. The Rangedale Community Center with the Selma Housing Authority facilities, where the tents, tables, and food truck were set up, follow all ADA guidelines.

Event Description:	A community walkaround on March 6th in Selma, Alabama was hosted to construct plans for a pedestrian improvement project (Rebuilding American Infrastructure with Sustainability and Equity (RAISE) discretionary grant program). The walk started at Rangedale Community center around 3:30PM on Marie Foster Street and ended at J.L Chestnut Blvd. At the community center, the organization set up tents and tables and hired a food truck, DJ, bounce house, and game bus to encourage community engagement. They used the occasion to provide residents with information about pedestrian safety. They passed out free t-shirts with their social media hashtag #stayinyourlane
Feedback:	Residents of the City of Selma gave personal accounts of their personal history with the specific neighborhood and the city itself. Feedback included challenges with walking on the sidewalk due to both environmental and infrastructure related issues. The takeaways from their input underscored the importance of multidisciplinary approaches to safety concerns.
Connecting with Programming and Ongoing Engagement Efforts:	Events like this showcase the need for pedestrian and bicycle safety efforts aimed at school-aged children, as well as community-based safety programming. Walk throughs also emphasize the need for continued engagement with community partners like Non-Profits, as well as state agencies like Public Health and the Department of Transportation.

FY 2024 Engagement Event Tracker	
Engagement Step- Continue partnering with non-profits to reach targeted communities. *Use paper surveys at events as well as Spanish language materials when appropriate to increase accessibility.*	
Name and Location of Event:	Family Guidance Center Community Classes (Bullock and Covington Counties)
Target Population Identification:	The event was scheduled based on the target population identification process outlined in the PP&E Plan submitted to NHTSA in the 3HSP. Bullock County and Covington County specifically have several risk factors related to poverty and other resiliency score indicators. Bullock County was also Top Ten County for crashes detailed in the Deep Data Dive done in FY 23.
Attendees:	In the events with the Family Guidance Center, 100% of the attendees were female, including the instructors. The HSO sought out this partnership with FGC because they service the underserved communities throughout the state and because their clients are more likely to transport children that require a car seat or booster seat. Their clientele and the selected classes tend to be predominantly female; males were not excluded from participation. The class attendees were all residents of the county where the classes were held. Also, the economic makeup of the attendees for community courses skewed heavily towards individuals facing poverty or other risk factors that increase a population's vulnerability.
Accessibility Measures:	The HSO staff member and the Family Guidance Center program coordinator communicated via email and contacted each of the class participants via email as well. All materials were available for in

	person and virtual participants. An email with the survey, the presentation, and the links to YouTube videos shown were emailed to each participant following the class. All attendees spoke English, so there was no opportunity to provide written Spanish materials. The online survey had a Spanish language option. The HSO staff member present was fluent in English and Spanish to ensure language access; however, her interpretation was not needed. The Alabama Cooperative Extension office facilities, where the classes were held, follow all ADA guidelines.
Event Description:	The instructors invited us to speak at the beginning of class, so that their lessons could continue uninterrupted. They suggested the HSO start the class with an informal meet and greet to explain our goals as the highway safety office and then provide the students with the opportunity to ask questions. FGC has been a resource for this population and provided the HSO with a space to present safety information and offer the survey to our target communities. The HSO followed the center's recommendation and completed the presentation within the allotted 10-minute window offered.
Feedback:	Attendees of the event took a survey distributed by ADECA staff and stated that they were appreciative of the presentation and felt confident in their knowledge of hot car safety.
Connecting with Programming and Ongoing Engagement Efforts:	This event location was perfect for accessibility by the target community. These events are a great way to reach the rural and underserved populations and communicate traffic safety messaging.

FY 2024 Engagement Event Tracker	
Engagement Step- Craft a targeted survey to administer to attendees at seat check events, especially those held in rural locations, that helps to identify resource or access issues that are faced by the participants, (how far did they have to travel, was cost a prohibitive factor in car seat safety, are there issues related to childcare, etc.)	
Name and Location of Event:	Tuskegee Child Passenger Safety Event
Target Population Identification:	The event was scheduled based on the target population identification process outlined in the PP&E Plan submitted to NHTSA in the 3HSP. Specifically, the focus was on child safety in rural populations. Macon County specifically was identified as overrepresented in no belt fatalities and has several risk factors related to poverty and other resiliency score indicators.
Attendees:	The attendees of the car seat check event were probably distributed 75%/25% female versus male. All attendees qualified for public assistance of some type and were eligible for free car seats. Ages ranged from early twenties to sixties, so there was a broad spectrum.
Accessibility Measures:	Publication of the event was posted on a variety of platforms, including print flyers and banners in physical locations. There were also social media posts on Facebook, X, and the Nextdoor app. All attendees spoke English, so there was no opportunity to provide Spanish materials. The Macon County Health Department facilities follow all ADA guidelines.
Event Description:	The Alabama Department of Public Health hosted a car seat check event on June 10th from 10 a.m. to 2:30 p.m. at the Macon County Health Department. Fittings were available by appointment, as well as for drive ups. There were around eight technicians who assisted the public with checking seats, as well as checking for eligibility for free seats under ADPH's current free car seat program. Technicians

	from both ADPH and NHTSA services over 20 cars and gave away 40 seats. The citizens who drove up were mostly a mix of multi child vehicles, and expectant mothers. ADECA staff were on site to engage with the public on traffic safety issue awareness and further programming needs.
Feedback:	Feedback from providers at the event spoke to obstacles in rural locations, especially where there is a high poverty rate. One of the biggest hurdles for certain families in Alabama is having a valid driver's license to receive a child car seat in accordance with the program eligibility rules. Costs for reinstatement of licenses can be prohibitive for community members. Attendees of the event took a survey distributed by ADECA staff and stated that child car seat laws are difficult to understand, but they were appreciative of the program and felt confident in their knowledge after attending.
Connecting with Programming and Ongoing Engagement Efforts:	This event location was perfect for accessibility by the target community. The need for car seats in the area shows further events and programming should be made available again in the upcoming FY 25.

FY 2024 Engagement Event Tracker	
Engagement Step- Continue engagement events at sporting events. This is a great way to interact with target demographic males. These events can be in rural and urban locations to cover both impaired driving and pedestrian issues. *Another upcoming issue is the effect of the recent legalization of medical marijuana. Questions were built into the initial input survey, and those responses will be mapped to best track knowledge levels and media platform preferences. This will allow the SHSO to determine a baseline to create educational campaigns on the dangers of driving while under the influence of marijuana.*	
Name and Location of Event:	Series of Football Tailgates in Pike, Calhoun, Shelby, Mobile, Tuscaloosa, Jefferson, and Lee counties.
Target Population Identification:	The event was scheduled based on the target population identification process outlined in the PP&E Plan submitted to NHTSA in the 3HSP. Macon County specifically was identified as overrepresented in no belt fatalities and has several risk factors related to poverty and other resiliency score indicators.
Attendees:	The attendees of the sporting events included a wide array of ages and groups. These attendees were local to the areas, with a few outliers.
Accessibility Measures:	All locations followed ADA guidelines.
Event Description:	Booths were set up by AOHS that promoted the driving safety campaign, Drive Sober or Get Pulled Over at football games. Fans were asked to take a survey regarding their driving habits and a pledge box for participants to take a pledge against drunk driving. The different activities offered aimed to promote safe driving and to get an understanding that driving while impaired is extremely dangerous. Fans were very appreciative that the AOHS was spreading awareness and were willing to share feedback and take a targeted survey.

Feedback:	Attendees of these events took a survey geared mostly toward risk taking behaviors, skewed heavily on impaired driving and medical marijuana law awareness. Out of the responses, we have seen a need for additional marijuana impairment education/ media efforts. There also is support for both additional law enforcement and education efforts to combat impaired driving.
Connecting with Programming and Ongoing Engagement Efforts:	Sporting events continue to appear to be a great way of engaging with the targeted demographics for many risk-taking behaviors. The varied locations allowed AOHS to interact with both rural and urban populations. These events will be a component for the coming years on ways to engage with the public and capture feedback, as well as delivering valuable safety messaging.

Occupant Protection Plan

Performance Measures in Occupant Protection Program Area

			Base Years (Historical Data)				
	PERFORMANCE PLAN CHART FY24 -26 Highway Safety Plan Updated for FY 25		**2019**	**2020**	**2021**	**2022**	**2023***
C-1	Traffic Fatalities	State	930	934	983	988	975
	Reduce the five-year average of 962 by .42% to 958 by 2026	Rolling Avg.	953	970	950	958	962
C-2	Serious Injuries in Traffic Crashes	State	5103	4782	5184	4836	4878
	Reduce the Number of Severe injuries in Traffic Crashes by 7.88% from 5381 to 4957 by 2026.	Rolling Avg.	7300	6505	5911	5381	4957
C-3	Fatalities/100M VMT	State	1.38	1.38	1.37	1.38	-
	Maintain fatality rate to at the current safety level of 1.34 by December 31, 2026.	Rolling Avg	1.36	1.38	1.34	1.35	-

	PERFORMANCE PLAN CHART FY24 -26 Highway Safety Plan		**2017**	**2018**	**2019**	**2020**	**2021**	**2022**
C-4	Unrestrained Passenger Vehicle Occupant Fatalities, All Seat Positions	State	398	354	352	384	354	370
	Maintain unrestrained passenger vehicle occupant fatalities, all seat positions at the current safety level of 363 by December 31, 2026.	Rolling Avg.	379	376	376	382	368	363
B-1	Observed Seat Belt Use for Passenger Vehicles, Front Seat	State Annual	92.9	91.8	92.3	92.3	91.3	92.7

			Base Years (Historical Data)					
	PERFORMANCE PLAN CHART FY24 -26 Highway Safety Plan Updated for FY 25		**2019**	**2020**		**2021**	**2022**	**2023***
	Outboard Occupants (State Survey) Increase observed seat belt use for passenger vehicles, front seat outboard occupants to 92.7 by December 31, 2026.	Rolling Avg.	94.2	93.1	92.5	92.3	92.1	92.1

Countermeasure Strategies in Occupant Protection Program Area

Countermeasure Strategy	Increase Child Restraint Usage Rate through a multifaceted Child Passenger Safety Program
Problem being addressed and description of the Link between problem and strategy	The average restraint use in years 2017-2021 in fatalities Age 4 and under was 65%. Improper application of devices can lead to increased injury or even death. This training project is a key component of the overall child restraint effort.
List of Countermeasure(s) and Justification	3.33 Inspection Stations (CTW 3 Stars) Communication and Outreach Program (UG #20)
Performance Target and Link between Strategy and Target	C-1) Number of traffic fatalities (FARS) C-2) Number of Serious Injuries C-3) Fatalities Per 100 Million Vehicle Miles Driven C-4) Unrestrained Passenger Vehicle Occupant Fatalities, All Seat Positions B-1) Observed Seat Belt Use for Passenger Vehicles, Front Seat Outboard Occupants The AOHS will fund the state's Child's Passenger Safety program, which will facilitate and maintain a network of fitting stations and events to cover most of the state, with an intentional focus on underserved communities. The program will also organize training and recertification classes for technicians. An additional component will be a voucher program designed to allow eligible citizens to qualify for a free car seat based on need, as well as hold awareness events on the dangers of unattended passengers. If children and parents are correctly educated and outfitted with proper safety equipment, it can affect significant reductions in crash severity related to restraint deficiency.
Estimated Funding Source	Section 402, Section 405(b)
Estimated 3-Year Funding	$1,950,000.00
Considerations to determine projects	Data analysis of Traffic Safety Data, Citation Information, Public Feedback, and Impacted Locations will assist with determining appropriate locations and target populations.
Adjustments to countermeasure strategy for programming funds	This is a continuing strategy from FY 2024. Programmatic performance supports continuing these initiatives at their current level.

Project Name: Child Passenger Safety Training Program

Project Number

2025-OP-M1-33

Primary Countermeasure Strategy ID

Increase Child Restraint Usage Rate through a multifaceted Child Passenger Safety Program

Intended Subrecipients

Alabama Department of Public Health – State Agency

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL 405b Supplemental	**High Training /Community CPS Services**	**$ 145,000.00**	**No**	**No**
BIL NHTSA 402	**High Training /Community CPS Services**	**$ 291,030.64**	**No**	**No**

Project Description

The Alabama Department of Public Health (ADPH) Child Passenger Safety (CPS) Program aims to educate Alabamians on safe use of child passenger restraint systems. The program provides training for individuals to become certified CPS technicians through a certification course, educating trainees on proper use and installation of car seats. ADPH will organize car seat fitting stations around the state where the public will be able to have car seats checked and installed by certified technicians. Information about car seat fitting stations and trainings, along with educational materials about safe use of car seats, will be available on the ADPH CPS program website.

The ADPH CPS Program will be staffed by a program coordinator (PC), a training coordinator (TC) housed at ADPH's Central Office, and four district coordinators (DC) – ADPH employees located in four of the six public health districts (PHD). The PC will be responsible for the overall operation of the project, including organizing CPS certification sessions, developing program materials, coordinating efforts with other agencies and PHDs, and maintaining the ADPH CPS website. The program will coordinate trainings and events within the state, to include offering continuing education units (CEUs) to certified technicians, expanding the availability of CEUs to nurses and social workers, and offering educational opportunities to schools throughout the state.

Currently, there are monthly seat check events scheduled in Montgomery, Birmingham, Tuscaloosa, and Huntsville. Training classes and additional seat check events will be posted online for accessibility, and locations that showed an interest in training via the public input survey will be given first consideration. It is the intent of this project to ensure rural communities benefit from its activities, as well as other underserved populations as identified by data.

Project Name: Heatstroke Prevention Public Education Program

Project Number

2025-FP-PI-32

Primary Countermeasure Strategy ID

Increase Child Restraint Usage Rate through a multifaceted Child Passenger Safety Program

Intended Subrecipients

The Children's Hospital of Alabama

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402	**Heatstroke/Unattended passenger education**	**$ 204,687.48**	**No**	**No**

Project Description

Pediatric vehicular deaths due to heatstroke are a leading cause of motor vehicle-related deaths for children across the United States. Children's of Alabama, through its Health Education and Safety Center, will work to educate parents, caregivers and the public about the dangers of leaving children in hot vehicles and how to avoid pediatric vehicle-related heatstroke. The Vehicle-Related Heatstroke Prevention Project will amplify these efforts by providing parents and caregivers with education and resources for avoiding vehicle-related heatstroke in children and conducting a public awareness campaign to reach the general public. Although some activities will take place in urban areas, the program will Several training events that have been confirmed at this time will take place at Children's campus in Birmingham. Other event locales have not been confirmed at this time, but will plan to target rural and minority populations, and will have increased activity in the spring and summer months.

The Children's of Alabama mission states that "... Children's will be an advocate for all children and work to educate the public about issues affecting children's health and well-being," and the Vehicle-Related Heatstroke Prevention Project will further this commitment to the health and safety of Alabama children.

Project Name: Child Passenger Seat Voucher Program

Project Number

2025-OP-M1-34

Primary Countermeasure Strategy ID

Increase Child Restraint Usage Rate through a multifaceted Child Passenger Safety Program

Intended Subrecipients

Alabama Department of Public Health- State Agency

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL 405b	**High CSS Purchase/ Distribution**	**$ 399,550.00**	**No**	**No**

Description

ADPH will implement the car seat voucher program to provide education to individuals who receive a traffic citation for failing to properly restrain a child in a child passenger restraint. The program will also provide seats to individuals who are unable to purchase a proper child passenger restraint for their child. A car seat check involves a CPST inspecting both the vehicle and car seat and sizing the car seat to the child's height and weight before installing the car seat in the vehicle. During the installation, the technician teaches parents and caregivers to properly install their child's car seat. However, there is a need to provide education to people who may not seek CPS resources independently, particularly individuals who have been identified as incorrectly installing their child safety restraint or failing to use the appropriate CPS restraint in accordance with Alabama law. From January 2019, through May 2023, 19,750 citations were issued in Alabama for failure to use a child restraint or improper use of a child restraint (Alabama Department of Economic and Community Affairs, 2023).

ADPH has the resources to create informational brochures and posters that can be mass-produced for distribution at car seat check events and fitting stations. Additionally, educational materials produced by the ADPH Health Media and Communications Division (Health Media) can be posted on the ADPH CPS website for the public to view, download, and request copies. Health Media also has the capability to publish educational materials on all ADPH social media pages (Facebook, Instagram, Twitter, etc.), allowing the program to reach a much wider audience.

The second year of funding will see the deployment of the grant in the initial pilot counties of Montgomery, Calhoun, and St. Clair. These locations were selected using data and demographic information, compiled with staff availability.

Child Passenger Safety Technicians

Child Restraint Deficiencies (CRD) are near the bottom of an analysis of top fatality causes in Alabama. This reflects the extreme efforts that have gone into child protection by several agencies throughout the state. Special emphasis is given to children, who are quite vulnerable if not properly restrained, and the importance of maintaining all child restraint programs is clear. One of the most effective ways of reducing fatalities is to increase restraint use, and this example will be used to further illustrate the problem identification process that is applied to all potential countermeasures. Inspection events can positively change parents' and caregivers' attitude towards installing child restraints correctly by improving their knowledge.
AOHS will fund the state's Child's Passenger Safety program, which will facilitate and maintain a network of fitting stations and events to cover a majority of the state. The program will also organize training and recertification classes for technicians.

A general outline of this program follows:

- Recruit enough potential technicians throughout the state in order to address areas identified as needed fitting stations or knowledgeable staff available for assistance;
- Training of “first time” technicians;
- Recertification of previously trained technicians;
- Inspection stations will continue to be made available to the public;
- Technicians ensuring that child passenger restraints are installed correctly, and caregivers know how to install them correctly;
- Outreach to underserved communities providing technicians for additional trained CPS professionals in all communities.

The goal for the CPS program is to develop trained CPS professionals in as many communities over the state as possible. The ultimate vision is to create statewide community inspection stations where parents and other caregivers can obtain proper education about restraining their children for safety, while at the same time providing a supporting public information and education program that informs and motivates the public in proper child restraint use.

Table 1 below shows the location of the anticipated classes for FY 2024 as well as an estimation of the number of attendees that will be funded through this program. At the specific locations will be dependent upon who ADPH partners with and where demand is the highest. Each training will have a seat check event that will be held with a community partner. Examples of community partners we might use are stores, physician's offices, libraries, police stations, fire departments, hospitals, YMCAs, or schools. Alabama also plans to host event with neighboring states at rest areas and/or other locations. The program is also looking to expand with nontraditional partnerships like tribal communities or nonprofit organizations who could utilize CPS materials or access to trained technicians, especially as identified in the state's PP&E data analysis and community identification.

Table 1. Class Location and Attendee Estimate

Class Location	Estimated Number of Students
Northeastern District (1)	**10**
East Central (3)	**30**
Southwestern (1)	**10**
Southeastern (2)	**20**
Mobile County (2)	**20**
North District (2)	**10**
West Central (1)	**10**
Estimated Number of Trainings- 12	**110**

Inspection Stations

ADPH plans to maintain current inspection stations, as well as establish at least one sanctioned station in every public health district. All these inspections stations will be staffed with nationally certified CPS technicians during posted working hours. Some of the inspection stations will work on an appointment only basis. Table 3 illustrates the proportion of Alabama's population that is covered by inspection stations. The table demonstrates 43% of the population of Alabama is covered by the permanent fitting stations. The list below identifies the location of inspection stations and/or inspection events as well as the populations they serve.

The table also affirms that each station and/or event will be staffed by a certified technician. As a requirement of the program, each Public Health Department is required to conduct a seat check event each month.

Table 2. Proportion of Alabama's Population Covered by Inspection Stations

Location	Population served	Total Population %
Baldwin County Health Department and Orange Beach Fire Department	253,507	**4.9%**
Calhoun County Health Department	116,429	**2.27%**
Children's Hospital Birmingham- Jefferson County and Shelby County	662,895	**12.9%**
Clarke County Health Department	22,337	**.43%**
Etowah County Health Department	103,241	**2.02%**
Huntsville Hospital, Huntsville Pediatrics	412,600	**8.07%**
Lee County Sheriff's Office	183,215	**3.58%**
Montgomery Area -Montgomery County	195,287	**3.82%**
Safe Harbor Women's Medical Clinic – Dallas County	36,165	**.70%**
St. Clair County Health Department	95,552	**1.87%**
Sylacauga Fire Department – Talladega County	81, 132	**1.58%**
Tuscaloosa Safe Kids and Fire Department	238,373	**4.64%**
Troy Fire and Police Department, Pike County	33,137	**.64%**
USA Children's & Women's Hospital – Mobile, AL	411,640	**8.05%**
Washington County Health Department	15,022	**.29%**
Total	**2,859,532**	**55%**

Table 3. Station and/or Events and Population Served

Station/Events	Rural	Urban	At-Risk	Certified Tech Present
Baldwin County Health Department	Rural			**YES**
Calhoun County Health Department	Rural			**YES**
Children's Hospital Birmingham		Urban	Low Income, Minority	**YES**
Clarke County Health Department	Rural		Low Income, Minority	**YES**
Etowah County Health Department		Urban		**YES**
Huntsville Hospital, Huntsville Police Department & Huntsville Pediatrics		Urban		**YES**
Montgomery SAFE Kids & Baptist East		Urban	Minority	**YES**
Safe Harbor Women's Medical Clinic	Rural		Low Income, Minority	**YES**
St. Clair County Health Department	Rural			**YES**
Troy Fire & Police Department	Rural			**YES**
Tuscaloosa SAFE Kids		Urban		**YES**
Washington County Health Department	Rural		Low Income, Minority	**YES**

Countermeasure Strategy	Decrease unrestrained fatalities and serious injuries
Problem being addressed and description of the Link between problem and strategy	The five-year average (2018-2022) of unrestrained fatalities in the state is 363, which is 37% of the five-year average of total fatalities. Enforcement and education efforts are proven to be effective influences on motorists to wear seat belts.
List of Countermeasure(s) and Justification	3-15 Short Term, High Visibility Seat Belt Law Enforcement (CTW 5 Stars) Observational Survey (UC #20.)
Performance Target and Link between Strategy and Target	C-1) Number of traffic fatalities (FARS) C-2) Number of Serious Injuries C-3) Fatalities Per 100 Million Vehicle Miles Driven C-4) Unrestrained Passenger Vehicle Occupant Fatalities, All Seat Positions B-1) Observed Seat Belt Use for Passenger Vehicles, Front Seat Outboard Occupants It is projected Short-Term, High Visibility Seat Belt Enforcement projects in each of the Alabama CTSP/LEL and State Trooper Regions conducted during the national "Click It or Ticket" campaign, along with a multi-platform paid media campaign, will achieve the following: •Reduce of the number and severity of the hotspots found over time. •Increase of the number of citations by citation type issued over time. •Increase the seat belt usage rate among the various regions.
Estimated Funding Source	Section 402, Section 405(b)
Estimated 3-Year Funding	$2,490,000.00
Considerations to determine projects	Analysis of Traffic Safety Data, Citation Information, and Impacted Locations will assist with determining appropriate project locations and potential local partners.
Uniform Guideline/ NHTSA Assessment Recommendations and Description	Based on Uniform Guidelines for State Highway Safety Programs No 20., AOHS is implementing a combination of countermeasures that work together to provide a strong impact to the state through enforcement activities tied with a communications campaign. An observational survey is a strong component for analysis and program management and should be done annually.
Adjustments to countermeasure strategy for programming funds	No changes have been made to the funding structure for this countermeasure outside of slightly increasing the award amounts planned for the observational survey and

	media campaigns. The increases will cover for rising personnel costs and production elements. High Visibility Enforcement paired with a media component for the Click It or Ticket Campaign continues to be an effective way of addressing the problem of seat belt deficient fatalities and serious injuries in Alabama. We are required to conduct an observational study, and have made no substantive changes to that project.

Project Name: Click It or Ticket High Visibility Enforcement Campaign

Project Number

2025- FP-OP-11

Primary Countermeasure Strategy ID

High Visibility Enforcement

Intended Subrecipients

Franklin County Commission- Unit of Local Government

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402	**Safety Belts**	**$ 100,000.00**	**No**	**No**

Project Description

The North Central region will conduct a High Visibility Enforcement program for a two-week period to coincide with the national Click It or Ticket campaign. The enforcement program will consist of members from the Municipal Law Enforcement Agencies and Sheriff's Offices in the following counties: Colbert, Cullman, De Kalb, Fayette, Franklin, Jackson, Lamar, Lauderdale, Lawrence, Limestone, Madison, Marion, Marshall, Morgan, Walker, Winston, Blount, Calhoun, Cherokee, Cleburne, Coosa, Elmore, Etowah, Jefferson, Shelby, St. Clair, and Talladega

Project Name: Click It or Ticket High Visibility Enforcement Campaign

Project Number
2025-FP-OP-8
Primary Countermeasure Strategy ID
Short-term, High Visibility Seat Belt Law Enforcement

Intended Subrecipients
Mobile County Commission- Unit of Local Government

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402	**Safety Belts**	**$ 56,316.00**	**No**	**No**

Project Description

The North Central region will conduct a High Visibility Enforcement program for a two-week period to coincide with the national Click It or Ticket campaign. The enforcement program will consist of members from the Municipal Law Enforcement Agencies and Sheriff's Offices in the following counties: Baldwin, Bibb, Chilton, Choctaw, Conecuh, Clark, Dallas, Escambia, Greene, Hale, Marengo, Mobile, Monroe, Perry, Pickens, Sumter, Tuscaloosa, Washington and Wilcox.

Project Name: Click It or Ticket High Visibility Enforcement Campaign

Project Number

2025-FP-OP-15

Primary Countermeasure Strategy ID

Short-term, High VisibilitySeat Belt Law Enforcement

Intended Subrecipients

Enterprise State Community College- Post Secondary Education

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402	**Safety Belts**	**$ 43,684.00**	**No**	**No**

Project Description

The North Central region will conduct a High Visibility Enforcement program for a two-week period to coincide with the national Click It or Ticket campaign. The enforcement program will consist of members from the Municipal Law Enforcement Agencies and Sheriff's Offices in the following counties: Autauga, Barbour, Bullock, Butler, Chambers, Clay, Coffee, Covington, Crenshaw, Dale, Geneva, Henry, Houston, Lee, Lowndes, Macon, Montgomery, Pike, Randolph, Russell and Tallapoosa.

Project Name: Click It or Ticket Observational Survey

Project Number
2025-OP-IS-9
Primary Countermeasure Strategy ID
Short-term, High VisibilitySeat Belt Law Enforcement

Intended Subrecipients
University of Alabama

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402	**Safety Belts**	**$ 254,226.00**	**No**	**No**

Project Description

The University of Alabama Center for Advanced Public Safety (UA-CAPS) will conduct pre and post surveys for seat belt programs and evaluate several types of survey data regarding seat belt and child restraint usage rates as part of the CIOT campaign. The observation surveys will be conducted at a total of 350 assigned sites in 40 Alabama counties: Jefferson, Mobile, Madison, Tuscaloosa, Baldwin, Montgomery, Marshall, Lee, Walker, Calhoun, Shelby, Elmore, Cullman, Talladega, Limestone, St. Clair, Russell, Etowah, Morgan, Jackson, Houston, Lauderdale, Lawrence, Escambia, Blount, Chilton, Dallas, Pike, Autauga, Dekalb, Dale, Coffee, Monroe, Chambers, Tallapoosa, Franklin, Winston, Colbert, Conecuh, and Covington.

Project Name: Click It or Ticket Paid Media Campaign

Project Number

2025-OP-PM-19

Primary Countermeasure Strategy ID

Short-term, High VisibilitySeat Belt Law Enforcement

Intended Subrecipients

Auburn University- University

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
FAST 405b	**High HVE**	**$ 16,797.14**	**No**	**Yes**
BIL 405b*	**High HVE**	**$ 356,659.76**	**No**	**No**

* FAST Act funds will be spent before BIL funds.

Project Description

Auburn University's Media Production Group (MPG), in concert with the Law Enforcement and Traffic Safety Division of ADECA (LETS), will produce and conduct a media campaign to inform and educate Alabama citizens on the benefits of seatbelt use. Information gathered from data and public input will inform the type of spot produced, and the way it is deployed. Currently the plan is to target males ages 24-65 throughout the state through online outlets like YouTube, Facebook, and Bleacher Report. Outcomes from the Click It or Ticket Observational Survey show that males pickup truck drivers show the lowest amount of seat belt usage (87.8% and 85.5%, respectively). Digital streaming services such as Pandora and Spotify, along with electronic billboards and movie theater ads will also be used. Digital screens at various restaurants and movie theater ads will also be utilized. Priority locations of media deployment will be major metropolitan networks in Huntsville, Montgomery, Birmingham, and Mobile. Counties where observed seat belt usage rate is lower will also be a focus, such as Cherokee and Lawrence.

ALABAMA - Planned Participation in Click-it-or-Ticket Mobilization

Alabama continues to steadily focus on its seat belt and child restraint use rates after experiencing a major improvement upon passing its Primary Seat Belt Law in 1999. As part of the cooperative process with NHTSA, an Evidence-Based Enforcement (E-BE) project called "Click It or Ticket" (CIOT) is run on an annual basis in April, May, and June of each year (see schedule below). As part of the nationwide initiative coordinated by NHTSA to increase seat belt usage, the State will conduct an aggressive "Click It or Ticket" (CIOT) campaign.

In addition to and complementary with a paid media campaign, a statewide CIOT High Visibility Enforcement campaign will be conducted for a two-week period. The enforcement program will involve members from the Municipal Law Enforcement Agencies, County Sheriffs, and State Highway Patrol (Alabama Law Enforcement Agency). Further upkeep of the CIOT effort will be supported by conducting surveys, performing analyses, and verifying certification. As part of this effort:

- The University of Alabama Center for Advanced Public Safety (UA-CAPS) will conduct pre and post surveys for seat belt programs and evaluate several types of survey data regarding seat belt and child restraint usage rates as part of the CIOT campaign.
- The program will consist of waves of surveys, enforcement, and media blitzes, carefully scheduled to maximize public understanding of restraint use.
- UA-CAPS' role will be to: (1) receive and scientifically analyze data obtained (2) collect reports on the other components of the project (3) obtain signed certification page and (4) produce a comprehensive final report covering all aspects of the campaign.
- The evidence-based enforcement part of the CIOT program will involve multiple agencies and organizations that will participate under the leadership of AOHS.
- Waves of public education and enforcement will be conducted, working toward the single goal of increasing proper restraint use for both children and adults to improve highway safety.

Dates and Activities

- Weeks 1-2: (Apr 21-May 4) Statewide Observational Survey (Baseline),
- Weeks 3-8: (May 5-June 12) Earned Media for CIOT
- Weeks 4-6: (May 12-June 1) Paid media for CIOT
- Weeks 5-6: (May 19-Jun 1) Enforcement for CIOT
- Weeks 7-8: (Jun 2-12) Statewide Observational Survey, Telephone Survey (All Post Survey)

Agencies planning to participate in CIOT:

ABBEVILLE POLICE DEPT	BALDWIN CO SHERIFFS DEPT	COFFEEVILLE POLICE DEPT	ELBERTA POLICE DEPT	GEORGIANA POLICE DEPT	HEFLIN POLICE DEPT	LAKE VIEW POLICE DEPT	MONTGOMERY CO SHERIFFS DEPT
Alabama Law Enforcement Agency	BAYOU LA BATRE POLICE DEPT	COLUMBIAN A POLICE DEPT	ENTERPRISE POLICE DEPT	GLENCOE POLICE DEPT	HENRY CO SHERIFFS DEPT	LINDEN POLICE DEPT	MONTGOMERY PD
ALEXANDER CITY POLICE	BESSEMER POLICE DEPT	COVINGTON CO SHERIFFS DEPT	ESCAMBIA CO SHERIFFS DEPT	GREENE CO SHERIFFS DEPT	HILLSBORO POLICE DEPT	LITTLEVILLE POLICE DEPT	MORGAN COUNTY SHERIFF OFFICE
ANDALUSIA POLICE DEPT	BIRMINGHAM POLICE DEPT	CRENSHAW CO SHERIFFS DEPT	EXCEL POLICE DEPT	GROVE HILL POLICE DEPT	HOUSTON CO SHERIFFS DEPT	LUVERNE POLICE DEPT	MOULTON POLICE DEPT
ARDMORE POLICE DEPT	CALERA POLICE DEPT	CULLMAN POLICE DEPT	FALKVILLE POLICE DEPT	GUIN POLICE DEPT	HUEYTOWN POLICE DEPT	MACON CO SHERIFFS DEPT	MUSCLE SHOALS POLICE DEPT
ASHFORD POLICE DEPT	CAMDEN POLICE DEPT	DALEVILLE POLICE DEPT	FLOMATON POLICE DEPT	GURLEY POLICE DEPT	HUNTSVILLE POLICE DEPT	MADISON CO SHERIFFS DEPT	NORTHPORT POLICE DEPT
ASHLAND POLICE DEPT	CENTREVILLE POLICE DEPT	DECATUR POLICE DEPT	FLORALA POLICE DEPT	HALEYVILLE POLICE DEPT	JACKSON CO SHERIFFS DEPT	MOBILE CO SHERIFFS DEPT	OPP POLICE DEPT
ASHVILLE POLICE DEPT	CHICKASAW POLICE DEPT	DEMOPOLIS PD	FLORENCE POLICE DEPT	HAMILTON POLICE DEPT	JACKSON POLICE DEPT	MOBILE PD	OZARK POLICE DEPT
ATHENS POLICE DEPT	CHILTON CO SHERIFFS DEPT	DOTHAN POLICE DEPT	FOLEY POLICE DEPT	HARTFORD POLICE DEPT	JEMISON POLICE DEPT	MONROE CO SHERIFFS DEPT	PRATTVILLE POLICE DEPT E911
AUTAUGA CO SHERIFFS OFFICE	COFFEE CO SHERIFFS DEPT	ELBA POLICE DEPT	GENEVA POLICE DEPT	HEADLAND POLICE DEPT	KILLEN POLICE DEPT	MONTEVALLO POLICE DEPT	RAINBOW CITY POLICE DEPT
ST FLORIAN POLICE DEPT	TARRANT POLICE DEPT	THOMASVILL E POLICE DEPT	TOWN CREEK POLICE DEPT	TRINITY POLICE DEPT	TROY POLICE DEPT	TUSCALOOSA CO SHERIFFS DEPT	WALKER CO SHERIFFS DEPT
REPTON POLICE DEPT	ROGERSVILLE POLICE DEPT	RUSSELL CO SHERIFFS DEPT	RUSSELLVILLE POLICE DEPT	SARALAND POLICE DEPT	SECTION POLICE DEPT	SLOCOMB POLICE DEPT	SPRINGVILLE POLICE DEPT

Media Plan for CIOT

The "Click it or Ticket" statewide multimedia campaign will be aimed at increasing seat belt usage on Alabama's highways in the most effective ways. The campaign will incorporate advertising, bonus spots, website links, and support of government agencies, local coalitions and school officials in an effort that will impact restraint usage.

The campaign will consist of:

- Development of the "Click It or Ticket" marketing approach based on Nielsen and Arbitron ratings and targeted primarily towards the identified focus group
- Placement of paid "Click It or Ticket" ads on broadcast television, cable television, and radio in addition to public service spots. Paid advertising will be placed primarily in the five largest media markets.
- Management of public relations efforts including press releases and special media events to stimulate media coverage and alert the public to the "Click It or Ticket" campaign.
- In addition to the paid and free media, the Office of Highway Safety website will have updated information including ads, articles and other information pertaining to the seat belt campaigns.
- Each CTSP/LEL Coordinator will be responsible for generating sustained earned media in their area of the state throughout the year. The CTSP/LEL Coordinators are also responsible for developing press releases and conducting press events that are specifically targeted to their regions.

The CIOT Media Campaign will include placement of approved, paid CIOT programming on broadcast and cable TV, and radio spots during the appropriate time frame, and negotiations will be conducted to maximize the earned (free) media as well. These media efforts, including commercials, will supplement law enforcement agencies statewide as they conduct a zero-tolerance enforcement of seat belt laws. Further, electronic billboards, digital music streaming websites and other platforms will be employed to reach the target audiences aimed at yielding increases in seat belt and child restraint use. The following summarizes the anticipated paid media campaign that will be performed:

- Broadcast Television -The broadcast television buys will focus on programming in prime times: early morning (M-F, 7A-9A) and evenings (M-F, 5P-Midnight). Selected weekend day parts, especially sporting events, will also be approved if the media programming would appeal to the target group.
- Cable Television- The large number of cable networks in Alabama can be effective in building frequency for the male 18-34 target market. The buys will focus on the following day parts: early morning (M-F, 7A-9A) and evenings (M-F, 5P-Midnight) with selected weekend day parts, especially sporting events. Paid scheduling will be placed

for networks that cater to audiences in our target, such as CNBC, ESPN, Fox News and Fox Sports, CNN, etc. Radio The campaign will target that same key at-risk group, 18–34-year-olds, particularly males. The buy will focus on the following day parts: morning drive (M-F, 7A- 9A), midday (M-F, 11A-1P), afternoon (M-F, 4P-7P), evenings (M-F, 7P-Midnight). Selected weekend day parts will be considered as well.

- Out of Home- Electronic billboards will be leased in major markets where space is available. Several designs will be tagged for Alabama's use to correspond to and reinforce the video commercial. Lamar, Link and Beam electronic billboards were designed and placed in the twenty-six (26) major media market sites providing coverage in Birmingham, Mobile, Montgomery/Wetumpka, Huntsville, and Auburn/Opelika. Digital Media:
- Digital media is a rapidly evolving platform in media consumption. For the CIOT campaign, ads will be placed in a variety of digital sites such as Facebook, YouTube, and Bleacher Report; ads are also planned for placement on streaming services such as Pandora and Spotify.

CIOT Evaluation

This project will be conducted using methods and procedures approved by NHTSA. The Alabama Observational Survey Plan for Occupant Restraint Use is now based on fatality rates rather than population as was done previously. The Alabama Transportation Institute (ATI) at The University of Alabama will manage the process for the observational surveys, phone survey evaluation of the media campaign, and be involved in evaluation and report generation portions of the project. The Uniform Criteria 1340.12 requires states to re-select their observation sites no less than once every five years. ATI will also be responsible for completing the observational site reselection process for the sites to be used in 2023.

Coordination between the involved agencies and consultants participating in the project will be the responsibility of ATI. While data observation, collection, and processing will be in accordance with NHTSA-approved techniques, there are still many operational decisions that will require ATI involvement under the oversight of AOHS. ATI will:

- stay in close contact during the design of data collection forms and procedures,
- help ensure timely and accurate data collection, and
- help ensure that data are received, and preliminary analyses are performed in a timely manner.

Basic phone and observational surveys will be used to gather data for the in-depth evaluation. The target will be the measurement of shoulder belt use by drivers and front seat outboard passengers in passenger motor vehicles. There will be two surveys, one pre and one post of the media and enforcement components of the campaign. There will also be a separate observational survey of child restraint usage. The phone surveys will be conducted throughout the state. The observation surveys will be conducted at a total of 350 assigned sites in 40 Alabama counties: Jefferson, Mobile, Madison, Tuscaloosa, Baldwin, Montgomery, Marshall, Lee, Walker, Calhoun, Shelby, Elmore, Cullman, Talladega, Limestone, St. Clair, Russell, Etowah, Morgan, Jackson, Houston, Lauderdale, Lawrence, Escambia, Blount, Chilton, Dallas, Pike, Autauga, Dekalb, Dale, Coffee, Monroe, Chambers, Tallapoosa, Franklin, Winston, Colbert, Conecuh, and Covington.

List of Tasks for Participants & Organizations

ATI at The University of Alabama will:

- Contract a highly qualified vendor to conduct the three observational surveys
- Assign observation locations and dates to the Surveyors
- Work with the survey vendor on any issues that arise from any of the observational sites
- Collect and process the raw data produced by the Surveyors including evaluating, analyzing, and computing the seat belt usage rate.
- Contract with an experienced company to conduct the telephone surveys
- Collect results from all the various involved parties for their activities, and
- Compile the project report for "Click It or Ticket" 2024.

A highly qualified company will be contracted by ATI to perform the observational surveys. Their tasks will involve:

- Employ and train the observational surveyor team
- Program tablets for the data collection with all required data fields
- Develop the surveyor routes in an efficient manner for each surveyor
- Conduct the three observational surveys described within this document
- Proof, tabulate and compile the data from each of the surveys in a timely manner
- Transfer the data to ATI for evaluating, analyzing, and computing the seat belt usage rate.

A highly qualified company will be contracted by ATI to perform the phone survey to evaluate the media effectiveness of the "Click It or Ticket" program. Their tasks will involve:

- Design and prepare the telephone questionnaire instrument (with guidance from LETS and ATI).
- Conduct a post survey;
- Encode and analyze the data, and
- Deliver the data and a preliminary analysis of the data to ATI in a timely manner.

The Auburn University Media Group will:

- Implement the media portion of the campaign;
- Contract with another professional group to produce and/or place ads if that is found to be most expedient;
- Determine where and when the ads are run; this will include the avenues of TV, cable, radio, internet, and electronic billboards;
- Submit reports to ADECA/LETS; and
- Submit reports to ATI for inclusion in the overall final report for the project.

ADECA/LETS will:

- Provide funding for the project,
- Serve as the host agency for the effort, providing guidance as needed,
- Coordinate the enforcement campaign and provide summary reports to ATI for inclusion in final report,
- Assist ATI, if needed, in obtaining data from Surveyor observations, consultant phone polls, and consultant questionnaires.

To summarize, restraint use will be evaluated in two primary ways: (1) by direct observation of vehicles, based upon a carefully designed sampling technique, and (2) through a telephone survey. Before and after seat belt usage rates will be recorded by direct observation, and afterwards this data will be analyzed, and rates will be calculated from these observations. The self-reported usage rate will be obtained through the telephone surveys. A final report will be produced by ATI that will describe the results of the current year evaluation efforts and summarize past year's evaluation efforts to hopefully show continual improvements being made by participating in the campaigns.

Countermeasure Strategy	Decrease Seat Belt Fatalities
Problem being addressed and description of the Link between problem and strategy	Alabama's five- year average of An assessment can identify trends and potential best practices and programs to implement in the future.
List of Countermeasure(s) and Justification	NHTSA Facilitated Occupant Protection Assessment
Performance Target and Link between Strategy and Target	C-1) Number of traffic fatalities (FARS) C-2) Number of Serious Injuries C-3) Fatalities Per 100 Million Vehicle Miles Driven
Estimated Funding Source	Section 402
Estimated 3-Year Funding	$55,000.00
Considerations to determine projects	Traffic Safety data, Crash Location Data
Uniform Guideline/ NHTSA Assessment Recommendations and Description	*"Uniform Guidelines for State Highway Safety Programs"* encourages states to evaluate programs for effective program management and to identify potential improvements. "Each State should have centralized program planning, implementation, and coordination to achieve and sustain high rates of seat belt use. Evaluation should be used to revise existing programs, develop new programs and determine progress and success. The State Highway Safety Office (SHSO) should: • Provide leadership, training and technical assistance to other State agencies and local occupant protection programs and projects; • Establish and convene an occupant protection advisory task force or coalition to organize and generate broad-based support for programs. The coalition should include agencies and organizations that are representative of the State's demographic composition and critical to the implementation of occupant protection initiatives; • Integrate occupant protection programs into community/corridor traffic safety and other injury prevention programs; and

	• Evaluate the effectiveness of the State's occupant protection program" It is the Alabama SHSO opinion that an assessment facilitated by NHTSA would help identify best practices and strategies to decrease restraint deficient fatalities.
Adjustments to countermeasure strategy for programming funds	This is a new countermeasure added for FY2025 to address the number of restraint deficient fatalities and serious injuries.

Program Area: Traffic Records

Performance Measures for Traffic Records- Quantitative improvement

A written description of the performance measure(s) that clearly identifies which performance attribute for which core database the State is relying on to demonstrate progress, using the methodology set forth in the "Model Performance Measures for State Traffic Records Systems" (DOT HS 811 441), as updated.

System to be Impacted	**__X__CRASH ___DRIVER ____VEHICLE ____ROADWAY ____CITATION/ADJUDICATION ____EMS/INJURY OTHER specify:**
Performance Area(s) to be Impacted	**__X__ACCURACY ____TIMELINESS ____COMPLETENESS ____ACCESSIBILITY ____UNIFORMITY ____INTEGRATION OTHER specify:**
Performance Measure used to track Improvement(s)	**Narrative Description of the Measure** The "Unknown Crash Severity Value" variable in the **crash database** was studied. This variable pertains to the severity of the crash. A comparison was made in the two study periods of the number of "Unknown" values in the records. A decrease in the percentage of Unknown responses is an increase in data accuracy.
Relevant Project(s) in the State's Strategic Plan	**Title, number and strategic Plan page reference for each Traffic Records System improvement project to which this performance measure relates** Crash Component, Item 4.3.2.3 eCrash, Page 25, TSIS Strategic Plan 2025-2029, May 28, 2024.
Improvement(s) Achieved or Anticipated	**Narrative of the Improvement(s)** During the April 1, 2022 – March 31, 2023 study period, the percentage of "Unknown" values in the "Crash Severity" variable in the **crash database** was 2.33%. During the April 1, 2023 – March 31, 2024 study period, the percentage of "Unknown" values in the "Crash Severity" variable decreased to 2.09%. This is a 0.24% decrease in "Unknown" values per record which equates to a relative proportional improvement of 10.4% (0.24/2.33) in **data accuracy** between the two study periods for this variable in the **crash database**.
Specification of how the Measure is calculated / estimated	**Narrative Description of Calculation / Estimation Method** The percentage of "Unknown" values in the "Crash Severity" variable was compared during the two study time periods. Using the percentage of values takes into account the number of records as opposed to comparing the raw frequency. Then, simply divide the difference by the percentage in the earlier timeframe to calculate the percent decrease in records with "Unknown" values which equates to an increase in data accuracy. (See attached detailed data.)
Date and Baseline Value for the Measure	April 1, 2022 through March 31, 2023 (see attached detailed data) **Value** — **Frequency** — **Percentage** Unknown value — 3375 — 2.33% Total Crash Records — 144857 — 100%
Date and Current Value for the Measure	April 1, 2023 through March 31, 2024 (see attached detailed data) **Value** — **Frequency** — **Percentage** Unknown value — 2955 — 2.09% Total Crash Records — 141582 — 100%

Countermeasure Strategies in Traffic Records Program Area

Countermeasure Strategy	Increase Accessibility of Crash and EMS Database
Problem being addressed and description of the Link between problem and strategy	Improving accessibility of the crash data to all users (including law enforcement, traffic safety professionals and even the general public) and the Emergency Medical Service data to qualified users is of utmost importance because of the usefulness of the information the portal dashboards produce and the impact it can have on planning, both strategic long-term planning and day-to- day planning. This countermeasure will greatly complement other similar data attribute improvement countermeasures that will be targeted in these traffic records projects. All the countermeasures relate to improvements in some aspect of the data.
List of Countermeasure(s) and Justification	Improves accessibility of a core highway safety database (UG #10)
Performance Target and Link between Strategy and Target	Upgrade CARE dashboard user interface will result in significant recognized improvements in making it easier for users to get available information from the available datasets. Results of user survey of stakeholders will measure level of success. See performance measure chart for project reference, baseline, and target.
Estimated Funding Source	Section 405(c)
Estimated 3-Year Funding	$2,500,000.00 (split among other TR countermeasures)
Considerations to determine projects	Traffic Safety Data, Traffic Records Coordinating Committee Input, Latest Recommendations from Traffic Records Assessment
Uniform Guideline/ NHTSA Assessment Recommendations and Description	As stated in "Uniform Guidelines for State Highway Safety Programs", "A State's traffic records information should be maintained in a form that is of high quality and readily accessible to users throughout the State. "Additionally, the NHTSA Traffic Records Program Assessment Advisory encourages the implementation of information quality best practices and the use of NHTSA's Model Performance Measures for State Traffic Records Systems found in NHTSA document DOT HS 811 441. Data accessibility is one of the core performances attributes. Improved accessibility is therefore a worthy countermeasure.
Adjustments to countermeasure strategy for programming funds	There has been no adjustment made to this countermeasure, as accessibility is still a component of AOHS's planned programming.

Countermeasure Strategy	Improves accuracy of a core highway safety databases in the state's information system.
Problem being addressed and description of the Link between problem and strategy	Improving accuracy of the location components of the crash data is of extreme importance as it facilitates better analysis of the data. The location variables are some of the most important data that users want to know about the crash data. If the location data is faulty, it skews the hotspot analysis on which Alabama relies to direct enforcement efforts. This countermeasure will greatly complement other similar data attribute improvement countermeasures that will be targeted in these traffic records projects. All the countermeasures relate to improvements in some aspect of the data.
List of Countermeasure(s) and Justification	Improves accuracy of a core highway safety database (UG #10)
Performance Target and Link between Strategy and Target	The "Has" Coordinate variable in the crash database can target accuracy. This variable refers to presence of a GPS coordinate associated with the location of the crash within the crash record. Improving the accuracy of MapClick will ensure fewer coordinates will have to be manually entered and increase accuracy of the crash reporting in the state. See performance measure chart for project reference, baseline, and target.
Estimated Funding Source	Section 405(c)
Estimated 3-Year Funding	$2,500,000.00 (split among other TR countermeasures)
Considerations to determine projects	Traffic Safety Data, Traffic Records Coordinating Committee Input, Latest Recommendations from Traffic Records Assessment
Uniform Guideline/ NHTSA Assessment Recommendations and Description	Uniform Guidelines for State Highway Safety Programs states that accuracy is one of the metrics used to measure the quality of a State's traffic records information system. Additionally, the NHTSA Traffic Records Program Assessment Advisory encourages the implementation of information quality best practices and the use of NHTSA's Model Performance Measures for State Traffic Records Systems found in NHTSA document DOT HS 811 441. Data accuracy is one of the core performance attributes. Improved accuracy is therefore a worthy countermeasure.
Adjustments to countermeasure strategy for programming funds	There has been no adjustment made to this countermeasure, as accuracy is still a component of AOHS's planned programming.

Countermeasure Strategy	The crash countermeasure strategy of the TSIS is to complete the development and processing of a comprehensive core highway safety database.
Problem being addressed and description of the Link between problem and strategy	The projects this year will improve completeness to more than one core highway safety database. A particular emphasis will be on the further development in the crash and the EMS databases. Completeness will be improved as the MMUCC 5 version of eCrash is developed and as more agencies start using the NEMSIS 3.5 compliant RESCUE, which is the electronic patient care report for EMS runs. Improving completeness in the crash and the EMS data is extremely useful and essential. This countermeasure will greatly complement other similar data attribute improvement countermeasures that will be targeted in these traffic records projects. All the countermeasures relate to improvements in some aspect of either the data content or its processing.
List of Countermeasure(s) and Justification	Improves completeness of a core system database (UG #10)
Performance Target and Link between Strategy and Target	Variables in the crash database and the EMS database will be surveyed to determine how many null values there are, and a comparison will be made in the two study periods (current year vs previous year) of the number of records with a null value. A decrease in the percentage of null values will show improvement in data completeness. Several variables will be tested such as the "citation issued" variable and the "crash severity" variable and many others. See performance measure chart for project reference, baseline, and target.
Estimated Funding Source	Section 405(c)
Estimated 3-Year Funding	$2,500,000.00 (split among other TR countermeasures)
Considerations to determine projects	Traffic Safety Data, Traffic Records Coordinating Committee Input, Latest Recommendations from Traffic Records Assessment
Uniform Guideline/ NHTSA Assessment Recommendations and Description	As stated in "Uniform Guidelines for State Highway Safety Programs", "A State's traffic records information should be maintained in a form that is of high quality and readily accessible to users throughout the State." The NHTSA Traffic Records Program Assessment Advisory encourages the implementation of information quality best practices and the use of NHTSA's Model Performance Measures for State Traffic Records Systems found in NHTSA document DOT HS 811 441. Data completeness is one of the core performance attributes. Improved completeness is therefore a worthy countermeasure.

Adjustments to countermeasure strategy for programming funds	There has been no adjustment made to this countermeasure, as completeness is still a component of AOHS's planned programming for Traffic Records projects, To continue to address issues like crash report completeness, there is a need to fund activities.

Countermeasure Strategy	Improve timeliness of a core highway safety database
Problem being addressed and description of the Link between problem and strategy	The countermeasure strategy is to improve timeliness of a core highway safety database. One of the projects this year will improve timeliness to the EMS database. The development of the Recording of Emergency Services Calls and Urgent-Care Environment (RESCUE) data entry system for the Electronic Patient Care Report (ePCR – also known as ambulance run reports) has been quite successful. As Alabama continues to expand the user base through the RESCUE project this year, the timeliness of the state EMS database will improve. Improving timeliness of the EMS data for Alabama is very helpful as it facilitates better analysis of the data. In addition, the data can be transferred to the federal database in a timelier manner. This countermeasure will greatly complement other similar data attribute improvement countermeasures that will be targeted in these traffic records projects. All the countermeasures relate to improvements in some aspect of the data.
List of Countermeasure(s) and Justification	Improving timeliness of a core highway safety database (UG #10)
Performance Target and Link between Strategy and Target	The "Submission Lag" variable in the EMS patient care report (PCR) database will be studied. This variable refers to the submission lag time for the first submission of the EMS data. A PCR may be submitted multiple times for a variety of reasons. It may have Schematron errors that need to be corrected. Or it could have data that needs to be updated/corrected. So, the earliest submission time is the first time that patient care report is submitted. A comparison will be made in the number of "Less than 24 hours" values in the records and compared with the previous year's data to ascertain improvement. See performance measure chart for project reference, baseline, and target.
Estimated Funding Source	Section 405(c)
Estimated 3-Year Funding	$2,500,000.00 (split among other TR countermeasures)
Considerations to determine projects	Traffic Safety Data, Traffic Records Coordinating Committee Input, Latest Recommendations from Traffic Records Assessment
Uniform Guideline/ NHTSA Assessment Recommendations and Description	As stated in "Uniform Guidelines for State Highway Safety Programs", "A State's traffic records information should be maintained in a form that is of high quality and readily accessible to users throughout the State." The NHTSA Traffic Records Program Assessment Advisory encourages the implementation of information quality best practices and the use of NHTSA's Model Performance Measures for State Traffic Records

	Systems found in NHTSA document DOT HS 811 441. Data timeliness is one of the core performance attributes. Improved timeliness is therefore a worthy countermeasure.
Adjustments to countermeasure strategy for programming funds	There has been no adjustment made to this countermeasure, as timeliness is still a component of AOHS's planned programming for Traffic Records projects, To continue to address issues like PCR timeliness, there is a need to fund these activities.

Countermeasure Strategy	Improve uniformity of a core highway safety database
Problem being addressed and description of the Link between problem and strategy	Improving uniformity of the crash, citation and the EMS data is of utmost importance as it facilitates better analysis of the data. Improving uniformity to these two national data standards makes the Alabama data easier to compare to other states to see how we rank nationally and how traffic safety issues are trending. This countermeasure will greatly complement other similar data attribute improvement countermeasures that will be targeted in these traffic records projects. All the countermeasures relate to improvements in some aspect of the data.
List of Countermeasure(s) and Justification	Improving uniformity of a core highway safety database (UG #10)
Performance Target and Link between Strategy and Target	Percentage of records in the State EMS data file that are National Emergency Medical Service Information System (NEMSIS)-compliant. The higher the percentage, the more uniform the EMS data is. One of the goals and deliverables of the RESCUE project is to keep it up to date with the latest version of the NEMSIS standard. See performance measure chart for project reference, baseline, and target.
Estimated Funding Source	Section 405(c)
Estimated 3-Year Funding	$2,500,000.00 (split among other TR countermeasures)
Considerations to determine projects	Traffic Safety Data, Traffic Records Coordinating Committee Input, Latest Recommendations from Traffic Records Assessment
Uniform Guideline/ NHTSA Assessment Recommendations and Description	As stated in "Uniform Guidelines for State Highway Safety Programs": "A State's traffic records information should be maintained in a form that is of high quality and readily accessible to users throughout the State." Also, the NHTSA Traffic Records Program Assessment Advisory encourages the implementation of information quality best practices and the use of NHTSA's Model Performance Measures for State Traffic Records Systems found in NHTSA document DOT HS 811 441. Data uniformity is one of the core performance attributes. Improved uniformity is therefore a worthy countermeasure.
Adjustments to countermeasure strategy for programming funds	There has been no adjustment made to this countermeasure, as uniformity is still a component of AOHS's planned programming for Traffic Records projects, To continue to improve data files and align with NEMSIS compliance, AOHS will still include this strategy.

Traffic Records Countermeasure Performance Measures

Countermeasure Strategy	Performance Measure	TSIS Project Reference	Baseline	Target - 2024
Increase Accessibility of Crash Database	Number of accounts and results of user survey of stakeholders will measure level of success.	Crash Component, Item 4.3.2.3 eCrash Upgrades & Crash Component, Item 4.3.2.5 Upgrade CARE dashboard user interface	4/1/23 - 3/31/24: 42 accounts were created between April 2023 and March 2024 (483 total accounts).	480 total accounts
Improve accuracy of a core highway safety database (crash) in the state's information system.	The "Has Coordinate" variable in the crash database can be used to target accuracy using the "Coordinates entered manually" value.	Crash Component, Item 4.3.2.3 eCrash Upgrades, Pages 24, TSIS Strategic Plan 2024-2028, June 8, 2023	4/1/23 - 3/31/24: "Coordinates entered manually" value Frequency: 2,478 Percentage: 1.74%	2.0%
Improve completeness of a core highway safety database (crash) in the state's information system.	The "Has Coordinate" variable in the crash database can be used to target completeness using the "No Coordinate" value. As of June 2024, we are locating the most recent crashes first, rather than the backlog of crashes.	Crash Component, Item 4.3.2.3 eCrash Upgrades, Pages 24, TSIS Strategic Plan 2024-2028, June 8, 2023	4/1/23 - 3/31/24: "No Coordinate" value Frequency: 22,323 Percentage: 15.8%	3.30%
Improve timeliness of a core highway safety database (EMS)	The "Lates Submission Lag Time" variable in the EMS Report Submission (PRC) database can be used to target timeliness using the "Less than 24 hours" value.	EMS-Medical Surveillance Component, Item 4.3.7.1 – "Continued enhancements and support of RESCUE", Page 35, TSIS Strategic Plan 2024-2028, June 8, 2023	4/1/23- 3/31/24: "Less than 24 hours" value Frequency: 569,605 Percentage: 58.82%	73.0%
Improve uniformity of a core highway safety database (EMS)	Percentage of records in the State EMS data file that are National Emergency Medical Service Information System (NEMSIS)-compliant (v3.4 vs. v3.5)	EMS-Medical Surveillance Component, Item 4.3.7.1 – "Continued enhancements and support of RESCUE", Page 35, TSIS Strategic Plan 2024-2028, June 8, 2023	4/1/23 - 3/31/24: NEMSIS v3.4: 48.9% NEMSIS v3.5: 51.1%	NEMSIS v3.4: 10% v3.5: 90%

Performance Measure	Metric	Timeframe	2022	2023	2024	**2025**	**2026**
Accessibility	CARE/SAFETY crash data analysis web portal users and passwords	4/1/2022 - 3/31/2024	382	441	483	**500**	**525**
Accuracy	Variable: Has Coordinate and Value: Coordinates entered manually	4/1/2022 - 3/31/2024	14.5%	2.3%	15.8%	**1.90%**	**1.85%**
Completeness	Variable: Has Coordinate and Value: No coordinates	4/1/2022 - 3/31/2024	5.1%	14.7%	15.7%	**3.30%**	**3.25%**
Timeliness	Variable: Latest Submission Lag and Value: Less than 24 hours	4/1/2022 - 3/31/2024	66.0%	62.1%	58.8%	**73.50%**	**74.00%**
Uniformity	NEMSIS v3.4 and NEMSIS v3.5 usage percent reported in v3.5 percent use	4/1/2022 - 3/31/2024		90%	51.10%	**95%**	**100%**

Project Name: Data Program Improvements

Project Number

2025-TF-TR-27

Primary Countermeasure Strategy ID

Improve Uniformity of a Core Highway System Database

Intended Subrecipients

University of Alabama - University

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
State Trust Fund		**$ 1,095,000.00**		

Project Description

The University of Alabama Center for Advanced Public Safety (CAPS) will continue to improve traffic safety by advancing data and statistical analysis tools. CAPS will continue to support data information requests, assist in the development of the State's Highway Safety Plan, and continue to spread eCite and other CAPS developed software to law enforcement agencies throughout the state, maintain CAPS-developed software systems, coordinate the phone surveys concerning the Drive Sober campaign and the NHTSA survey on driver attitudes and some other traffic safety outreach efforts, maintain the SafeHomeAlabama.gov website with comprehensive traffic safety information, support the OHS with respect to the Traffic Records Coordinating Committee, other committees, the Traffic Records Assessment that is due this year, and reports as needed. This project will be used for statewide systems but will be heavily focused on software and activities utilized by ADECA and other state agencies located in Montgomery.

Project Name: Traffic Safety Records Improvement Program

Project Number
2025-TR-M3-26

Primary Countermeasure Strategy ID
Improves completeness of a core highway safety database

Intended Subrecipients
University of Alabama - University

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL 405c	**Data Program Improvements**	**$ 726,158.31**	**No**	**No**
BIL 405c Supplemental	**Data Program Improvements**	**$ 56,105.00**	**No**	**No**

Project Description

The University of Alabama Center for Advanced Public Safety (CAPS) will continue to improve traffic safety through software development projects using innovative technologies. The technology development projects this year will include testing and preparing to deploy the new MMUCC 5 version of eCrash; continuing RESCUE projects including beginning work on the certification module; upgrading the ADVANCE analytics portal; design planning for a new version of MOVE and eCite and deploying the new full eGIS version of MapClick. These systems improve data quality, timeliness, and completeness. These systems also improve efficiency of officers and EMS personnel throughout the state. This project will be utilized statewide through information systems.

Project Name: Electronic Patient Care Reports Program

Project Number
2025-TR-M3-7
Primary Countermeasure Strategy ID:
Improves accuracy of a core highway safety database
Intended Subrecipients
Alabama Department of Public Health

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
State Trust Fund	**Data Program Improvements**	**$60,000.00**	**No**	**No**

Project Description

The Alabama Office of EMS (OEMS) regulates emergency medical services personnel and emergency medical services provider services. The primary goal is to ensure that equally qualified emergency medical services are rendered in a standardized format regardless of where an emergency injury or illness may occur within Alabama. There are federal guidelines in place that must be followed so that uniform laws, rules, regulations, and medical procedures are performed across the U.S. The National Highway Safety Traffic Administration's (NHTSA) developed the standards by which electronic patient care reporting systems must follow. These electronic reporting standards are called the National Emergency Medical Services Information System (NEMSIS) compliant. This NEMSIS compliant software system was developed by Grayco Systems and Consulting Inc. and was implemented over the 2007-2008 time period in Alabama. The OEMS currently refers to this reporting system as the Alabama e-PCR and all EMS agencies are mandated to comply with reporting requirements. The funds will be used to contract with Grayco Systems, Inc., annual software maintenance and technical support. This project will benefit the state as a whole.

Program Area: Impaired Driving

Performance Measures in Program Area

PERFORMANCE PLAN CHART FY24 -26 Highway Safety Plan Updated for FY 25			2019	2020	2021	2022	2023*
C-1	Traffic Fatalities	State	930	934	983	988	975
	Reduce the five-year average of 962 by .42% to 958 by 2026	Rolling Avg.	953	970	950	958	962
C-2	Serious Injuries in Traffic Crashes	State	5103	4782	5184	4836	4878
	Reduce the Number of Severe injuries in Traffic Crashes by 7.88% from 5381 to 4957 by 2026.	Rolling Avg.	7300	6505	5911	5381	4957
C-3	Fatalities/100M VMT	State	1.38	1.38	1.37	1.38	-
	Maintain fatality rate to at the current safety level of 1.34 by December 31, 2026.	Rolling Avg	1.36	1.38	1.34	1.35	-

PERFORMANCE PLAN CHART FY24 -26 Highway Safety Plan			2017	2018	2019	2020	2021	2022
C-5	Alcohol-Impaired Driving Fatalities	State	265	249	272	236	281	262
	Maintain alcohol-impaired driving fatalities at the current safety level of 260 by December 31, 2026.	Rolling Avg.	266	264	266	264	261	260

405(d) Impaired Driving Countermeasures Grant

Impaired driving qualification: **Mid-Range State**

Authority and Basis of Operation of AIDPC

The authority and basis for the operation of the Alabama Statewide impaired driving task force, as well as the process used to develop and approve the plan can be in the Charter of the Alabama Impaired Driving Prevention Council (AIDPC), which can be seen in Appendix A. The entire strategic plan can be found in Appendix B.

Alabama Impaired Driving Prevention Council (AIDPC)

The Alabama Impaired Driving Prevention Council (AIDPC) was assembled to develop and approve this plan and to ensure that all aspects of the impaired driving problem were considered and that as many alternative countermeasures as possible could be evaluated. To create a strategic plan that would focus on the problem areas with the greatest opportunity for improvement, and establish a successfully functioning Council, it was essential to have representation from agencies and organizations with a working knowledge and deep understanding of the various parts of Alabama's impaired driving prevention system and how the parts interrelate. The individuals who participated in the AIDPC meetings and assisted in drafting the Impaired Driving Strategic Plan (IDSP) are identified below. AIDPC organizers are deeply grateful for the time and effort members devoted to development of the strategic plan and for the counsel, advice, and expertise they brought to the plan, and that they continue to bring toward implementing it.

The major charge given by the AIDPC in its commission was to foster leadership, commitment, and coordination among all parties interested in impaired driving issues. Further, they were charged with the responsibility to attend regular meetings as established by the Chair, and to generally manage and provide overall control to the program as described in the ID Strategic Plan.

The IDSP is data driven. In drafting the IDSP, members of the AIDPC relied on data on impaired driving-related crashes, arrests, suspensions, and convictions data; also used were state-specific studies on youth and adult behavior and attitudes toward alcohol consumption/drug use specifically as they relate to impaired driving.

AIDPC Members

NAME	AGENCY	TITLE	FUNCTION
Adams, Erin	MADD	State Victim Services Coordinator	Community Engagement
Argo, Dean	Alcoholic Beverage Control Board	Government Relations Manager	Communication
Babington, Bill	Alabama Department of Economic and Community Affairs	Division Chief	State Highway Safety Office
Barnes, Noel	Alabama Law Enforcement Agency	General Counsel	Drivers Licensing
Bertaut, Denise	Alabama Department of Public Health	Child Passenger Safety Program Manager	Public Health
Cauthen, Terry	Alabama Board of Pardons & Paroles	Director of Field Operations	Criminal Justice System
Frederick, Sgt. William	Alabama Law Enforcement Agency	DRE	Drug-impaired Driving Countermeasures
Harper, Dr. Curt	Alabama Department of Forensic Sciences	Toxicology Discipline Chief	Human Performance Toxicology
Jett, Errek	Alabama District Attorneys Association	District Attorney, 15th Judicial Circuit	Criminal Justice System
Jones, Jay	Lee Co. Sheriff's Office	Sheriff	Criminal Justice System
Lindsey, Bill	Alabama Traffic Safety Resource Prosecutor	Traffic Safety Resource Prosecutor	Criminal Justice System/Communication
Norris, Jesse	University of Alabama – CAPS	Professor	Data & Traffic Records
Plato-Bryant, Cheryl	Alabama Administrative Office of Courts	Court Referral Program State Coordinator	Treatment & Rehabilitation
Simpson, Matt	Alabama Legislature	State Representative, 96th District	Communication

Sparks, Hon. Andra	Judiciary	Municipal Judge – Birmingham	Criminal Justice System
Spencer, Karen	MADD	State Victim Services Coordinator	Community Engagement
Thompson, Paul	Alabama Law Enforcement Agency	DRE State Coordinator	Drug-impaired Driving Countermeasures
Turner, Dr. Greg	Alabama Department of Forensic Sciences	Technical Director, Implied Consent Unit	Breath testing/Ignition Interlock
VACANT	Judiciary	District Judge	Adjudication
VACANT	Alabama Office of Prosecution Services	ADA	Prosecution

Countermeasure Strategies in Program Area

Countermeasure Strategy	Decrease the rates of crashes caused by impaired drivers.
Problem being addressed and description of the Link between problem and strategy	The five-year average of impaired driving fatalities in Alabama is 260 (2018-2022). The rate of injuries and fatalities are consistently higher in ID crashes than that of non-ID crashes. Fatality crash proportions for ID crashes are 6.769 times their expected proportion, while the next two highest (non-fatal) injury classifications have over twice their expected values when compared with non-ID crashes. The odds ratio is over three (3.978) for the highest non-fatal classification, Suspected Serious Injury. A proven countermeasure to combat impaired driving is well publicized enforcement campaigns.
List of Countermeasure(s) and Justification	1-58 Mass Media Campaigns (CTW, *2* stars) 1-29 High Visibility Saturation Patrols (CTW 4 Stars)
Performance Target and Link between Strategy and Target	Performance Measures Affected C-1) Number of traffic fatalities (FARS) C-2) Number of Serious Injuries C-3) Fatalities Per 100 Million Vehicle Miles Driven C-5) Number of fatalities in crashes involving a driver or motorcycle operator with a BAC of .08 and above (FARS) AOHS will fund four local Alcohol High Visibility Enforcement projects during the coming year as well as one statewide Alcohol High Visibility Enforcement project. Each of these projects will focus on alcohol related Hotspot crashes and the problem locations that have been identified across the state. This HVE campaign will be accompanied by a comprehensive, multiplatform media campaign throughout the state.
Estimated Funding Source	Federal Fund Description Section 405(d)
Estimated 3-Year Funding	Estimated 3-year Funding $6,240,000.00
Considerations to determine projects	Public Feedback and Crash Location Data will help identify messaging target demographics and geographical deployment of messaging. The enforcement effort is evidence-based, which will prevent traffic violations, crashes, and crash fatalities and injuries in locations most at risk. The enforcement program will continuously be evaluated, and the necessary adjustments will be made.
Uniform Guideline/ NHTSA Assessment Recommendations and Description	Taken from Uniform Guidelines No. 8. Impaired Driving: B. ENFORCEMENT Each State should conduct frequent, highly visible, well publicized and fully coordinated impaired driving (including zero tolerance) law enforcement efforts throughout the State, especially in locations where alcohol-related fatalities most often occur. To maximize visibility, States

	should maximize contact between officers and drivers using sobriety checkpoints and saturation patrols and should widely publicize these efforts—before, during, and after they occur. Highly visible, highly publicized efforts should be conducted periodically and also on a sustained basis throughout the year. To maximize resources, the State should coordinate efforts among State, county, municipal, and tribal law enforcement agencies. States should utilize law enforcement liaisons for activities such as promotion of national and local mobilizations and increasing law enforcement participation in such mobilizations, and for collaboration with local chapters of police groups and associations that represent diverse groups to gain support for enforcement efforts. Each State should coordinate efforts with liquor law enforcement officials. To increase the probability of detection, arrest, and prosecution, participating officers should receive training in the latest law enforcement techniques, including Standardized Field Sobriety Testing, and selected officers should receive training in media relations and Drug Evaluation and Classification (DEC). C. PUBLICIZING HIGH VISIBILITY ENFORCEMENT Each State should communicate its impaired driving law enforcement efforts and other elements of the criminal justice system to increase the public perception of the risks of detection, arrest, prosecution and sentencing for impaired driving. Each State should develop and implement a year-round communications plan that provides emphasis during periods of heightened enforcement, provides sustained coverage throughout the year, includes both paid and earned media and uses messages consistent with national campaigns. Publicity should be culturally relevant, appropriate to the audience, and based on market research
Adjustments to countermeasure strategy for programming funds	There are no adjustments to this category. High Visibility Enforcement and corresponding media campaigns are integral parts of AOHS's safety programming. The number of participating agencies for this initiative are stabilizing after the last few years and should be able to support the current funding structure.

Project Name: Drive Sober or Get Pulled Over High Visibility Enforcement Campaign

Project Number

2025-ID-DS-16

Primary Countermeasure Strategy ID:

Decrease the rates of crashes caused by impaired drivers.

Intended Subrecipients

Enterprise State Community College- Post Secondary Education

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL 405d	**High Visibility Enforcement Support**	**$43,114.00**	**No**	**No**

Project Description

The Southeast Region of Alabama will have a High Visibility Enforcement program for the two week period of the national Drive Sober or Get Pulled Over campaign for FY 2024. The enforcement program will consist of members from the Municipal Law Enforcement Agencies and County Sheriffs in the counties of Autauga, Barbour, Bullock, Butler, Chambers, Clay, Coffee, Covington, Crenshaw, Dale, Geneva, Henry, Houston, Lee, Lowndes, Macon, Montgomery, Pike, Randolph, Russell, and Tallapoosa. This campaign will begin in August and conclude on Labor Day, in line with the dates for the national Drive Sober or Get Pulled Over campaign.

Project Name: Drive Sober or Get Pulled Over High Visibility Enforcement Campaign

Project Number

2025-ID-DS-30

Primary Countermeasure Strategy ID:

Decrease the rates of crashes caused by impaired drivers.

Intended Subrecipients

Mobile County Commission- Unit of Local Government

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL 405d	**High Visibility Enforcement Support**	**$64,671.00**	**No**	**No**

Project Description

The Southwest Region of Alabama will have a High Visibility Enforcement program for Drive Sober or Get Pulled Over. The enforcement program will consist of members from the Municipal Law Enforcement Agencies, County Sheriffs in Baldwin, Bibb, Chilton Choctaw, Conecuh, Clark, Dallas, Escambia, Greene, Hale, Marengo, Mobile, Monroe, Perry, Pickens, Sumter, Tuscaloosa, Washington and Wilcox Counties. This campaign will begin in August and conclude on Labor Day, in line with the dates for the national campaign.

Project Name: Drive Sober or Get Pulled Over High Visibility Enforcement Campaign

Project Number

2025-ID-DS-23

Primary Countermeasure Strategy ID:

Decrease the rates of crashes caused by impaired drivers.

Intended Subrecipients

Franklin County Commission- Unit of Local Government

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL 405d	**High Visibility Enforcement Support**	**$92,215.00**	**No**	**No**

Project Description

The North Central region of Alabama will have a High Visibility Enforcement program for Drive Sober or Get Pulled Over. The enforcement program will consist of members from the Municipal Law Enforcement Agencies and County Sheriffs in the counties of Colbert, Cullman, De Kalb, Fayette, Franklin, Jackson, Lamar, Lauderdale, Lawrence, Limestone, Madison, Marion, Marshall, Morgan, Walker, and Winston. This campaign will begin in August and conclude on Labor Day, in line with the dates for the national Drive Sober or Get Pulled Over campaign.

Project Name: Impaired Driving High Visibility Enforcement Campaign

Project Number

2025-ID-M5-3

Primary Countermeasure Strategy ID:

Decrease the rates of crashes caused by impaired drivers.

Intended Subrecipients

Alabama Law Enforcement Agency – State Agency

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL 405d	**High Visibility Enforcement**	**$200,000.00**	**No**	**No**
BIL 405d Supplemental	**High Visibility Enforcement**	**$ 200,000.00**	**No**	**No**

Project Description

There will be four local Alcohol High Visibility Enforcement projects during the coming year as well as one statewide Alcohol High Visibility Enforcement project. Each of these projects will focus on alcohol related Hotspot crashes and the problem locations that have been identified across the state. One project will take place in each of the four CTSP/LEL regions and the statewide project will be conducted by the Alabama Law Enforcement Agency (ALEA). By conducting these HVE projects, additional evidence-based efforts can be focused on the reduction of impaired driving related crashes. The law enforcement activity will be sustained for twelve (12) months. The enforcement will be intended to cover the entire state, but specific post locations are in Montgomery, Opelika, Alex City, Florence, Hamilton, Decatur, Huntsville, Gadsden, Birmingham, Jacksonville, Mobile, Grove Hill, Evergreen, Dothan, Troy, Selma, and Tuscaloosa.

However, at least three additional "Drive Sober or Get Pulled Over" mobilizations will take place during holiday periods known for increased travel and a higher potential for impaired motorists to be on the roadways and in conjunction with a paid media campaign. These periods include Christmas and New Year's, St. Patrick's Day, and the Fourth of July. For the eighth year since 2015, this HVE campaign will be accompanied by a comprehensive, multiplatform media campaign throughout the state. The enforcement effort is evidence-based, which will prevent traffic violations, crashes, and crash fatalities and injuries in locations most at risk. The enforcement program will continuously be evaluated, and the necessary adjustments will be made.

Project Name: Impaired Driving High Visibility Enforcement Campaign

Project Number

2025-ID-M5-14

Primary Countermeasure Strategy ID:

Decrease the rates of crashes caused by impaired drivers.

Intended Subrecipients

Enterprise State Community College- Post Secondary Education

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL 405d	**High Visibility Enforcement**	**$180,272.00**	**No**	**No**

Project Description

There will be four local Alcohol High Visibility Enforcement projects during the coming year as well as one statewide Alcohol High Visibility Enforcement project. Each of these projects will focus on alcohol related Hotspot crashes and the problem locations that have been identified across the state. One project will take place in each of the four CTSP/LEL regions and the statewide project will be conducted by the Alabama Law Enforcement Agency (ALEA). By conducting these HVE projects, additional evidence-based efforts can be focused on the reduction of impaired driving related crashes. The law enforcement activity will be sustained for twelve (12) months. The counties that the Southeast Alabama Highway Safety Office serves are Autauga, Barbour, Bullock, Butler, Chambers, Clay, Coffee, Covington, Crenshaw, Dale, Geneva, Henry, Houston, Lee, Lowndes, Macon, Montgomery, Pike, Randolph, Russell, and Tallapoosa.

However, at least three additional "Drive Sober or Get Pulled Over" mobilizations will take place during holiday periods known for increased travel and a higher potential for impaired motorists to be on the roadways and in conjunction with a paid media campaign. These periods include Christmas and New Year's, St. Patrick's Day, and the Fourth of July. This HVE campaign will be accompanied by a comprehensive, multiplatform media campaign throughout the state. The enforcement effort is evidence-based, which will prevent traffic violations, crashes, and crash fatalities and injuries in locations most at risk. The enforcement program will continuously be evaluated, and the necessary adjustments will be made.

Project Name: Impaired Driving High Visibility Enforcement Campaign

Project Number

2025-ID-M5-29

Primary Countermeasure Strategy ID:

Decrease the rates of crashes caused by impaired drivers.

Intended Subrecipients

Mobile County Commission- Unit of Local Government

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL 405d	**High Visibility Enforcement**	**$221,088.00**	**No**	**No**

Project Description

There will be four local Alcohol High Visibility Enforcement projects during the coming year as well as one statewide Alcohol High Visibility Enforcement project. Each of these projects will focus on alcohol related Hotspot crashes and the problem locations that have been identified across the state. One project will take place in each of the four CTSP/LEL regions and the statewide project will be conducted by the Alabama Law Enforcement Agency (ALEA). By conducting these HVE projects, additional evidence-based efforts can be focused on the reduction of impaired driving related crashes. The law enforcement activity will be sustained for twelve (12) months. The counties covered by this project are Baldwin, Bibb, Chilton Choctaw, Conecuh, Clark, Dallas, Escambia, Greene, Hale, Marengo, Mobile, Monroe, Perry, Pickens, Sumter, Tuscaloosa, Washington and Wilcox Counties.

However, at least three additional "Drive Sober or Get Pulled Over" mobilizations will take place during holiday periods known for increased travel and a higher potential for impaired motorists to be on the roadways and in conjunction with a paid media campaign. These periods include Christmas and New Year's, St. Patrick's Day, and the Fourth of July. This HVE campaign will be accompanied by a comprehensive, multiplatform media campaign throughout the state. The enforcement effort is evidence-based, which will prevent traffic violations, crashes, and crash fatalities and injuries in locations most at risk. The enforcement program will continuously be evaluated, and the necessary adjustments will be made.

Project Name: Impaired Driving High Visibility Enforcement Campaign

Project Number

2025-ID-M5-22

Primary Countermeasure Strategy ID:

Decrease the rates of crashes caused by impaired drivers.

Intended Subrecipients

Franklin County Commission- Unit of Local Government

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL 405d	**High Visibility Enforcement**	**$552,327.00**	**No**	**No**

Project Description

There will be four local Alcohol High Visibility Enforcement projects during the coming year as well as one statewide Alcohol High Visibility Enforcement project. Each of these projects will focus on alcohol related Hotspot crashes and the problem locations that have been identified across the state. One project will take place in each of the four CTSP/LEL regions and the statewide project will be conducted by the Alabama Law Enforcement Agency (ALEA). By conducting these HVE projects, additional evidence-based efforts can be focused on the reduction of impaired driving related crashes. The law enforcement activity will be sustained for twelve (12) months in the counties of Colbert, Cullman, De Kalb, Fayette, Franklin, Jackson, Lamar, Lauderdale, Lawrence, Limestone, Madison, Marion, Marshall, Morgan, Walker, and Winston.

However, at least three additional "Drive Sober or Get Pulled Over" mobilizations will take place during holiday periods known for increased travel and a higher potential for impaired motorists to be on the roadways and in conjunction with a paid media campaign. These periods include Christmas and New Year's, St. Patrick's Day, and the Fourth of July. This HVE campaign will be accompanied by a comprehensive, multiplatform media campaign throughout the state. The enforcement effort is evidence-based, which will prevent traffic violations, crashes, and crash fatalities and injuries in locations most at risk. The enforcement program will continuously be evaluated, and the necessary adjustments will be made.

Project Name: Impaired Driving Paid Media Campaign

Project Number

2025-ID-PM-20

Primary Countermeasure Strategy ID:

Decrease the rates of crashes caused by impaired drivers.

Intended Subrecipients

Auburn University – University

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
FAST 405d	**High Visibility Enforcement**	**$ 564,688.76**	**No**	**Yes**
BIL 405d*	**High Visibility Enforcement**	**$ 148,768.14**	**No**	**No**

* FAST Act funds will be spent before BIL funds.

Project Description

Alabama will fund High Visibility Impaired Driving Enforcement paid media campaigns. The campaign messages will be placed and aired during holiday periods known for increased travel and a higher potential for impaired motorists to be on the roadways. These periods include Christmas and New Year's, St. Patrick's Day, Cinco de Mayo, and the Fourth of July. Along with traditional print, radio and television advertisements, Auburn University will use additional means of reaching the motoring public. Through professional services contracts, Alabama will be also able to place campaign messages in movie theatres, as well as participate in an increased online presence via web ads and newer mediums such as iHeart Radio, Spotify, and Pandora. These ads will be designed to target overrepresented demographic groups in impaired driving crash data, as well as locations identified during through the Public Input Survey responses as higher risk. Identified focus groups include males aged 21-40. Rural locations are also overrepresented in impaired driving classes, so online ads will be geared towards users in counties such as rural Baldwin, Madison, Cullman, Limestone, and Marshall; cities targeted will include Rural Mobile, Rural Madison, Rural Cullman, Rural Baldwin, Rural Limestone, and Rural Tuscaloosa.

Countermeasure Strategy	Increase the number of law enforcement professionals trained in the identification of impaired drivers on the roadways.
Problem being addressed and description of the Link between problem and strategy	The five-year average of impaired driving fatalities in Alabama is 260 (2018-2022). Alabama is one of 49 states and the District of Columbia to implement the Drug Evaluation and Classification Program (DECP). At the heart of this program is the Drug Recognition Expert (DRE). A DRE is a law enforcement officer trained in detecting and recognizing impairment caused by substances other than alcohol.
List of Countermeasure(s) and Justification	Enforcement Training -Drug Recognition Expert Training Program (UG #8)
Performance Target and Link between Strategy and Target	Performance Measures Affected C-1) Number of traffic fatalities (FARS) C-2) Number of Serious Injuries C-3) Fatalities Per 100 Million Vehicle Miles Driven C-5) Number of fatalities in crashes involving a driver or motorcycle operator with a BAC of .08 and above (FARS) The presence of DREs in Alabama will impact both the highway and the courtroom. A Drug Recognition Expert Program (DRE) will be funded to train and certify law enforcement officers from various agencies around Alabama as Drug Recognition Experts. A continuation and expansion of this program in Alabama will enable law enforcement officers to better detect, apprehend, assess, document, and subsequently help the prosecutor prove, in court, the defendant was under the influence of a drug while driving (or committing any other improper act, e.g., domestic violence and homicide).
Estimated Funding Source	Federal Fund Description Section 405(d)
Estimated 3-Year Funding	$1,150,000.00
Considerations to determine projects	Traffic Safety Data and Citation Information will help determine target locations and agencies for program management and administration.
Uniform Guideline/ NHTSA Assessment Recommendations and Description	From *Uniform Guidelines* No. 8: To increase the probability of detection, arrest, and prosecution, participating officers should receive training in the latest law enforcement techniques, including Standardized Field Sobriety Testing, and selected officers should receive training in media relations and Drug Evaluation and Classification (DEC).
Adjustments to countermeasure strategy for programming funds	There are no funding structure changes for this project. DRE training will remain a valuable strategy for addressing impaired driving. The award amounts set aside for this project should be adequate at meeting the needs of the program.

Project: Drug Recognition Expert Training Program

Project Number

2025-ID-DR-2

Primary Countermeasure Strategy ID:

Increase the number of law enforcement professionals trained in the identification of impaired drivers on the roadways.

Intended Subrecipients

Alabama Law Enforcement Agency – State Agency

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL 405d	**Mid Training**	**$407,223.59**	**No**	**No**

Project Description

The goal of the Drug Recognition Expert Program (DRE) is to train and certify law enforcement officers from various agencies around Alabama as Drug Recognition Experts. Each certified DRE will be able to diagnose an individual arrested for DUI to be either under the influence of some drug other than alcohol or suffering from a medical issue. If the DRE determines the defendant is under the influence of a drug, then the DRE will identify the category or categories of impairing drugs.

While the DRE training and certified DREs affect the entire state, training classes will take place in the cities of Selma, Troy, Jasper, and Orange Beach, AL as well as other locations upon request and confirmation. Training classes are posted on https://www.aidep.alea.gov/our_classes/all_training_dates.php.

Countermeasure Strategy	Increase the rate of successful DUI prosecution in the state through education and training of law enforcement, prosecutors, judges, and related occupations.
Problem being addressed and description of the Link between problem and strategy	The five-year average of impaired driving fatalities in Alabama is 260 (2018-2022). By offering educational opportunities and technical support throughout the state, courts are better prepared to prosecute DWI offenders. AOHS will allocate sufficient funds to allow for a full time Traffic Safety Resource Prosecutor to provide training requirements to all District Attorneys, ADAs, and their staff to increase the level of readiness and proficiency for the effective prosecution of traffic impaired driving cases.
List of Countermeasure(s) and Justification	Traffic Safety Resource Prosecutor (UG #8)
Performance Target and Link between Strategy and Target	Performance Measures Affected C-1) Number of traffic fatalities (FARS) C-2) Number of Serious Injuries C-3) Fatalities Per 100 Million Vehicle Miles Driven C-5) Number of fatalities in crashes involving a driver or motorcycle operator with a BAC of .08 and above (FARS) Alabama's state's goal is to achieve both specific and general deterrence through goals defined as: •Specific deterrence focuses on individual offenders and seeks to ensure that impaired drivers will be detected, arrested, prosecuted, and subject to swift, sure, and appropriate sanctions, and thereby reduce recidivism. •General deterrence seeks to increase the public perception that impaired drivers will face severe consequences, thus discouraging all individuals from driving impaired.
Estimated Funding Source	Section 402
Estimated 3-Year Funding	$650,000.00
Considerations to determine projects	Traffic Safety Data, Citation Information
Uniform Guideline/ NHTSA Assessment Recommendations and Description	From *Uniform Guidelines* No. 8: States should implement a comprehensive program to prosecute and publicize impaired-driving-related efforts, including use of experienced prosecutors (e.g., traffic safety resource prosecutors), to help coordinate and deliver training and technical assistance to prosecutors handling impaired driving cases throughout the State visibly, aggressively, and effectively.

Adjustments to countermeasure strategy for programming funds	There has been no changes made to the funding structure of this countermeasure strategy. The TSRP program is a vital part of addressing impaired driving in our state, but our office does not anticipate needing to adjust the award amount in this fiscal year.

Project: Traffic Safety Resource Prosecutor

Project Number

2025-FP-AL-17

Primary Countermeasure Strategy ID:

Increase the rate of successful DUI prosecution in the state through education and training of law enforcement, prosecutors, judges, and related occupations.

Intended Subrecipients

Office of Prosecution Services – State Agency

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402	**Prosecutor Training**	**$222,709.20**	**No**	**No**

Project Description

The TSRP program will provide prosecutors and local law enforcement with a veteran prosecutor that will provide training, education, legal research, and technical assistance on traffic safety-related issues. Additional goals of the TSRP program are to develop strategies and tactics that reduce impaired driving injuries and fatalities. This program provides services to attorneys, judges, law enforcement, and other traffic safety partners across throughout the state.

Implementation of this grant project in the State of Alabama will include the following activities:

- The Traffic Safety Resource Prosecutor to act as a liaison to judges, prosecutors, law enforcement officers, and other traffic safety professionals. This individual will conduct training sessions both regionally and statewide- at this time locations have not been confirmed.
- Collaborate with Law Enforcement agencies to streamline the education on impaired driving and traffic crash cases. The TSRP will teach at the police academies in Selma, AL.
- Implement effective prosecution techniques at least two (3) TSRP training sessions, locations have not been confirmed at this time.

Program Area: Distracted Driving

Performance Measures in Program Area

PERFORMANCE PLAN CHART FY24 -26 Highway Safety Plan Updated for FY 25			2019	2020	2021	2022	2023*
C-1	Traffic Fatalities	State	930	934	983	988	975
	Reduce the five-year average of 962 by .42% to 958 by 2026	Rolling Avg.	953	970	950	958	962
C-2	Serious Injuries in Traffic Crashes	State	5103	4782	5184	4836	4878
	Reduce the Number of Severe injuries in Traffic Crashes by 7.88% from 5381 to 4957 by 2026.	Rolling Avg.	7300	6505	5911	5381	4957
C-3	Fatalities/100M VMT	State	1.38	1.38	1.37	1.38	-
	Maintain fatality rate to at the current safety level of 1.34 by December 31, 2026.	Rolling Avg	1.36	1.38	1.34	1.35	-

Countermeasure Strategies in Program Area

Countermeasure Strategy	Decrease the amount of distracted driving crashes in Alabama
Problem being addressed and description of the Link between problem and strategy	While we know Distracted Driving crashes are underreported, there were 60 distracted driving related fatalities in Alabama in 2022. Public education can be a deterrent for this dangerous behavior.
List of Countermeasure(s) and Justification	5.19 Communications and Outreach on Distracted Driving CTW notes that there is strong public support for outreach on Distracted Driving and gives examples of national campaigns. This outreach campaign will be informed using the results of a planned observational survey and comes at the beginning of a new hands-free law in Alabama that became effective in 2024. Based on these factors, AOHS feels this will be a worthy countermeasure to effect change.
Performance Target and Link between Strategy and Target	C-1) Number of traffic fatalities (FARS) C-2) Number of Serious Injuries C-3) Fatalities Per 100 Million Vehicle Miles Driven Alabama will craft and administer a comprehensive, community-based communication and outreach program educating the public on the dangers of driving while distracted. AOHS is partnering with ADPH and creating a program that is modeled after their tobacco education curriculum, which has had great success in the state. Alabama feels that by looking at crash data and public feedback, an education program targeting overrepresented and underserved communities on the dangers of distracted will prove effective. The program will be modeled after the state health department's Tobacco Cessation education program.
Estimated Funding Source	402 and State Funding
Estimated 3-Year Funding	$1,000,000.00
Considerations to determine projects	Public Feedback, Crash Location Data will aid in identifying program locations.
Uniform Guideline/ NHTSA Assessment Recommendations and Description	Uniform Guidelines does not currently have a section for Distracted Driving. However, modeling this request after the Occupant Protection Program guidelines can give structure to planned activities. In No 20., the Outreach section lists the following components: Each State should encourage extensive statewide and community involvement in occupant protection education by involving individuals and organizations outside the traditional highway safety community.

	Representation from the health, business, and education sectors, and from diverse populations within the community, should be encouraged. Community involvement should broaden public support for the State's programs and increase a State's ability to deliver highway safety education programs. To encourage statewide and community involvement, States should: Establish a coalition or task force of individuals and organizations to actively promote use of occupant protection systems; Create an effective communications network among coalition members to keep members informed about issues; Provide culturally relevant material and resources necessary to conduct occupant protection education programs, especially directed toward young people, in local settings; and Provide material and resources necessary to conduct occupant protection education programs, especially directed toward specific cultural or otherwise diverse populations represented in the State and in its political subdivisions. States should undertake a variety of outreach programs to achieve statewide and community involvement in occupant protection education, as described below. Programs should include outreach to diverse populations, health and medical communities, schools and employers
Adjustments to countermeasure strategy for programming funds	Distracted Driving continues to be a focus of AOHS, and the planned activities connected to the strategy will be deployed in the same manner as the previous year, apart from the observational survey. This activity took place in FY 24 and provided the needed baseline data to incorporate into future strategies.

Project: Distracted Driving Communication Program

Project Number

2025-M8-DD-35

Primary Countermeasure Strategy ID

Decrease the amount of distracted driving crashes in Alabama

Intended Subrecipients

Alabama Department of Public Health – State Agency

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402	**Distracted Driving**	**$201,027.78**	**No**	**No**

Project Description

ADPH will work with schools and agencies across the state to share information and conduct trainings on Distracted Driving. Planned deployment of the educational programs will eventually cover all seven public health districts in the State. The first year of the program has the goal of conducting 48 events in the locations secured by the program coordinator. Target locations will be middle and high schools in Mobile, Montgomery, Birmingham, and Huntsville.

Project: Distracted Driving Paid Media

Project Number

2025-TF-PM-18

Primary Countermeasure Strategy ID

Decrease the amount of distracted driving crashes in Alabama

Intended Subrecipients

Auburn University – University

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
Trust Fund		**$160,740.00**	**No**	**No**

Project Description

The Auburn MPG will collaborate with ADECA/LETS in the creation of impactful graphic designs that communicate a concise message on the dangers of distracted driving and coordinate the distribution of digital tickets for high school events with Click Media throughout the state. A component of the variable messaging creatives will also contain pedestrian focuses on geolocations targeted for higher-than-normal occurrences. This campaign will be launched statewide at over 400 high schools in the state, which will cover every county in Alabama.

Program Area: Pedestrian Safety

Performance Measures in Program Area

	PERFORMANCE PLAN CHART FY24 -26 Highway Safety Plan Updated for FY 25		2019	2020	2021	2022	2023*
C-1	Traffic Fatalities	State	930	934	983	988	975
	Reduce the five-year average of 962 by .42% to 958 by 2026	Rolling Avg.	953	970	950	958	962
C-2	Serious Injuries in Traffic Crashes	State	5103	4782	5184	4836	4878
	Reduce the Number of Severe injuries in Traffic Crashes by 7.88% from 5381 to 4957 by 2026.	Rolling Avg.	7300	6505	5911	5381	4957
C-3	Fatalities/100M VMT	State	1.38	1.38	1.37	1.38	-
	Maintain fatality rate to at the current safety level of 1.34 by December 31, 2026.	Rolling Avg	1.36	1.38	1.34	1.35	-

			Base Years (Historical Data)					
	PERFORMANCE PLAN CHART FY24 -26 Highway Safety Plan		**2017**	**2018**	**2019**	**2020**	**2021**	**2022**
C-10	Pedestrian Fatalities	State	119	107	119	100	128	115
	Maintain pedestrian fatalities at the current safety level of 114 by December 31, 2026.	Rolling Avg.	98	108	113	113	115	114

Countermeasure Strategies in Program Area

Countermeasure Strategy	Bike/Ped Training
Problem being addressed and description of the Link between problem and strategy	Alabama's five- year average of Pedestrian Fatalities is 114 (2018-2022). Educating children on safe biking/walking behaviors can lower the rates of serious injuries and fatalities.
List of Countermeasure(s) and Justification	9.23 Elementary- Age Child Pedestrian Training (CTW 3 Stars)
Performance Target and Link between Strategy and Target	C-1) Number of traffic fatalities (FARS) C-2) Number of Serious Injuries C-3) Fatalities Per 100 Million Vehicle Miles Driven C-10) Pedestrian Fatalities Alabama is planning to fund a program that would train school age children on safe ways to bike and walk in their community and to school. The aim would be that this education was affect pedestrian behavior and prevent serious injuries and fatalities.
Estimated Funding Source	Section 402
Estimated 3-Year Funding	$40,000.00
Considerations to determine projects	Traffic Safety data, Crash Location Data, Planned Participation and Engagement Feedback
Uniform Guideline/ NHTSA Assessment Recommendations and Description	*"Uniform Guidelines for State Highway Safety Programs"* highlights the components of a comprehensive community pedestrian and bicycle communication program. "Communication programs and materials should be culturally relevant and multilingual as appropriate, and should address issues such as: • Visibility, or conspicuity, in the traffic system; • Correct use of facilities and accommodations; • Law enforcement initiatives; • Proper street-crossing behavior; • Safe practices near school buses, including loading and unloading practices; • The nature and extent of traffic-related pedestrian and bicycle fatalities and injuries;

	• Driver training regarding pedestrian and bicycle safety; • Rules of the road; • Proper selection, use, fit, and maintenance of bicycles and bicycle helmets; • Skills training of bicyclists; • Sharing the road safely among motorists and bicyclists; and • The dangers that aggressive driving, including speeding, pose for pedestrians and bicyclists."
Adjustments to countermeasure strategy for programming funds	This is a new countermeasure strategy for AOHS in addressing Pedestrian Safety. This strategy was selected after a NHTSA - facilitated assessment identified additional educational opportunities our state could state. The funding level was determined after researching start up program costs for training equipment and associated expenses.

Program Area: Police Traffic Services

Performance Measures in Program Area

	PERFORMANCE PLAN CHART FY24 -26 Highway Safety Plan Updated for FY 25		2019	2020	2021	2022	2023*
C-1	Traffic Fatalities	State	930	934	983	988	975
	Reduce the five-year average of 962 by .42% to 958 by 2026	Rolling Avg.	953	970	950	958	962
C-2	Serious Injuries in Traffic Crashes	State	5103	4782	5184	4836	4878
	Reduce the Number of Severe injuries in Traffic Crashes by 7.88% from 5381 to 4957 by 2026.	Rolling Avg.	7300	6505	5911	5381	4957
C-3	Fatalities/100M VMT	State	1.38	1.38	1.37	1.38	-
	Maintain fatality rate to at the current safety level of 1.34 by December 31, 2026.	Rolling Avg	1.36	1.38	1.34	1.35	-

			Base Years (Historical Data)					
	PERFORMANCE PLAN CHART FY24 -26 Highway Safety Plan		**2017**	**2018**	**2019**	**2020**	**2021**	**2022**
C-4	Unrestrained Passenger Vehicle Occupant Fatalities, All Seat Positions	State	398	354	352	384	354	370
	Maintain unrestrained passenger vehicle occupant fatalities, all seat positions at the current safety level of 363 by December 31, 2026.	Rolling Avg.	379	376	376	382	368	363
C-5	Alcohol-Impaired Driving Fatalities	State	265	249	272	236	281	262
	Maintain alcohol-impaired driving fatalities at the	Rolling Avg.	266	264	266	264	261	260

	PERFORMANCE PLAN CHART FY24 -26 Highway Safety Plan		Base Years (Historical Data) 2017	2018	2019	2020	2021	2022
	current safety level of 260 by December 31, 2026.							
C-6	Speeding-Related Fatalities	State	257	262	216	265	274	246
	Maintain speeding-related fatalities at the current safety level of 253 by December 31, 2026.	Rolling Avg.	262	264	260	266	255	253
C-9	Drivers Age 20 or Younger involved in Fatal Crashes	State	117	127	118	120	134	103
	Reduce drivers age 20 and younger involved in fatal crashes to 111 by December 31, 2026.	Rolling Avg.	119	124	129	129	123	120
C-10	Pedestrian Fatalities	State	119	107	119	100	128	115
	Maintain pedestrian fatalities at the current safety level of 114 by December 31, 2026.	Rolling Avg.	98	108	113	113	115	114

Countermeasure Strategies in Program Area

Countermeasure Strategy	Decrease traffic fatalities and serious injuries related to speeding, restraint deficiency, impaired driving, CMV caused, and pedestrian related crashes.
Problem being addressed and description of the Link between problem and strategy	Alabama's five-year average of traffic fatalities is 950 (2018-2022). High Visibility Enforcement is shown to be a strong deterrent in multiple focus areas covered in this year-round enforcement campaign.
List of Countermeasure(s) and Justification	High Visibility Enforcement (UG #19) Community Traffic Safety Program (UC #19)
Performance Target and Link between Strategy and Target	C-1) Number of traffic fatalities (FARS) C-2) Number of Serious Injuries C-3) Fatalities Per 100 Million Vehicle Miles Driven C-5) Alcohol-Impaired Driving Fatalities C-4) Unrestrained Passenger Vehicle Occupant Fatalities, All Seat Positions C-6) Speeding-Related Fatalities C-9) Drivers Age 20 or Younger Involved in Fatal Crashes C-10) Pedestrian Fatalities There will be four local and one state Selective Traffic Enforcement Program (STEP) projects during the coming year. Each of these STEP projects will focus on Hotspot crashes and the problem locations that have been identified across the state. One STEP project will take place in each of the four CTSP/LEL regions and the statewide STEP project will be conducted in conjunction with the ALEA. By conducting these STEP projects, additional efforts can be focused on the reduction of impaired driving related crashes and speed related crashes. The enforcement effort is evidence-based, with the objective of preventing traffic violations, crashes, and crash fatalities and injuries in locations most at risk. The enforcement program will continuously be evaluated, and the necessary adjustment will be made. CTSP/LEL – will provide coordination for the local implementations of the statewide evidence-based enforcement program, and the CTSP/LEL Coordinators and the administrative support for their offices will be maintained. The major focus of the CTSP/LEL efforts is involved with assuring the effective execution of focused evidence-based selective enforcement on alcohol and speed hotspots. This covers three of the four basic strategies recommended in *Countermeasures that Work* to reduce alcohol-impaired crashes and drinking and driving: (1) Deterrence: enact, publicize, enforce, and adjudicate laws prohibiting alcohol-impaired driving so that people choose not to drive impaired; (2) Prevention: reduce drinking and keep drinkers from driving; and (3)

	Communications and outreach: inform the public of the dangers of impaired driving and establish positive social norms that make driving while impaired unacceptable.
Estimated Funding Source	Section 402
Estimated 3-Year Funding	$12,000,000.00
Considerations to determine projects	Traffic Safety and Crash Location Data will assist in locating appropriate locations and partners for the project.
Uniform Guideline/ NHTSA Assessment Recommendations and Description	Guideline No. 15 from "Uniform Guidelines for State Highway Safety Programs" for State Highway Safety Programs states, "Each State, in cooperation with its political subdivisions, tribal governments, and other parties as appropriate, should develop and implement a comprehensive highway safety program, reflective of State demographics, to achieve a significant reduction in traffic crashes, fatalities, and injuries on public roads. The highway safety program should include a traffic enforcement services program designed to enforce traffic laws and regulations; reduce traffic-crashes and resulting fatalities and injuries; provide aid and comfort to the injured; investigate and report specific details and causes of traffic crashes; supervise traffic crash and highway incident clean-up; and maintain safe and orderly movement of traffic along the highway system. "
Adjustments to countermeasure strategy for programming funds	This is not a new countermeasure for AOHS. However, the state is increasing the expected 3-year funding amount to cover the additional amounts allocated for additional focus areas within the HVE efforts. These additional focus areas are pedestrian, large truck involved, and right of way crashes.

Project: Community Traffic Safety Program

Project Number

2025-FP-CP-12

Primary Countermeasure Strategy ID

Decrease traffic fatalities and serious injuries related to speeding, restraint deficiency, impaired driving, CMV caused, and pedestrian related crashes.

Intended Subrecipients

Enterprise State Community College- Post Secondary Education

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402	**Community Traffic Safety Program**	**$196,049.14**	**No**	**No**

Project Description

The major focus of the CTSP/LEL efforts is involved with assuring the effective execution of focused evidence-based selective enforcement on data determined hotspots. This project will cover a full time regional CTSP position to administer the overtime enforcement projects in their area. The CTSP/ LEL position services the Southeast Alabama region, which includes the counties of Autauga, Barbour, Bullock, Butler, Chambers, Clay, Coffee, Covington, Crenshaw, Dale, Geneva, Henry, Houston, Lee, Lowndes, Macon, Montgomery, Pike, Randolph, Russell, and Tallapoosa.

Project: Community Traffic Safety Program

Project Number

2025-FP-CP-24

Primary Countermeasure Strategy ID

Decrease traffic fatalities and serious injuries related to speeding, restraint deficiency, impaired driving, CMV caused, and pedestrian related crashes.

Intended Subrecipients

Franklin County Commission- Unit of Local Government

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402	**Community Traffic Safety Program**	**$227,050.50**	**No**	**No**

Project Description

The major focus of the CTSP/LEL efforts is involved with assuring the effective execution of focused evidence-based selective enforcement on data determined. This project will cover a full time regional CTSP position to administer the overtime enforcement projects in their area. The CTSP/ LEL position services the North Alabama region, which includes the counties of Colbert, Cullman, De Kalb, Fayette, Franklin, Jackson, Lamar, Lauderdale, Lawrence, Limestone, Madison, Marion, Marshall, Morgan, Walker, and Winston.

Project: Community Traffic Safety Program

Project Number

2025-FP-CP-6

Primary Countermeasure Strategy ID

Decrease traffic fatalities and serious injuries related to speeding, restraint deficiency, impaired driving, CMV caused, and pedestrian related crashes.

Intended Subrecipients

Mobile County Commission- Unit of Local Government

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402	**Community Traffic Safety Program**	**$210,951.60**	**No**	**No**

Project Description

The major focus of the CTSP/LEL efforts is involved with assuring the effective execution of focused evidence-based selective enforcement on data determined hot spots. This project will cover a full time regional CTSP position to administer the overtime enforcement projects in their area. The CTSP/ LEL position services the Southwest Alabama region, which includes the counties of Baldwin, Choctaw, Conecuh, Clark, Dallas, Escambia, Greene, Hale, Marengo, Mobile, Monroe, Perry, Sumter, Washington and Wilcox.

Project: Selective Traffic Enforcement Program

Project Number

2025-FP-PT-28

Primary Countermeasure Strategy ID

Decrease traffic fatalities and serious injuries related to speeding, restraint deficiency, impaired driving, CMV caused, and pedestrian related crashes.

Intended Subrecipients

Mobile County Commission- Unit of Local Government

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402	**Traffic Enforcement Services**	**$800,000.00**	**No**	**No**

Project Description

To implement the State's Evidence-Based Enforcement Plan, there will be four local Selective Traffic Enforcement Program (STEP) projects during the coming year as well as one statewide STEP project. Each of these STEP projects will focus on Hotspot crashes and the problem locations that have been identified across the state. One STEP project will take place in each of the four CTSP/LEL regions and the statewide STEP project will be conducted in conjunction with the Alabama Law Enforcement Agency (ALEA). By conducting these STEP projects, additional efforts can be focused on the reduction of impaired driving related crashes and speed related crashes. The Law Enforcement activity will be sustained for twelve (12) months. The enforcement effort is evidence-based, with the objective of preventing traffic violations, crashes, and crash fatalities and injuries in locations most at risk. The enforcement program will continuously be evaluated, and the necessary adjustment will be made. This STEP project will take place in the counties of Baldwin, Choctaw, Conecuh, Clark, Dallas, Escambia, Greene, Hale, Marengo, Mobile, Monroe, Perry, Sumter, Washington and Wilcox.

Project: Selective Traffic Enforcement Program

Project Number

2025-FP-PT-4

Primary Countermeasure Strategy ID

Decrease traffic fatalities and serious injuries related to speeding, restraint deficiency, impaired driving, CMV caused, and pedestrian related crashes.

Intended Subrecipients

Alabama Law Enforcement Agency – State Agency

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402	**Traffic Enforcement Services**	**$ 461,100.00**	**No**	**No**
BIL NHTSA 402 Supplemental	**Traffic Enforcement Services**	**$ 338,900.00**	**No**	**No**

Project Description

To implement the State's Evidence-Based Enforcement Plan, there will be four local Selective Traffic Enforcement Program (STEP) projects during the coming year as well as one statewide STEP project. Each of these STEP projects will focus on Hotspot crashes and the problem locations that have been identified across the state. One STEP project will take place in each of the four CTSP/LEL regions and the statewide STEP project will be conducted in conjunction with the Alabama Law Enforcement Agency (ALEA). By conducting these STEP projects, additional efforts can be focused on the reduction of impaired driving related crashes and speed related crashes. The Law Enforcement activity will be sustained for twelve (12) months. The enforcement effort is evidence-based, with the objective of preventing traffic violations, crashes, and crash fatalities and injuries in locations most at risk. The enforcement program will continuously be evaluated, and the necessary adjustment will be made. The enforcement will be intended to cover the entire state, but specific post locations are in Montgomery, Opelika, Alex City, Florence, Hamilton, Decatur, Huntsville, Gadsden, Birmingham, Jacksonville, Mobile, Grove Hill, Evergreen, Dothan, Troy, Selma, and Tuscaloosa.

Project: Selective Traffic Enforcement Program

Project Number

2025-FP-PT-21

Primary Countermeasure Strategy ID

Decrease traffic fatalities and serious injuries related to speeding, restraint deficiency, impaired driving, CMV caused, and pedestrian related crashes.

Intended Subrecipients

Franklin County Commission-Unit of Local Government

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402*	**Traffic Enforcement Services**	**$ 478,013.00**	**No**	**No**
FAST Act 402	**Traffic Enforcement Services No**	**$ 1,700,000.00**	**No**	**Yes**

* FAST Act funds will be spent before BIL funds.

Project Description

To implement the State's Evidence-Based Enforcement Plan, there will be four local Selective Traffic Enforcement Program (STEP) projects during the coming year as well as one statewide STEP project. Each of these STEP projects will focus on Hotspot crashes and the problem locations that have been identified across the state. One STEP project will take place in each of the four CTSP/LEL regions and the statewide STEP project will be conducted in conjunction with the Alabama Law Enforcement Agency (ALEA). By conducting these STEP projects, additional efforts can be focused on the reduction of impaired driving related crashes and speed related crashes. The Law Enforcement activity will be sustained for twelve (12) months. The enforcement effort is evidence-based, with the objective of preventing traffic violations, crashes, and crash fatalities and injuries in locations most at risk. The enforcement program will continuously be evaluated, and the necessary adjustment will be made. The law enforcement activity will be sustained for twelve (12) months in the counties of Colbert, Cullman, De Kalb, Fayette, Franklin, Jackson, Lamar, Lauderdale, Lawrence, Limestone, Madison, Marion, Marshall, Morgan, Walker, and Winston.

Project: Selective Traffic Enforcement Program

Project Number

2025-FP-PT-13

Primary Countermeasure Strategy ID

Decrease traffic fatalities and serious injuries related to speeding, restraint deficiency, impaired driving, CMV caused, and pedestrian related crashes.

Intended Subrecipients

Enterprise State Community College- Post Secondary Education

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL NHTSA 402	**Traffic Enforcement Services**	**$1,046,307.00**	**No**	**No**

Project Description

To implement the State's Evidence-Based Enforcement Plan, there will be four local Selective Traffic Enforcement Program (STEP) projects during the coming year as well as one statewide STEP project. Each of these STEP projects will focus on Hotspot crashes and the problem locations that have been identified across the state. One STEP project will take place in each of the four CTSP/LEL regions and the statewide STEP project will be conducted in conjunction with the Alabama Law Enforcement Agency (ALEA). By conducting these STEP projects, additional efforts can be focused on the reduction of impaired driving related crashes and speed related crashes. The Law Enforcement activity will be sustained for twelve (12) months. The enforcement effort is evidence-based, with the objective of preventing traffic violations, crashes, and crash fatalities and injuries in locations most at risk. The enforcement program will continuously be evaluated, and the necessary adjustment will be made. This STEP project will take place in the counties of Autauga, Barbour, Bullock, Butler, Chambers, Clay, Coffee, Covington, Crenshaw, Dale, Geneva, Henry, Houston, Lee, Lowndes, Macon, Montgomery, Pike, Randolph, Russell, and Tallapoosa.

Program Area: Planning & Administration

Description of Highway Safety Problems

In a coordinated effort over the past four decades, Alabama has been committed to supporting the various NHTSA focus areas. It has done this by meeting the requirements for Section 402 funding since the creation of NHTSA in the late 1960s. AOHS is organized with a central staff and four regional Community Traffic Safety Program (CTSP) Coordinators who report directly to the Governor's Representative. The CTSP Coordinators work closely together with the AOHS central administration to implement all programs that involve local police and county agencies as well as safety advocates.

In order to manage the AOHS's programs, staff are employed at the state level. Planning and Administration (P&A) costs are those direct and indirect expenses that are attributable to the overall management of the State's HSP. Costs include salaries and related personnel benefits for the GRs and for other technical, administrative, and clerical staff in the SHSOs. P&A costs also include office expenses such as travel, equipment, supplies, rent, and utilities necessary to carry out the functions of the SHSO. The level of funding to accommodate the state office's needs is evaluated each year, just as in other program areas.

Alabama's HSP has been consistent over the past decade with the following established attributes:

- **Vision:** To create the safest surface transportation system possible, using comparable metrics from other states in the Southeast to assess progress in maintaining continuous recognizable improvement.
- **Primary ideals:** To save the most lives and reduce the most suffering possible.
- **Countermeasure selection approach:** To apply an *evidence-based* approach that draws upon detailed problem identification efforts to quantify and compare alternatives that are given within the NHTSA document *Countermeasures That Work*.
- **Primary focus:** To implement Evidence-Based Enforcement (E-BE), concentrating on enforcement with special emphasis on speed reduction, impaired driving elimination and increasing the use of restraints; using data that are centered around the hotspot analyses performed for each of these countermeasure subject areas.
- **Implementation Approach:** To stress the necessity for a cooperative effort that involves teamwork and diversity, including all organizations and individuals within the state who have traffic safety interests.
- **Participant mission:** To focus crash reduction countermeasures on the locations with the highest potential for severe crash frequency and severity reduction, as identified for speed and impaired driving, which were the largest two causes of fatal crashes, and for restraint non-use, which is the greatest factor causing increased crash severity.

Project: Planning and Administration

Project Number
PA-25-FP-PA
Primary Countermeasure Strategy ID
Planning & Administration
Intended Subrecipients
NA

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL Act NHTSA 402	Planning and Administration	$700,000.00	$700,000.00	No

Project Description

P & A will include both direct and indirect costs for personnel with their associated costs. Personnel in the direct cost category include the Highway Safety Unit Chief who spends 100% of her time with NHTSA programs, as well as a Highway Safety Program Manager who charges time for PP&E activities and related activites. Personnel in the indirect cost category will use ADECA Indirect Cost Rate, which includes the LETS Division Chief/GR, an Administrative Assistant, the LETS Accounting Unit Manager and one Accounting Staff Member devoted to highway traffic safety. All P & A costs will be split 50% Federal and 50% State. The activities of office staff will cover the state and its' communities.

Project: Planning and Administration

Project Number

PA-25-FP-CP

Primary Countermeasure Strategy ID

Planning & Administration- Program Management Costs

Intended Subrecipients

NA

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
FAST Act 402	**Community Traffic Safety Program**	**$200,000.00**	**$200,000.00**	**Yes**

Project Description

In addition to P&A support, we have a State Highway Safety Program Supervisor as well as two Program Managers who will work as a centralized point of contact for regional CTSP/LEL offices and act as liaison to municipal, county, state and federal officials or individuals regarding the administration so that program goals and objectives of the 402 Highway Safety program are accomplished effectively within ADECA and NHTSA guidelines. The Program Supervisor or Manager reviews, monitors and recommends program expenditures, assists in the development of program plans, budgets: reviews and recommends grants, contracts and related budgets, assists in the development and reporting of program policies and procedures as necessary to ensure compliance with appropriate rules, regulations and procedures. The activities of office staff will cover the state and its' communities.

Program Area: Young Driver – (Teen Traffic Safety Program)

Problem Identification

Alabama young driver are ages 16-24 and caused 61.0% of crashes they are involved in, from 2018 to 2022. For the same time frame, young drivers were the causal driver for 64.6% of fatal crashes they were involved in. An average of 60,914 young drivers are involved in crashes each year. This age group is also involved in 230 fatal crashes, on average, each year. Our Alabama Young Driver Program will track trends, demographics, and behaviors our traffic safety professionals will use to mediate crash frequencies as well as crash severities.

Drivers and Restraint Usage: 2018-2022 Young Driver Involved Fatal Crashes

Young drivers in Alabama were unrestrained in 34.4% of the fatal crashes they were involved in. By contrast, only 26.3% of drivers, not ages 16-24, were unrestrained in fatal crashes. Young drivers, who were killed in a crash, were unrestrained 55.5% of the time. Likewise, drivers killed from other age ranges were unrestrained 43.5% of the time. This highlights the need for seat belt awareness for young drivers.

Young Driver Race and Gender: 2018-2022 Young Driver Involved Fatal Crashes

White male young drivers accounted for 43.8%, the highest proportion, of any young driver involved in a fatal crash. The second highest proportion is Black/African American males at 21.4%. Female young drivers accounted for only 29.2% of all young driver involved fatal crashes. Male young drivers accounted for 70.8% of all young drivers involved in fatal crashes.

Crash Details: 2018-2022 Young Driver Involved Fatal Crashes

The peak time for fatal crashes involving a young driver was between 8:00pm and 8:59pm. Additionally, over 50% of fatal crashes involving a young driver occurred between 6:00pm and 5:59am. Peak Time of day: 8:00pm to 8:59pm.

Young drivers were involved in 1.8% of crashes with impairment as the primary contributing circumstance. Impairment was the primary contributing circumstance in 9.8% of fatal crashes involving a young driver. Aggressive operation was cited in 1.7% of all young driver involved crashes and 8.7% of fatal crashes involving young drivers. Over the speed limit was the primary contributing circumstance in 1.5% of all crashes involving a young driver and 14.1% of fatal crashes involving a young driver.

Countermeasure in Program Area

Countermeasure Strategy	Youth Programs
Problem being addressed and description of the Link between problem and strategy	The five-year average (2019-2022) of drivers under 21 years of age fatalities in Alabama is 120. While this is 12.5% of the total fatalities in the same time period, young drivers are shown to be overrepresented as the causal driver in fatal crashes.
List of Countermeasure(s) and Justification	According to NHTSA's CTW, Eleventh Edition, young drivers are at a greater risk of collisions for two reasons: inexperience and a proclivity towards risk-taking behaviors. Situations identified as being particularly risky for younger drivers include the following: • Nighttime driving; • Driving under the influence of substances; • Passenger interactions; • Seat belt use; and • Cell phone use; To address the enhanced risk young drivers faced when placed in the aforementioned situations, Alabama will implement a peer-to-peer, school-based teen traffic safety program designed to help teens identify those behaviors that cause them the greatest risk on the road and empowers them to take positive action. Peer-to-peer programs promote the adoption of safe behaviors by both the teens delivering the intervention and the teens receiving it. This will be achieved through the implementation of Students Against Destructive Decisions (SADD) in Alabama schools. SADD has listed traffic safety as one of its three core issues (the others are substance abuse and personal health and safety) in recognition of the fact that motor vehicle collisions are among one of the leading causes of death for teens. The program focuses on "social norms" or "normative feedback" to provide students with accurate information about impaired driving. SADD members are expected to model positive behaviors-wearing their seatbelts, refraining from underage drinking and not texting and driving, etc. - to convey the social norm that "most teens are doing the right thing".

	Although there is insufficient evidence of the efficacy of the SADD program, research has shown that teens who regularly participate in activities designed to help their peers and others are less likely to engage in risky behaviors (Fischer, 2019) such as underage drinking, drinking and driving, speeding etc. SADD provides not only an outlet for teens to participate in positive social activities, but it also helps teens build skills to resist peer pressure that could result in them engaging in unsafe and unhealthy behaviors (Fischer, 2019). Additionally, NHTSA-funded research on the effectiveness of SADD's efforts to address impaired driving through school-based peer-to-peer education found that anti-drinking and anti-drinking/driving activity was greater among schools with peer-to-peer organizations like SADD, and the students in those schools were more likely to have positive attitudes about refraining from drinking and driving (Fischer, 2019). Given the information above and armed with the knowledge that young people often respond better to messages from their peers, a successful Youth/Teen Program should adopt a peer-to-peer approach, which is the hallmark of the SADD program. Reference: Fischer, P. (2019, March). Peer-to-peer Teen Traffic Safety Program Guide (Report No. DOT HS 812 631). Washington, DC: National Highway Traffic Safety Administration.
Performance Target and Link between Strategy and Target	C-1) Number of traffic fatalities (FARS) C-2) Number of Serious Injuries C-3) Fatalities Per 100 Million Vehicle Miles Driven C-9) Drivers Age 20 or Younger involved in Fatal Crashes Alabama will craft and administer a comprehensive, community-based communication and outreach program educating young adults on the dangers of distracted driving, driving while impaired, and not wearing a seat belt. Alabama feels that by looking at crash data and public feedback, an education program targeting overrepresented and underserved communities on the dangers of risk-taking behavior by our youngest group of drivers will prove effective.

Estimated Funding Source	402
Estimated 3-Year Funding	$400,000.00
Considerations to determine projects	Public Feedback, Crash Location Data will aid in identifying program locations.
Uniform Guideline/ NHTSA Assessment Recommendations and Description	The AOHS will partner with SADD Inc. through a grant project intended to empower young people to successfully confront the risks and pressures they face daily, particularly as they relate to traffic safety. Peer-to-peer education will be administered through student-run school or community-based chapters. AOHS and SADD Inc. will conduct Problem ID to determine strategic locations for new SADD chapters and/or increased SADD activity. As outlined in Highway Safety Program Guideline No. 4: • The AOHS and its partners will implement a comprehensive communication plan/campaign that Identifies the youth audiences at particular risk and develops appropriate messages; Provides culturally competent materials; Informs novice drivers about underage drinking and zero tolerance laws; and o Informs the public of the role of parental monitoring/involvement .
Adjustments to countermeasure strategy for programming funds	This is a new countermeasure strategy AOHS selected as a way to address growing concerns about the young driver demographic.

Project: Young Driver Education and Outreach

Project Number

2025-FP-PI-25

Primary Countermeasure Strategy ID

Communications and Outreach: Distracted Driving

Youth Program: Underage Drinking and Drinking and Driving Prevention

Intended Subrecipients

SADD, Inc.

Funding Source	Eligible Use of Funds	Estimated Funding Amount	P&A	1300.41(b)
BIL Act NHTSA 402	Project will expand the peer-to-peer SADD program in Alabama high schools, host community outreach events, pilot a program to reduce distracted walking and driving among vulnerable communities.	$200,000.00	$0	No

Project Description

AOHS will partner with SADD to grow, re-engage, and maintain active, enrolled AL SADD chapters during FY25 to enhance sustainability in their home districts, training youth advocates working to address traffic safety in peer-to-peer methods on the local across the state. The MySADD platform will measure chapter enrollment and engagement, maintaining and growing the Alabama SADD network. These chapter will establish relationships with local law enforcement agencies, community coalitions, driving schools, and other partners to increase the reach and capacity of SADD across the state. Target counties will be in Tusacaloosa, Jefferson, Montgomery, Mobile, and Macon.

Appendix A- AIDPC Charter

Charter of the Alabama Impaired Driving Prevention Council (AIDPC)

Founded July 2013

PREAMBLE

The impact that impaired driving has on the families of Alabama and its citizens are both devastating and preventable. It is the preventable nature of impaired driving cases that is at the core of the Alabama Impaired Driving Prevention Council. It is the Council's ambition that its formulation will serve to demonstrate that Alabama is resolute about attacking this issue and achieving the goal of zero fatalities at the hand of impaired drivers.

ARTICLE ONE: PURPOSE

The Alabama Impaired Driving Prevention Council (AIDPC) serves as a Driving Under the Influence (DUI) workgroup. It provides leadership and guidance for citizens seeking to significantly reduce the number of collisions, injuries, and deaths caused by impaired drivers. It provides qualitative input and assistance to the legislature, state agencies, and other organizations combating impaired driving and its consequences.

ARTICLE TWO: MEMBERSHIP

2.1 MEMBERS: The AIDPC shall be comprised of agencies, offices, and organizations from public and private sectors of state leadership, each of whom possess a demonstrated interest in impaired driving prevention. The following agencies, offices, and organizations are members:

- Alabama Department of Economic and Community Affairs/Law Enforcement & Traffic Safety Division (ADECA/LETS)
- Alabama Beverage Control Board (ABC)
- Alabama District Attorneys Association (ADAA)
- Board of Pardons and Paroles
- Court Referral Program
- Department of Forensic Sciences
- Department of Public Safety
- Member(s) of the Alabama Legislature
- Mothers Against Drunk Driving (MADD)
- State Coordinator for the Drug Recognition Expert (DRE) Program
- Students Against Destructive Decisions (SADD)
- Traffic Safety Resource Prosecutor (TSRP)
- At least one of the following:
    - Assistant District Attorney

    - Certified DRE
    - District Court Judge
    - Municipal Court Judge
- The chairperson may appoint additional members on an as-needed basis. Any additional member(s) shall be confirmed by a two-thirds committee vote.

2.2 TERM: Each member will serve a term of two calendar years and may be reappointed.

2.3 VOTING: Each member will have one vote. For a vote to take place, representatives of at least eleven members must be physically present.

2.4 RESIGNATION: Any member shall have the right to resign his or her position on the AIDPC. Any resignation should be provided to the Chairman with 30 days' notice. The Chairman may request that another designee be appointed to replace a member for poor attendance.

2.5 DESIGNEES: Designees are permitted and shall have full voting power, except that there will be no designees for the two immediate past chairmen and vice chairmen.

ARTICLE THREE: MEETINGS

3.1 REGULAR MEETINGS: The AIDPC shall meet semi-annually at a time and location specified by the chairman.

3.2 SPECIAL MEETINGS: In addition to semi-annual meetings, special meetings for a stated purpose may be called by the chairman.

3.3 NOTICE: Notice of each meeting will be given at least seven calendar days in advance, by mail and/or email.

3.4 LOCATION: Meetings shall be held at a location place chosen by the chairman, with due consideration given to the convenience of all members and staff suitable for the occasions.

3.5 PROCEDURE: AIDPC shall follow parliamentary procedure as set forth in Robert's Rules of Order, newly revised, except when they conflict with this charter.

3.6 MINUTES: AIDPC shall take and maintain meeting minutes, including a record of the members present.

3.7 PLANNING: The Office of Prosecution Services will serve as a resource and provide logistical support for meeting location, preparations, notice, and minutes.

3.8 ATTENDANCE: Member organizations are allowed to have multiple representatives attend meetings. On such occasions the member organization must designate one person as the voting member.

3.9 APPROVAL: Members will develop and approve the Impaired Driving Strategic Plan.

ARTICLE FOUR: OFFICERS

4.1 CHAIRMAN AND VICE CHAIRMAN: There shall be a chairman and vice chairman. The chairman and vice chairman shall serve for a period of two years and may be reelected.

4.2 SECRETARY: The duties of the Secretary shall serve for a period of two years and may be reelected.

4.3 VACANCIES: Should a chairman resign prior to the expiration of his or her term, the vice chairman shall automatically become chairman and shall serve until the predecessor's term would have expired. Should a vice chairman resign prior to the expiration of his or her term, the chairman shall appoint an interim vice chairman to serve until the next regular meeting, at which time the members shall elect a vice chairman to serve until the predecessor's term would have expired.

ARTICLE FIVE: COMMITTEES

5.1 COMMITTEES: The following committees should be organized, chaired, and populated as necessary to accomplish the goals of the AIDPC:

- Education/Prevention
- Enforcement/Prosecution/Adjudication
- Legislation
- Treatment/Rehabilitation/Diversion

5.2 SPECIAL COMMITTEES: The chairman shall appoint or disband such special committees as necessary for the efficient operation of the AIDPC.

5.3 EXECUTIVE COMMITTEE: There shall be an Executive Committee, comprised of the following persons, to accomplish the goals of the AIDPC.

- Chairman
- Vice Chairman
- Immediate past chairman
- Immediate past vice chairman
- Four committee chairmen or designees

5.4 COMMITTEE VOTING: Member organizations may be represented on multiple committees and may have designees attend committee meetings. Each member organization will have one vote per committee.

ARTICLE SIX: AMENDMENTS

6.1 This charter may be altered, amended, or repealed and a new charter may be adopted by a two-thirds vote of the membership representing a quorum thereof at any regular meeting of the AIDPC when a proposed amendment has been distributed with notice of such meeting.

6.2 For purposes of this Article, one-third of the membership plus one member constitute a quorum.

State of Alabama

Impaired Driving Strategic Plan 2025-2027

June 1, 2024

State of Alabama
Impaired Driving Strategic Plan

Executive Summary

The purpose of the Impaired Driving Strategic Plan (IDSP) is to provide overall guidance to all agencies and private groups who are involved with various aspects of reducing the problems caused by Impaired Driving (ID). Specifically, the Alabama Impaired Driving Prevention Council (AIDPC) was formed not only to develop this plan but to guide its implementation and future enhancements. This strategic plan has been updated triennially, with the most recent being the current document for 2024 to 2027 that has the responsibility to provide ongoing governance to the development of the Plan and its execution.

Terminology. Throughout this plan, the term *impaired driving* (ID) will refer to operating a motor vehicle while affected by alcohol and/or other drugs, including, but not limited to, prescription drugs, over-the-counter medicines, or illicit substances. ID should be viewed as an over-arching term that will encompass what in the past has been referenced by Driving Under the Influence (DUI), Driving While Intoxicated (DWI), substance abuse, and other descriptive terms. These alternative descriptive terms will not be used unless they are necessary to focus on some aspect of the ID problem. For example, some quotations from legal documents will use DUI, and in those cases, there should be no distinction made between ID and DUI. The current document will be referenced by the acronym IDSP (Impaired Driving Strategic Plan), i.e., the strategic plan for reducing the occurrence of ID, including all preventative, criminal justice, drug misuse and administrative aspects involved with ID issues. Finally, this document was created and approved under the auspices of the Alabama Impaired Driving Prevention Council (AIDPC).

This Executive Summary will present an overall top-down view of the 2025-2027 Impaired Driving (ID) Strategic Plan. The plan is organized according to the recommendations of NHTSA Uniform Guidelines for State Highway Safety Programs (No. 8, November 2006), and thus has the major topics of:

- Program Management and strategic planning
- Prevention, including community engagement and coalitions
- Criminal Justice Systems
- Communications Programs
- Alcohol and other Drugs Misuse: Screen, Assessment, Treatment and Rehabilitation
- Program Evaluation and Data Collection

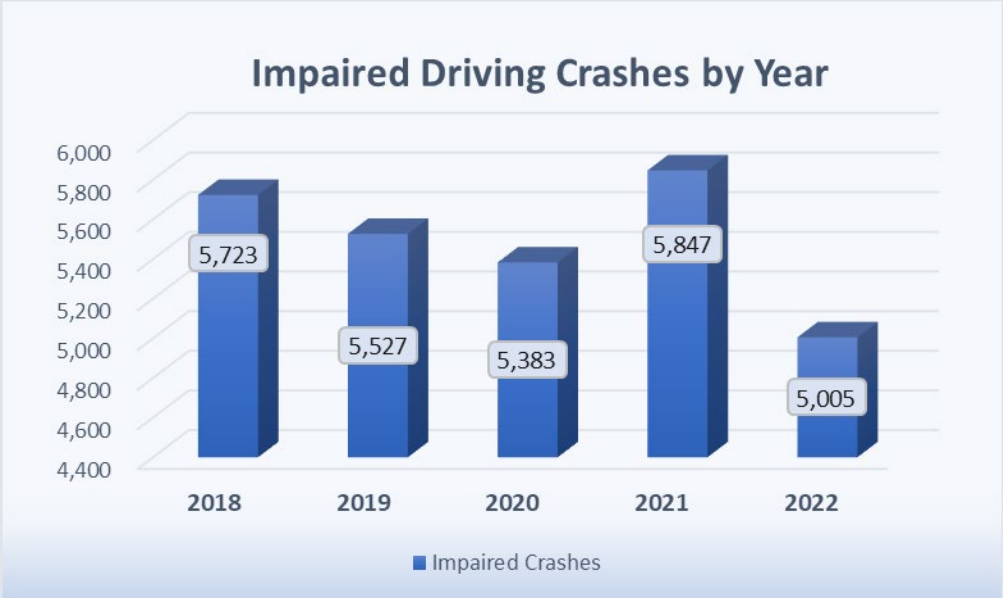
This summary will be organized according to these topical areas, additionally the Strategic Plan will begin with a review of Alabama's problem identification.

While Alabama has not been as permissive as many states in their marijuana laws, it has seen a general increase in ID caused by drugs as opposed to alcohol. The proportion of drug crashes to total ID crashes has increased from its low of 14.0% in 2006 to the most recent high of 30.2%. The proportion of drug crashes to total ID crashes has been more than 30% since 2015. This alarming trend is indicative of the National increased social acceptance of drug use. The under-reporting of drug cases must be much higher than alcohol cases since there is a general inability of most law enforcement officers to identify many of the drug-related ID cases. Several recommendations given in this plan will address this disturbing trend.

The challenge can be seen in the raw numbers of Impaired Driving crashes (including both alcohol and drug impairment as given in the following table and graph).

Number of Reported ID Crashes (Alcohol or Other Drugs) Most Recent Five Years

2018	2019	2020	2021	2022
5,723	5,527	5,383	5,847	5,005



The plan gives a breakdown of these raw numbers and shows the trends over the last 17 years in a variety of ways. These show that we are not dealing with a stable issue, but one that is dynamically changing over time, and which will require a planning process that is adapting to this challenge. There appears to be a favorable downward trend in ID crashes since 2018 to 2022, in exception to 2021 which recorded the highest number of ID crashes in the last five years.

The challenge can be analyzed when we view the general categories of ID crashes, and those categories that are over-represented, which is given in Section 1.1.3. Some of the more interesting findings of these problem identification studies are as follows:

- There was a significant reduction in the proportion of fatal crashes caused by ID in FY2017; a further analysis indicated that this was the result of speed reduction on the part of ID drivers.
- While speed decreases, the risk-taking of not being properly restrained remained about the same, with ID drivers being about 9 times more likely to be unrestrained than non-ID drivers.
- All the geographical analyses continued to point to the rural areas, especially for ID fatal crashes.
- County roads had well over twice their expected proportion of ID crashes, while all other roadway classifications were under-represented.
- Time of day and day of the week emphasize the typical times of alcohol and drug use: weekends beginning Friday night and ending Sunday morning had the highest proportions.
- ID caused crashes are under-represented in young drivers up until age 21. At 23, the first significant over-representation takes place and continues to age 55. There is a bi-modal distribution of: (1) 21 through about 35, and (2) 36 to 55. The first of these might be classified as largely social drinkers; while it is inescapable that the middle-aged caused ID crashes would largely have problems with substance abuse.
- The large number of ID offenders that do not have valid drivers' licenses indicates that the suspension of drivers' licenses may not be as effective as is desired.

To address these challenges, Section 1.2 shows that the AIDPC has adopted the following mission statement and short-term goal statement:

Mission Statement: *To maximize the impact of a harmonious collaborative effort to reduce the reduction of ID fatalities, injuries and crashes to the lowest level possible, and ultimately to eliminate them altogether.*

The following short-term goal is consistent with this overall mission statement:

Immediate Short-Term Goal: *Maintain the alcohol-impaired driving fatalities at the five-year baseline average of 260 (2017-2021) in 2026.*

While it may not seem ambitious to set a goal to simply maintain fatalities, this goal is consistent with the FY24-26 HSP, and takes into consideration more recent state data and other contributing factors and challenges to the fatality number.

Section 1.3 provides five guiding principles in the development of the IDSP:

- ID is a recognized public safety and health problem that has an enormous impact on our economy and the wellbeing of our citizens.
- While the AIDPC recognizes the many effective efforts made over past decades to address the problems created by ID, the large number of highway fatalities and injuries caused by ID indicates that these efforts should be reviewed and modified or augmented appropriately to provide for continuous improvement.
- There are many partners in these efforts, all of whom have strong motivation to assist in the solution or mitigation of the ID problem, and as such, there is a critical need to coordinate these efforts so that they are not fragmented or even working at cross-purposes.
- The ID problem cannot be addressed by emphasis on only one aspect of the solution; in the past, a lack of a balanced approach has tended to be counterproductive; thus, a guiding principle is the respect that all involved disciplines must have for efforts outside of their direct purview.
- The problem is largely a cultural one, and while strong deterrent and punitive measures are an essential part of the solution, they must be consistent with an overall change in the cultural attitudes that provide the environment in which ID can exist.

Section 1.4 shows that the efforts of the AIDPC are closely coordinated with those of the Alabama Department of Economic and Community Affairs (ADECA) in the development of its Highway Safety Plan (HSP) as well as those within ALDOT's SHSP efforts. The following recommendations were made within SHSP document:

- To reduce impaired driving, a multidisciplinary approach involving law enforcement, education and community outreach, and information systems will strategically deploy resources, programs, and strategies to reduce the occurrence of the behavior as well as reduce the severity of the outcome when the behavior does occur.
    - Continue impaired driving enforcement efforts throughout the state through ongoing enforcement strategies to reduce impaired driving.
    - Train additional impaired driving enforcement experts.
    - Continue impaired driving public information campaigns and educational efforts for all drivers in schools and at public events.
    - Utilize available data to best direct resources towards areas with increased occurrence of impaired driving

The remainder of the Executive Summary will follow the overall structure of the IDSP, which includes the following broad topical areas:

- Program Management and strategic planning
- Prevention (including community engagement and coalitions)
- Criminal Justice Systems
- Communications Programs
- Alcohol and other Drugs Misuse: Screen, Assessment, Treatment and Rehabilitation

- Program Evaluation and Data Collection

Program Management and Strategic Planning

The administrative and management characteristics are organized into the following categories:

- Alabama Impaired Driving Prevention Council (AIDPC)
- Strategic Planning Organization
- Program Management
- Resources
- Data and Records
- Communication Program

These will form the basis for this summary. For more details see the subsection numbers for each of the categories that are given below.

2.1 Alabama Impaired Driving Prevention Council (AIDPC)

The AIDPC was assembled to develop and approve this plan and to assure that all aspects of the impaired driving problem were considered, and that as many alternative countermeasures as possible would be evaluated. AIDPC members represent agencies and organizations with a working knowledge and deep understanding of the various parts of Alabama's impaired driving prevention system and how these parts interrelate. Participants are given in Table 2.1 of Section 2.1

2.2 Strategic Planning Organization

Figure 2.2 presents the overall organization for the impaired driving strategic plan development within the State. The major entities involved with this include:

- The Alabama Department of Economic and Community Affairs (ADECA), which is the administrating agency for the NHTSA traffic safety grants, the Community Traffic Safety Program Coordinators (CTSPs), and the state Traffic Records Coordinating Committee (TRCC), all of which operate within ADECA oversight.
- The committee that administers and develops the Statewide Highway Safety Plan (SHSP), which represents all agencies in state government that are involved in traffic safety, and thus this would involve all relevant state agencies in this process.
- Medical and Treatment Agencies also participate in the AIDPC.
- Advocacy Groups, i.e., non-governmental entities that have traffic safety interests, especially in the area of impaired driving.

2.3 Program Management

The plan provides an essential component of the control process; it is obvious that a plan alone is not going to solve the problem. The planned projects and programs must be effectively implemented, which requires an effective management control process. Using the plan as a road map, management must determine if adequate progress is being made in all projects toward their goals. To accomplish this regular (quarterly, or as needed) meetings of the AIDPC are conducted with representatives of the entities that are performing projects under the plan.

2.4 Resources

The AIDPC planning effort is being performed under the assumption that sufficient funding, staffing, and other resources to support impaired driving programs will be forthcoming. The Bipartisan Infrastructure Law (Infrastructure Investment and Jobs Act) has given the assurance of certain funding given that the State meets the planning and other legal requirements. One of the major roles of the AIDPC is to assure that the planned programs should achieve self-sufficiency by transferring as much of their costs as possible to impaired drivers themselves.

2.5 Data and Records

This topic is covered in detail in Section 7 and further illustrated in Appendices A and B. All management and planning functions have been and will continue to be both evidence and data driven. This process starts with an analysis of historical data in a problem identification that has the broadest possible perspective. It searches all Alabama crash data to answer the "who, what, where, when, and why," as well as the "how many" in all aspects of ID (all drugs including alcohol) related crashes.

2.6 Communication Program

The Communication Program is detailed in Section 5 and summarized in Section 2.6. The following is a partial list of ongoing efforts by the following agencies:

- The Alabama Department of Economic and Community Affairs (ADECA) has been involved with the development of Public Service Announcements (PSAs);
- The Alabama Law Enforcement Agency's (ALEA), Public Affair Officers/External Affairs responds to requests from the media for information and participated in news-related events as well as in holiday and other special programs;
- The Traffic Safety Research Prosecutor (TSRP) maintains a web site that provides general ongoing information on courses conducted by the TSRP; and
- The Alabama Department of Public Health (ADPH) uses multiple platforms to inform the public about impaired driving public health implications.
- Mothers Against Drunk Driving (MADD) uses multiple platforms to provide information and services to those impacted by impaired drivers.

Prevention

The State's prevention program has the goal of proactive reduction impaired driving through public health approaches, including altering social norms, changing risky or dangerous behaviors, and creating safer environments. To accomplish this, the following objectives were established, and they have formed the basis for the activities in this regard:

- Apply formal and informal behavioral modification methods that center around the negative effects of alcohol and other drugs;
- Limit the availability of alcohol and other drugs, especially to those who are most apt to abuse them;
- Discourage or prevent those who are impaired by alcohol and other drugs from driving;
- Assure responsible alcohol service practices;
- Create and support transportation alternatives;
- Implement community-based programs:
    - In schools,
    - At work sites,
    - In conjunction with medical and health care facilities, and

- By community coalitions.

Prevention efforts will be directed toward populations at greatest risk as determined by the problem identification efforts that were conducted in conjunction with the planning effort.

Criminal Justice Approaches

This set of countermeasure approaches includes the entire criminal justice system, including laws, enforcement, prosecution, adjudication, criminal and administrative sanctions, and related communications. The goal is to achieve both *specific* and *general* deterrence defined as:

- **Specific deterrence** focuses on individual offenders and seeks to ensure that impaired drivers will be detected, arrested, prosecuted, and subject to swift, sure, and appropriate sanctions, and thereby reduce recidivism;
- **General deterrence** seeks to increase the public perception that impaired drivers will face severe consequences, thus discouraging all individuals from driving impaired.

A multidisciplinary approach and close coordination among all components of the criminal justice system was sought in developing this plan. The plan discusses these efforts according to the following categories:

- Laws,
- Enforcement,
- Prosecution,
- Adjudication,
- Administrative Sanctions and Support Programs, and
- Training.

Substance Abuse: Screen, Assessment, Treatment, and Rehabilitation

This Plan recognizes that impaired driving frequently is a symptom of a larger alcohol or other drug problems. Many first-time impaired driving offenders and most repeat offenders have some such dependency problems. Without appropriate assessment and treatment, these offenders are likely to repeat their crimes. In addition, alcohol use leads to other injuries and health care problems. Frequent visits to emergency departments present opportunities for interventions, which might prevent future arrests or motor vehicle crashes and result in decreased alcohol consumption and improved health.

Section 6 describes goals of encouraging employers, educators, and health care professionals to implement systems to identify, intervene, and refer individuals for appropriate substance abuse treatment. This effort is organized according to the following components:

- Screening and assessment
    - Within the criminal justice system
    - Within medical and health care settings

- Treatment and Rehabilitation
- Monitoring of Identified Past Impaired Drivers.

Program Evaluation and Data Collection

Section 7 describes the processes that the state uses in its production and use of data to assure that all programs are data-evidence based. The State currently has easy access through the Critical Analysis Reporting Environment (CARE) to reliable data sources (e.g., crash reports and citations) that are being analyzed for problem identification, evaluation, and program planning. Several different types of evaluations are being performed to effectively measure progress, to determine program effectiveness, to plan and implement new program strategies, and to ensure that resources are allocated appropriately.

Problem identification is performed on an annualized basis, and the most recent are given in Appendices A and B. Appendix A is a list of those locations in the state that have the highest frequency of impaired driving crashes by roadway classification. Appendix B is a general problem identification as described below. This is also made available to the public through the SafeHomeAlabama.gov web site: http://www.safehomealabama.gov/caps-special-studies/

Generally, problem identification systematically goes through the entire crash records database comparing impaired driving crash data with all other crash data to find those attributes that are significantly over-represented (e.g., times, ages, contributing circumstances and about 200 other attributes). This is translated into useful information for optimizing both the selection of available countermeasures and the improvement of those countermeasures that are selected. Section 7.1 presents details of the problem identification process.

Evaluations generally fall into two categories: administrative and effectiveness. *Administrative evaluations* determine if planned activities for given projects were performed, independent of what effects it might have had. *Effectiveness evaluations* strive to determine the crash or severity reductions that result from any given countermeasure project. The plan calls for the use of CARE to provide effectiveness evaluations on as many of the countermeasures given in this plan as resources will allow. The evaluation process is detailed in Section 7.2.

Appendices

The plan contains the following appendices

- A – Specific Location Problem Identification: lists of those locations that had the highest volumes of impaired driving crashes by roadway classification.
- B – General Problem Identification Results: the results of the analysis of all crash records attributes to determine those for which impaired driving is over-represented.

- C – Adult Drug Court Map: gives the number of adult drug courts operating within each county.

State of Alabama
Impaired Driving Strategic Plan

1.0 Alabama's Impaired Driving (ID) Challenge

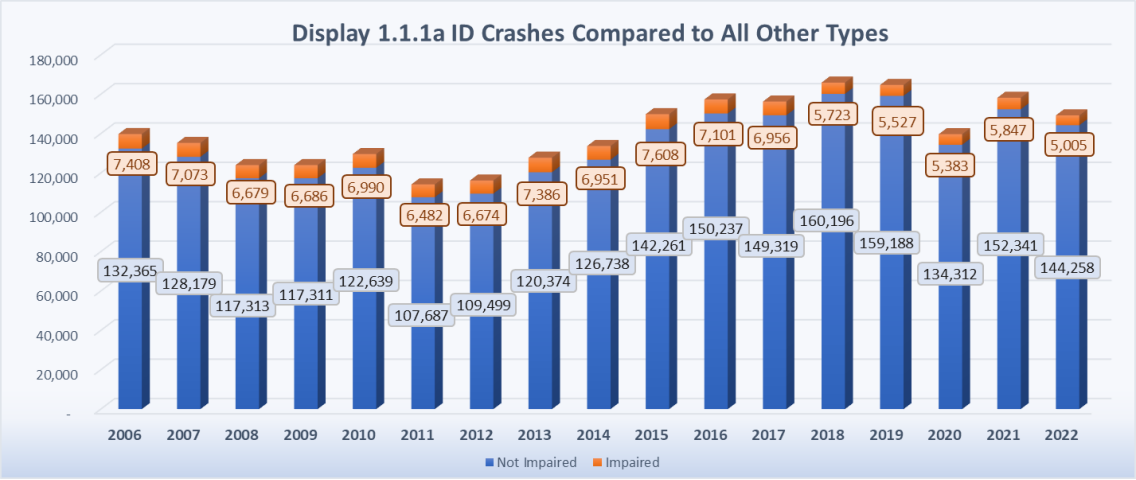
Terminology. Throughout this plan, the term *impaired driving (ID)* will refer to operating a motor vehicle while affected by alcohol and/or other drugs, including prescription drugs, over-the-counter medicines, or illicit substances. ID should be viewed as an over-arching term that will encompass what in the past has been referenced by Driving Under the Influence (DUI), Driving While Intoxicated (DWI), substance abuse, and other descriptive terms. These alternative descriptive terms will not be used unless they are necessary to focus on some aspect of the ID problem. For example, some quotations from legal documents will use DUI, and in those cases, there should be no distinction made between ID and DUI. The acronym IDSP will refer to the Impaired Driving Strategic Plan, i.e., the strategic plan for reducing the occurrence of ID, including all preventative, criminal justice, drug misuse and administrative aspects involved with ID issues. Finally, this document was created and approved under the auspices of the Alabama Impaired Driving Prevention Council (AIDPC).

1.1 Magnitude and Classifications of the Impaired Driving Problem

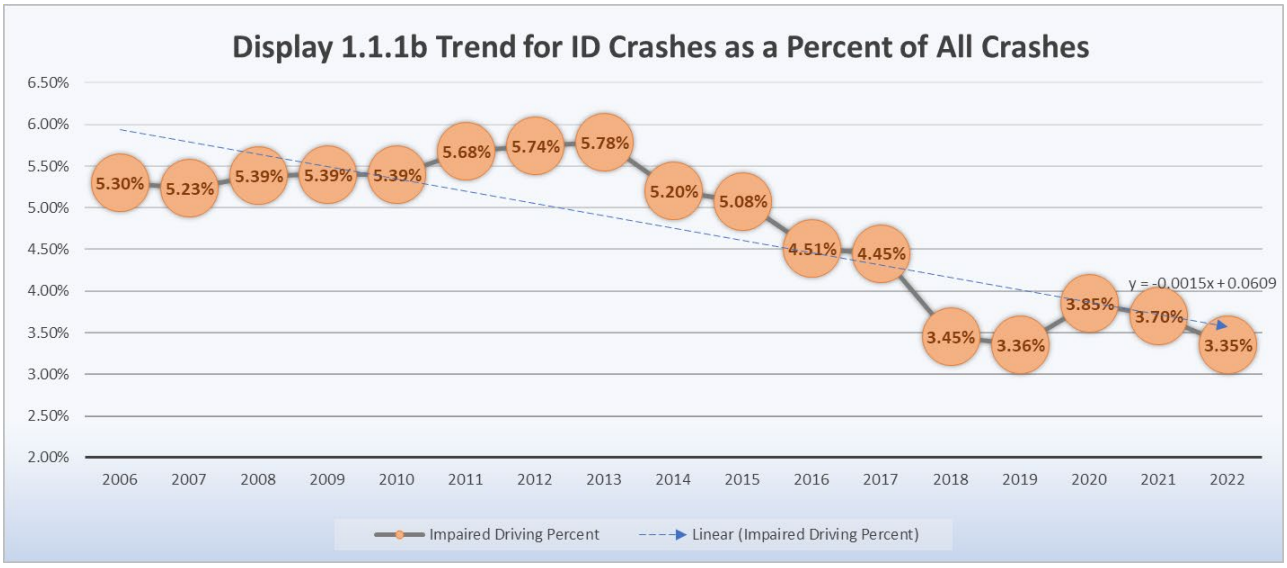
This section presents an overview of the systematic problem identifications that were performed, (unless otherwise specified) using the most recently available 17 years of Alabama data (CY2006-2022). This is generally a summary of the detailed problem identifications contained in Appendices A and B. This will be organized below according to crash records analysis, citation records analyses, and the general over-represented categories of ID as given by the crash records.

1.1.1 Impaired Driving Crashes Compared to Non-ID Crashes

Display 1.1.1a compares the number of reported ID crashes (red) with the number reported that were recorded as Non-ID (blue) over the calendar years 2006-2022.



The trend of the proportion of ID crashes to the total number of crashes is given in Display 1.1.1b. It has an average of 4.76% and varies from a low of 3.35% to a high of 5.78%. Generally, the number of ID crashes remains relatively stable as the total number of crashes has decreased and increased significantly over the years due to the various factors that influence overall crash frequency. Since the factors in the variation of overall crashes are primarily economic, this finding generally goes counter to the idea that ID crashes are also correlated to these economic factors, e.g., (1) the ability to purchase substances that could be abused, (2) the ability to drive once under these influences, and (3) the use of drugs and alcohol without going to more expensive establishments. The conclusion must be that those factors that have been effective in reducing overall crashes (which have been shown to be largely economic) have not had nearly the effect on ID crashes prior to 2013. As illustrated below, after 2013 ID crashes did not increase as much as crashes in general, which is a favorable trend.

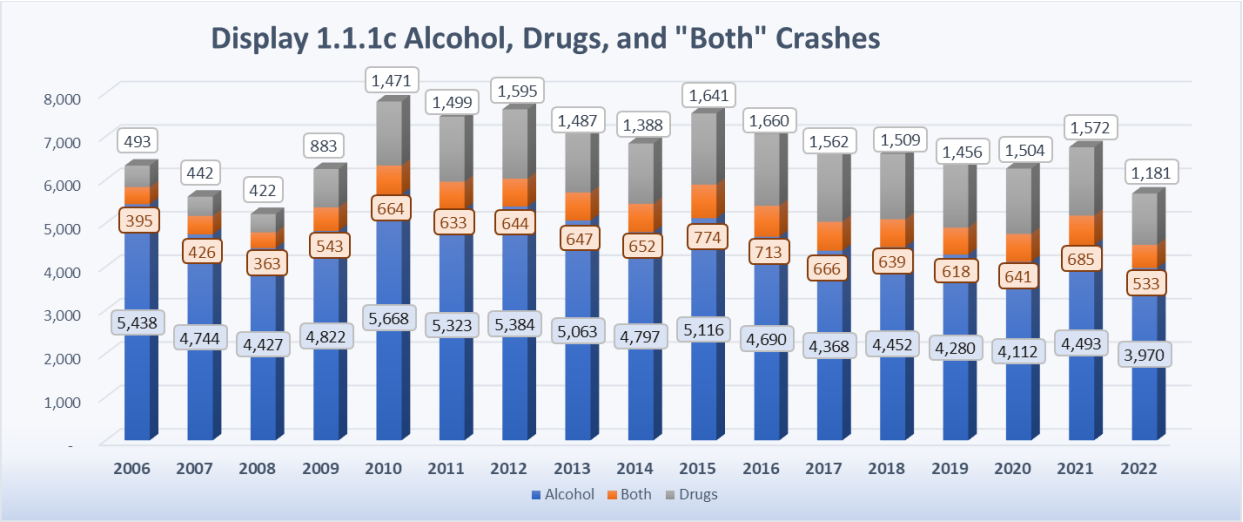


There is no argument that the number of *reported* ID crashes is less than what actually occur. The accurate identification of an ID crash in the field is often difficult for the field officer. This disparity can be illustrated by comparing the fatalities indicated by the Fatality Analysis Reporting System (FARS) and those obtained from Alabama crash records. The following table is indicative of this disparity.

Year	FARS ID Fatalities	AL Crash Records ID	Percent Reported
2006	377	267	70.82%
2007	377	289	76.66%
2008	314	230	73.25%
2009	267	264	98.88%
2010	264	230	87.12%
2011	261	252	96.55%
2012	240	212	88.33%
2013	259	209	80.69%
2014	265	220	83.02%
2015	244	232	95.08%
2016	298	262	87.92%
2017	265	205	77.36%
2018	249	201	80.72%
2019	272	212	77.94%
2020	233	171	73.39%
2021	281	214	76.16%
TOTALS	4,466	3,670	82.18%

This demonstrates that while the ID crash records are extremely important in providing *relative* information (e.g., the types of comparisons given in Appendix B), they are not as useful in determining the ultimate cost of ID crashes, either in terms of lives or in terms of economics. Fatality reporting is by far the most accurate, since it would be expected that the more severe the crash the more investigation would be performed in identifying the basic causes. Seeing the recent overall percent reported of about 82.2% (average of 2006-2021) for fatal crashes, it is reasonable to estimate that ID crashes *of all severities* are generally under-reported by a factor as high as 30%. (This is further confirmed by the most recent three years being under 80%.) That is, for every three that are reported as such, in all probability another one will be reported as a non-ID crash even though impaired driving was involved. One of the major recommendations that will be made in Section 7 will be for improved reporting.

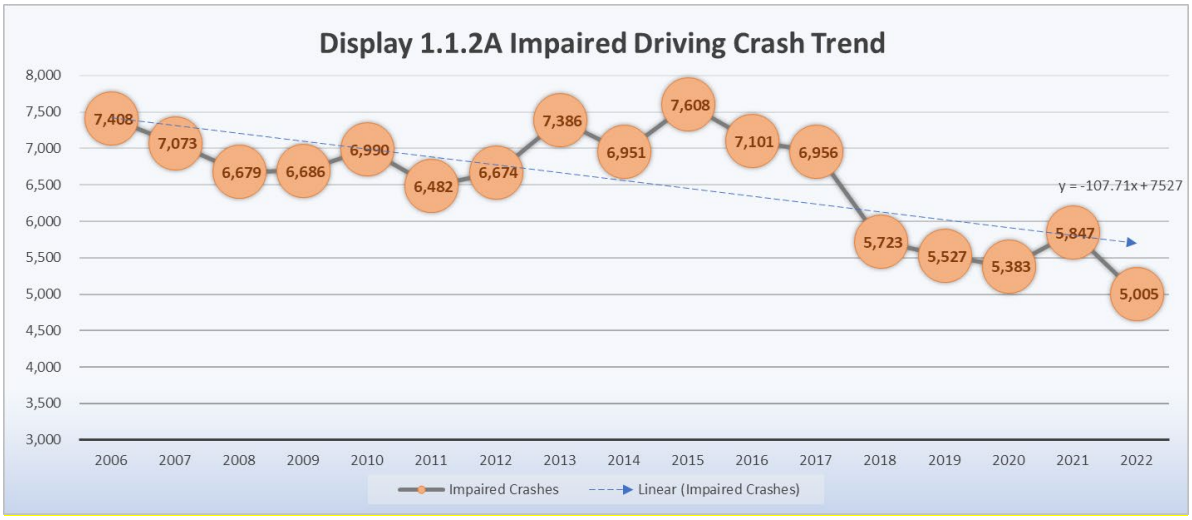
Clearly, ID is a major cause of motor vehicle fatalities in the entire country, and Alabama is no exception. Display 1.1.1c shows how the ID crashes have been distributed between alcohol (blue), drugs (grey), and both alcohol and drugs (red). The proportion of ID drug crashes has increased from its low of 14% in 2006 to the most recent high of 30.2% in 2022. This alarming trend is indicative of an increased social acceptance of drug use. The under-reporting of drug cases must be much higher than alcohol cases since there is a general inability of most law enforcement officers to identify many of the drug-related ID cases. Several recommendations given in this plan will address this disturbing trend.

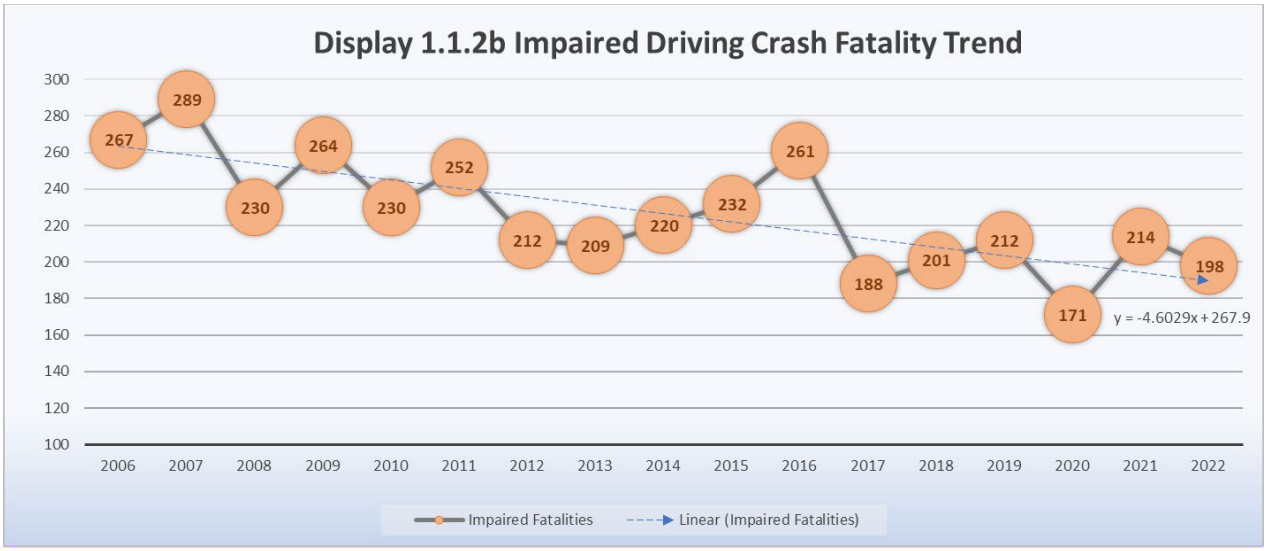


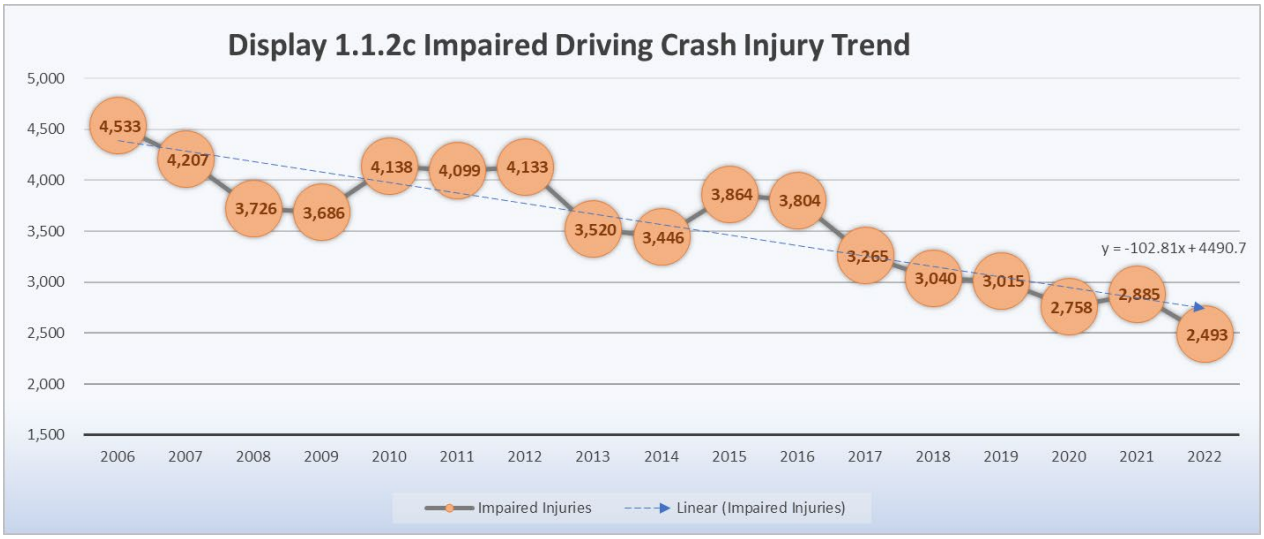
1.1.2 Seventeen Year Impaired Driving Crash and Citation Trends

Display 1.1.2a shows the 17-year trend for impaired driving reported crashes. While the trend line is not steep, the concurrence of many of the data points very near the line shows that the year number is highly correlated to a decline in ID reported crashes. Statistical analysis shows that there was an average decline of about 108 crashes per year between 2006 and 2022.

A more detailed analysis of the last five years will be given in Appendix B. Generally, this trend should be considered as being favorable, and an indication that the countermeasures being applied are bearing fruit.

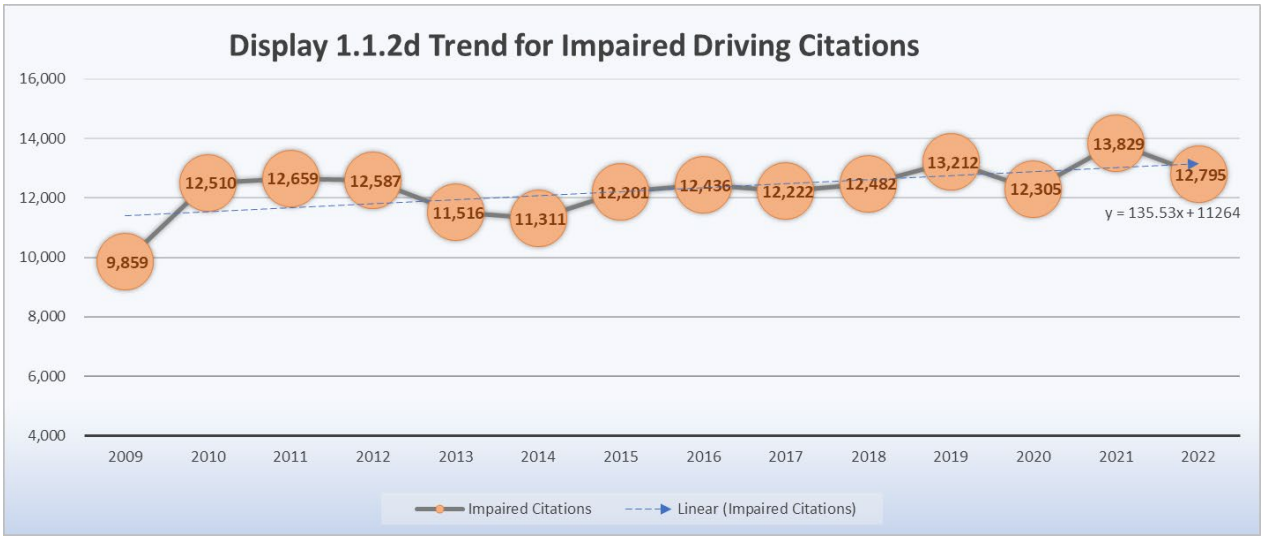

Display 1.1.2A Impaired Driving Crash Trend
8,000
7,500
7,000
6,500
6,000
5,500
5,000
4,500
4,000
3,500
3,000
7,408
7,073
6,679
6,686
6,990
6,482
6,674
7,386
6,951
7,608
7,101
6,956
5,723
5,527
5,383
5,847
5,005
y = -107.71x + 7527
2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021 2022
Impaired Crashes
Linear (Impaired Crashes)


Display 1.1.2b Impaired Driving Crash Fatality Trend
300
280
260
240
220
200
180
160
140
120
100
267
289
230
264
230
252
212
209
220
232
261
188
201
212
171
214
198
y = -4.6029x + 267.9
2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021 2022
Impaired Fatalities
Linear (Impaired Fatalities)


Display 1.1.2c Impaired Driving Crash Injury Trend
5,000
4,500
4,000
3,500
3,000
2,500
2,000
1,500
4,533
4,207
3,726
3,686
4,138
4,099
4,133
3,520
3,446
3,864
3,804
3,265
3,040
3,015
2,758
2,885
2,493
y = -102.81x + 4490.7
2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021 2022
Impaired Injuries
Linear (Impaired Injuries)

The results in Displays 1.1.2.b and 1.2.2c should be qualified by the fact that these crashes, especially fatalities, are given much more detailed investigation, and as a result the reliability and completeness of the reporting increases. The discussion of the comparison of FARS with Alabama law enforcement reported fatalities given in Section 1.1.1 should be given strong consideration.

The two displays are placed together above for purposes of comparison. Both show an overall improvement. While the year number accounts for 54.7% of the variation for fatalities, it accounts for 80% of the variation in injuries, as can be observed by the larger variations from the regression line. However, both seventeen-year trends are significant. Fatalities are being reduced on average of 4.6 per year for an estimated 17-year reduction of about 78 fatalities; and injuries are being reduced by about 102.8 per year, for an estimated 17-year reduction of about 1,748 injuries.



Display 1.1.2d gives the overall trend of citations for Impaired Driving issued within eCite for the most recently available 14 years for which the eCite system has been operational. Data prior to that time are not comparable. In this case, the regression line accounts for 37% of the variation over the years. Looking at the individual years, there was an obvious and significant increase with the adoption of eCite as it matured in 2009. The number of ID citations stabilized above the 12,500 level for 2010-2012. There was a tapering down in 2013 and 2014 probably due to reductions in trooper force at ALEA. The number of citations increased by about 900 between 2014 and 2015. Between 2015 and 2018, the number of citations remained constant, but there was a spike starting in 2019 to the most recent year. However, there was a reduction in the number of citations issued in 2020.

The interpretation of the citation numbers is complex, especially considering the recent reduction in law enforcement. The trend could be viewed as negative in the sense that there

are more ID citations written in the most recent three years as opposed to the two years before that. On the other hand, the increase could also be viewed as positive in the sense that, even with less enforcement being performed, more citations are being written. Only a very small fraction of ID violators is brought to justice in any given time. There is little doubt that even a doubling of the number of law enforcement officers would still not apprehend many offenders. Such a dramatic increase in enforcement would also overwhelm the criminal justice system, and that would create problems of its own as discussed in other sections of this plan.

1.1.3 General Categories of ID Crashes

To keep the most current information available, a problem identification was performed using the fiscal year (FY) data as soon as it became available. The difference in the FY and calendar year (CY) data in such comparisons would not be significant. The following summarizes the findings of the problem identification, the details of which are given in Appendix B:

- **General Comparison of 2022 against 2018-2021**
    - Overall crash frequency for 2022 was 7,252 crashes lower than the average per year totals for 2018-2021. This indicates a general decline in the number of crashes after 2018. Total crashes in 2018 and 2019 were about 16,000 and 15,000, respectively, more than the frequency of crashes in 2022. However, the number of crashes in 2020 were about 9,950 less than the total number of crashes recorded in 2022. The number of crashes recorded in 2022 were over 8,000 lower than those recorded in 2021.
    - In a comparison over the five years, overall fatal crashes generally increased, with 2022 having about 41 more fatal crashes than would be expected from the previous four-year average.
    - A similar comparison of the calendar years of ID fatal crashes showed a decrease from 182 in 2018 to 179 in 2022 (a decrease of only 3 fatal crashes) and 185 in 2019 to 179 in 2022 (a decrease of only 6 fatal crashes). The total number of fatal crashes in 2020 were 20 less than that of 2022. However, the number of fatal ID crashes in 2021 were 11 more than the number recorded in 2022 (indicating a 6.1% decrease in fatal ID crashes from 2021 to 2022).
    - Considering the overall percentage of ID fatalities to total fatalities, the results for each year from 2018 through 2022 were 21.1%; 22.8%; 18.3%; 21.8% and 20.1%, which was stable except for 2020.

1.2 Strategic Plan Mission and Goal Statements

The Alabama Impaired Driving Strategic Plan (IDSP) was developed and approved with the input and direction provided by the Alabama Impaired Driving Prevention Council (AIDPC), which based

its development efforts on the following mission statement developed by the AIDPC membership.

Mission Statement: *To maximize the impact of a harmonious collaborative effort to reduce the reduction of ID fatalities, injuries, and crashes to the lowest level possible, and ultimately to eliminate them altogether.*

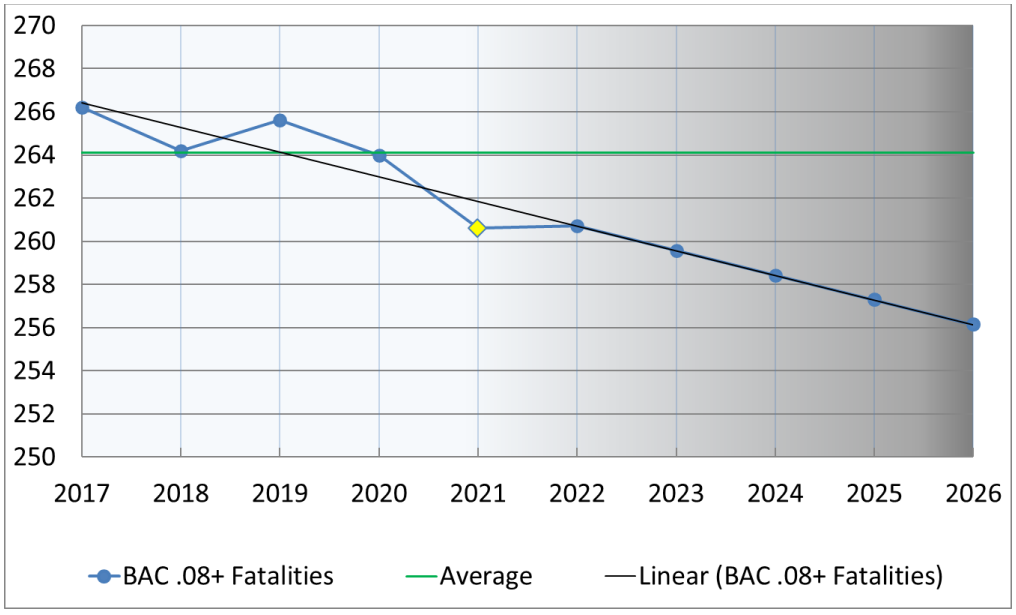
This mission statement recognizes the many efforts developed in the past and those currently ongoing. AIDPC members' experience ranges back to the first ID strategic plan that was developed in the mid-1970s. Over this time, Alabama has realized great gains in reducing the frequency and severity of impaired driving crashes. However, the AIDPC recognizes continued vigilance and improvement is needed to further reduce these devastatingly tragic events. As such, it has adopted the theory that has commonly been called "Continuous Improvement Forever" that mandates an attitude of never being satisfied with the current situation in recognition that improvement is always possible.

Immediate Short-Term Goal: *Maintain the alcohol-impaired driving fatalities at the five-year baseline average of 262 (2017-2021) in 2026.*

The goal is from the Alabama 2026 3 HSP, item C-5: Number of fatalities in crashes involving a motor vehicle driver (including motorcycle operators) with a BAC of .08 and above, as measured by the FARS estimated data given below:

2018	2019	2020	2021	2022	Baseline	2024 Benchmark	2025 Benchmark	2026 Goal
249	272	236	284	262	260	**260**	**260**	**260**

5-Year Rolling Averages of Fatalities Involving a Driver with a BAC .08 and Above



It is important to recognize that extrapolations from a limited number of past values can lead to extreme errors, especially since the last value that we had in most cases at the time of developing the 2024 Highway Safety Plan was 2022, requiring (for example) that the estimates of 2023-2026 all be based on an extrapolation of 2006 through 2022. Rarely if ever does such a linear trend establish an accurate prediction, especially in crash data where regression to the mean usually follows any dramatic departure (positive or negative) from the established trend. Nevertheless, these estimates are presented since they are the best figures available upon which to make and refine future estimates and goals.

The considerations above are particularly true of any metric that is dependent on fatality counts. Consistent with the national trend, Alabama experienced almost a 24% reduction in fatalities between CY 2007 and CY 2009. Because of several economic factors (price of fuel, alcohol, reduction in driving by high-risk groups, reduction in speeds for fuel conservation, and several other well-established factors), the expected regression to the mean did not occur until 2015, and it is being dramatically realized over the course of 2017. Any trend line that includes fatality counts prior to 2008 will obviously produce a downward trend that is clearly not feasible to maintain by traffic safety countermeasures alone.

1.3 Guiding Principles in the ID Strategic Plan (IDSP) Development

Given the goal mission statements given above, it is important to understand the overall guiding principles that were followed in developing the IDSP. The purpose of the IDSP is to provide overall guidance to all agencies and private groups who are involved with various aspects of reducing the problems caused by ID. Specifically, the Alabama Impaired Driving Prevention Council (AIDPC) was formed not only to develop this plan but also to guide its implementation and future

enhancements. In this regard, they were required to address all the impaired driving issues, review strategies that have been proven effective in impacting those issues and develop a strategic plan that will serve to guide all aspects of efforts within the state to deal with the ID problem. The membership and organization of the AIDPC will be detailed below under Program Management (Section 2).

The following are the guiding principles that were approved by the AIDPC at the outset of its deliberations:

- ID is a recognized public safety and health problem that has an enormous impact on our economy and the wellbeing of our citizens.
- While the AIDPC recognizes the many effective efforts made over past decades to address the problems created by ID, the large number of highway fatalities and injuries caused by ID indicates that these efforts should be reviewed and modified or augmented appropriately to provide for continuous improvement.
- There are many partners in these efforts, all of whom have strong motivation to assist in the solution or mitigation of the ID problem, and as such, there is a critical need to coordinate these efforts so that they are not fragmented or even working at cross-purposes.
- The ID problem cannot be addressed by emphasis on one aspect of the solution; in the past, a lack of a balanced approach has tended to be counterproductive; thus, a guiding principle is the respect that all involved disciplines must have for efforts outside of their direct purview.
- The problem is largely a cultural one and while strong deterrent and punitive measures are an essential part of the solution, they must be consistent with an overall change in the cultural attitudes that provide the environment in which ID can exist.

1.4 Relationship to the State Strategic Highway Safety Plan (SHSP) Efforts

The Impaired Driving Strategic Plan (IDSP) utilizes several data points and information derived from Alabama's Strategic Highway Safety Plan (SHSP). The purpose of the SHSP is to improve highway safety in all areas of traffic safety. Since its goal is to be comprehensive of all traffic safety efforts within the state, it subsumes all planning efforts that are targeted at particular focus issues (e.g., occupant protection, traffic safety information systems, impaired driving, etc.). The SHSP has identified ID as a major continuing priority area under Behavioral- Related Emphasis Areas because the problem identification analyses demonstrate that this is one of the top three causes of fatal crashes. Thus, the IDSP serves as a complement to the SHSP by describing the ID-specific strategies and action steps to improve traffic safety. The last SHSP was published in December 2022.
The following recommendations regarding ID were made within the SHSP document:

- To reduce impaired driving, a multidisciplinary approach involving law enforcement, education and community outreach, and information systems will strategically deploy

resources, programs, and strategies to reduce the occurrence of the behavior as well as reduce the severity of the outcome when the behavior does occur.

- Continue impaired driving enforcement efforts throughout the state through ongoing enforcement strategies to reduce impaired driving.
- Train additional impaired driving enforcement experts.
- Continue impaired driving public information campaigns and educational efforts for all drivers in schools and at public events.
- Utilize available data to best direct resources towards areas with increased occurrence of impaired driving.

These statements are listed to demonstrate the complete cooperation that exists between the SHSP planning efforts and those required by the Bipartisan Infrastructure Law under the auspices of NHTSA.

1.5 Organization of the ID Strategic Plan

This strategic plan describes the components that Alabama's impaired driving program will include. At the beginning of the process, the Alabama Impaired Driving Prevention Council (AIDPC) determined its strategic plan should have objectives and countermeasures that reflect the various aspects of impaired driving. The first section of the plan deals with program management. Subsequent sections are generally ordered according to the organization of the various impaired driving countermeasures, namely:

- Program Management and strategic planning
- Prevention, including community engagement and coalitions
- Criminal Justice Systems
- Communications Programs
- Alcohol and other Drugs Misuse: Screen, Assessment, Treatment and Rehabilitation
- Program Evaluation and Data Collection

A final section is dedicated to the subject of impaired driving program evaluation and data collection. Results of the problem identifications are given in the Appendices A and B.

2.0 Program Management

The State of Alabama, including the Governor and the Legislature, have been very closely involved with strategic planning to address impaired driving issues, dating back to the mid-1970s when Dr. Russ Fine of the University of Alabama at Birmingham organized a task force and developed a strategic plan that has been updated over the years to consider the many changing aspects of this complex issue. The State recognizes the need for strong leadership and sound policy development in these areas, and it has sought out the best within our traffic safety, law enforcement, and medical communities to formulate this plan. This section of the plan deals with the overall management of the Impaired Driving (ID) program in the State. The administrative and management characteristics are organized into the following categories:

- Alabama Impaired Driving Prevention Council (AIDPC)
- Strategic Planning Organization
- Program Management
- Resources
- Data and Records
- Communication Program

These will be discussed in the following sections, respectively. In most cases, additional references will be given to other sections of this document for added details and to avoid redundancy.

2.1 Alabama Impaired Driving Prevention Council (AIDPC)

The Alabama Impaired Driving Prevention Council (AIDPC) was assembled by AOHS to develop and approve this plan and to ensure that all aspects of the impaired driving problem were considered, and that as many alternative countermeasures as possible could be evaluated. To create a strategic plan that would focus on the problem areas with the greatest opportunity for improvement and establish a successfully functioning Council, it was essential to have representation from agencies and organizations with a working knowledge and deep understanding of the various parts of Alabama's impaired driving prevention system and how the parts interrelate. The individuals who participated in the AIDPC meetings and assisted in drafting the IDSP are identified in Table 2.1. AIDPC organizers are deeply grateful for the time and effort members devoted to development of the strategic plan and for the counsel, advice, and expertise they brought to the plan, and that they continue to bring toward implementing it, and for their efforts in expanding the description and function of the AIDPC.

The major charge given by the AIDPC in its commission was to foster leadership, commitment, and coordination among all parties interested in impaired driving issues. Further, they were

charged with the responsibility to attend regular meetings as established by the Chair, and to generally manage and provide overall control to the program as described in the ID Strategic Plan.

Table 2.1 Members of the AIDPC

NAME	AGENCY	TITLE	FUNCTION
Adams, Erin	MADD	State Victim Services Coordinator	Community Engagement
Argo, Dean	Alcoholic Beverage Control Board	Government Relations Manager	Communication
Babington, Bill	Alabama Department of Economic and Community Affairs	Division Chief	State Highway Safety Office
Barnes, Noel	Alabama Law Enforcement Agency	General Counsel	Drivers Licensing
Bertaut, Denise	Alabama Department of Public Health	Child Passenger Safety Program Manager	Public Health
Cauthen, Terry	Alabama Board of Pardons & Paroles	Director of Field Operations	Criminal Justice System
Frederick, Sgt. William	Alabama Law Enforcement Agency	DRE	Drug-impaired Driving Countermeasures
Harper, Dr. Curt	Alabama Department of Forensic Sciences	Toxicology Discipline Chief	Human Performance Toxicology
Jett, Errek	Alabama District Attorneys Association	District Attorney, 15th Judicial Circuit	Criminal Justice System
Jones, Jay	Lee Co. Sheriff's Office	Sheriff	Criminal Justice System
Lindsey, Bill	Alabama Traffic Safety Resource Prosecutor	Traffic Safety Resource Prosecutor	Criminal Justice System/Communication
Norris, Jesse	University of Alabama – CAPS	Professor	Data & Traffic Records
Plato-Bryant, Cheryl	Alabama Administrative Office of Courts	Court Referral Program State Coordinator	Treatment & Rehabilitation
Simpson, Matt	Alabama Legislature	State Representative, 96th District	Communication
Sparks, Hon. Andra	Judiciary	Municipal Judge – Birmingham	Criminal Justice System
Spencer, Karen	MADD	State Victim Services Coordinator	Community Engagement
Thompson, Paul	Alabama Law Enforcement Agency	DRE State Coordinator	Drug-impaired Driving Countermeasures
Turner, Dr. Greg	Alabama Department of Forensic Sciences	Technical Director, Implied Consent Unit	Breath testing/Ignition Interlock
VACANT	Judiciary	District Judge	Adjudication
VACANT	Alabama Office of Prosecution Services	ADA,	Prosecution

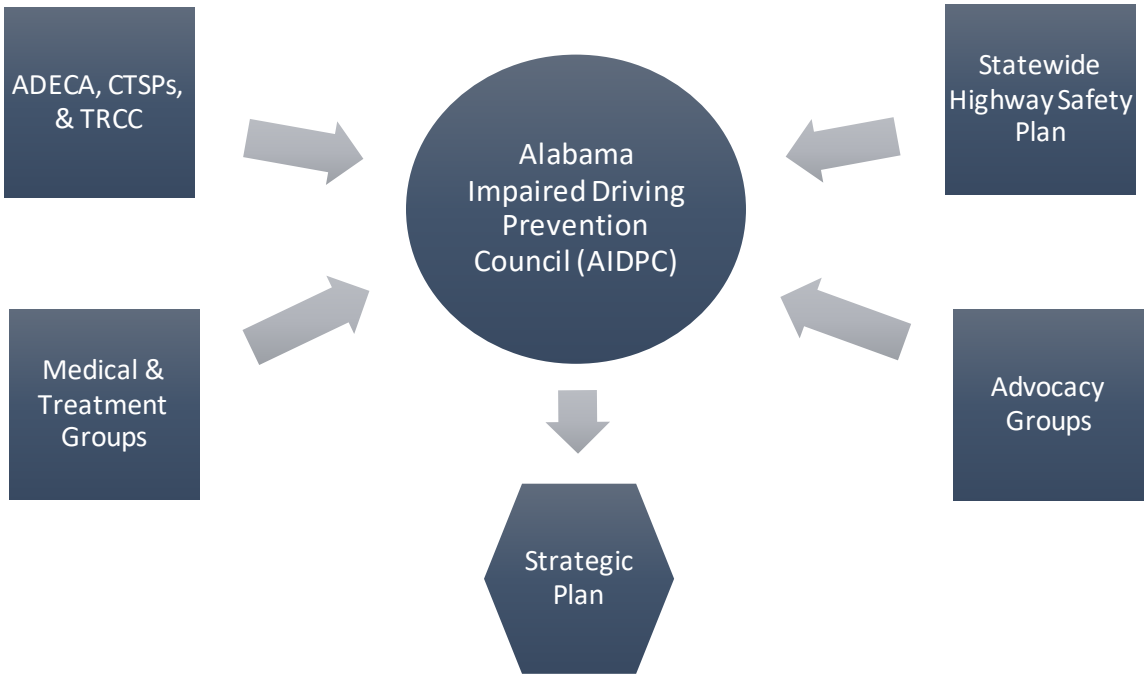
The IDSP is heavily data driven. In drafting the IDSP, members of the AIDPC relied on data on impaired-driving-related crashes, arrests, suspensions, and convictions data; also used were state-specific studies on youth and adult behavior and attitudes toward alcohol consumption/drug use specifically as they relate to impaired driving.

2.2 Strategic Planning Organization

Programs and activities are guided by problem identification, and they are carefully managed and monitored for effectiveness. The mission of the AIDPC requires the development and implementation of an overall plan for short- and longer-term impaired driving prevention and remediation activities based on careful problem identification. Short-term refers to the projects and activities that will be part of the next Highway Safety Plan (HSP) and other non-supported volunteer efforts that will be implemented during the coming fiscal year. Longer-term plans are those expected to be implemented in subsequent fiscal years.

Figure 2.2 presents the overall organization for the impaired driving strategic plan development within the State. The central focus of the effort is the AIDPC and all information from the other organizational entities will go through the AIDPC to be evaluated and formulated into the plan.

Figure 2.2 Impaired Driving Strategic Planning Organization



The major entities involved with this include:

- The Alabama Department of Economic and Community Affairs (ADECA), which is the administrating agency for the NHTSA traffic safety grants, the Community Traffic Safety Program Coordinators (CTSPs), and the state Traffic Records Coordinating Committee (TRCC), all of which operate within ADECA oversight.

- Medical and Treatment Agencies also provide input to the AIDPC (these groups are typically not included in generally traffic safety planning activities).
- Advocacy Groups, i.e., non-governmental entities that have traffic safety interests, especially in impaired driving.

2.3 Program Management

The plan provides an essential component of the control process, establishing goals and objectives for the total impaired driving efforts in the State both for the total effort and for its individual components. However, it is obvious that a plan alone is not going to solve the problem. The planned projects and programs must be effectively implemented. This requires an effective management control process. Using the plan as a road map, management must determine if adequate progress is being made in all projects toward their goals, and if those projects are effectively meeting the standards set forth for them. When it is detected that such is not the case, then management needs to step in and provide correction, either strategically or tactically, to get things back on track.

To accomplish this, regular (quarterly, or as needed) meetings of the AIDPC are conducted with representatives of the entities that are performing projects under the plan. This will essentially provide a management-by-exception process that will assure that proper corrective action be taken in any projects that are not making their expected progress. At the same time, it will provide a reporting mechanism to keep all AIDPC members and their respective agencies informed as to current impaired driving activities throughout the state.

2.4 Resources

The AIDPC planning effort is being performed under the assumption that sufficient funding, staffing, and other resources to support impaired driving programs will be forthcoming. The Bipartisan Infrastructure Law has given the assurance of certain funding provided that the State meets the planning and other legal requirements. It can be shown that the revenue generated from citations and reinstatement of licenses more than offsets the cost of the planned projects. However, since these monies go into the general fund and are not earmarked for impaired driving programs, they are not generally accessible to support the impaired driving countermeasure efforts. One of the major roles of the AIDPC will be to make inroads to ensure that the planned programs should achieve self-sufficiency by transferring as much of their costs to impaired drivers.

2.5 Data and Records

This topic is covered in detail in Section 7 and further illustrated in Appendices A and B. All management and planning functions have been and will continue to be both evidence and data driven. This process starts with an analysis of historical data in a problem identification that has the broadest possible perspective. It searches all Alabama crash data to answer the "who, what, where, when, and why," as well as the "how many" in all aspects of impaired driving (all drugs including alcohol) related crashes. Once the general locations for impaired driving crashes are determined, more detailed hot-spot analyses are performed to direct the enforcement effort to those areas that have the highest concentration of impaired driving crashes. In addition, other data sources are utilized, including the state electronic citation data (eCite), U.S. Census data to establish and compare demographics, Fatality Analysis Reporting System (FARS), Crash Outcome Data Evaluation System (CODES), and others as they surface.

Alabama has a complete evaluation capability in its crash records system. One module is called the before-after analytical tool, and it can be applied right down to the specific roadway location on which an improvement is implemented. Numeric goals are set for all projects and, to the extent practical, these capabilities are run to perform evaluations not only to determine past successes but also to modify projects and programs to ensure that the allocations of resources continue to improve.

Every aspect of this problem identification and evaluation effort will be guided by the statewide Traffic Records Coordinating Committee (TRCC), which represents the interests of all public and private sector stakeholders and the wide range of disciplines that need this information. Details of these studies will be published online and will be cited as appendices of this planning document.

2.6 Communication Program Management

The Communication Program is detailed in Section 5; this section will summarize the program management efforts that are associated with that program. In addition to the many focused Public Information and Education (PI&E) efforts, every project within the impaired driving program has
a communications and public relations component associated with it. Program management has as its goal to coordinate these various efforts to ensure they are unified and working together for a common purpose. Thus, a comprehensive communications program will be developed and maintained that supports priority policies and program efforts that are comprehensive, including the following agencies:

- The Alabama Department of Economic and Community Affairs (ADECA) has been involved with the development of Public Service Announcements (PSAs), supporting Public Information and Education (PI&E) in general, and focusing these efforts on particular holiday events.
- The Alabama Law Enforcement Agency's (ALEA), Public Affair Officers/External Affairs responds to requests from the media for information and participated in news-related events as well as in holiday and other special programs
- The Traffic Safety Research Prosecutor (TSRP) maintains a web site that provides general ongoing information on courses conducted by the TSRP and addresses the many issues that prosecutors of ID cases face.
- The Alabama Department of Public Health (ADPH) uses multiple platforms to inform the public about injury prevention, the child passenger restraint program, and the review of deaths among all ages.

See Section 5 for details of the Communication Program.

3.0 Prevention

The State's prevention program has the goal of reducing impaired driving through public health approaches, including altering social norms, changing risky or dangerous behaviors, and creating safer environments. To accomplish this, the following objectives have been established:

- Apply formal and informal behavioral modification methods that center around the negative effects of alcohol and other drugs;
- Limit the availability of alcohol and other drugs, especially to those who are most apt to abuse them;
- Discourage or prevent those who are impaired by alcohol and other drugs from driving;
- Assure responsible alcohol service practices;
- Create and support transportation alternatives;
- Implement community-based programs:
    - In schools,
    - At work sites,
    - In conjunction with medical and health care facilities, and
    - By community coalitions.

Prevention efforts will be directed toward populations at greatest risk as determined by the problem identification efforts that were conducted in conjunction with the planning effort.

The subsections within the overall prevention countermeasures address the various prevention projects that are generally organized within the following categories:

- Responsible Alcohol Service,
- Community Based Programs, and
- Transportation Alternatives Program.

3.1 Responsible Alcohol Service

There are two basic prevention approaches that fall under this countermeasure category:

- Prevent all underage drinking by people under age 21; and
- Prevent "over-service" to people aged 21 and older.

Alabama's Dram Shop Act, § 6-5-71, Ala. Code, 1975, provides:

> (a) Every wife, child, parent, or other person who shall be injured in person, property or means of support by any intoxicated person or in consequence of the intoxication of any person shall have a right of action against any person who shall by selling, giving, or otherwise disposing of to another, contrary to the provisions of law, any liquors or beverages cause the intoxication of such person for all damages actually sustained, as well as exemplary damages.

(b) Upon the death of any party, the action or right of action will survive to or against his executor or administrator.
(c) The party injured, or his legal representative may commence a joint or separate action against the person intoxicated or the person who furnished the liquor, and all such claims shall be by civil action in any court having jurisdiction thereof.

This Act was passed into law in 1909 and has been on the books without change since enactment. The Dram Shop Act provides liability for selling, giving, or disposing of liquors or beverages "contrary to the provisions of law."

The Alabama Alcoholic Beverage Control (ABC) Board Licensing and Compliance Division employs approximately 30 civilian inspectors spread out over 7 divisions across the state. These inspectors are responsible for regulating the sale of alcohol, tobacco, tobacco products, electronic nicotine delivery systems, and alternative nicotine as set forth in Title 28, Code of Alabama, 1975, as amended. This includes the enforcement of the ABC Board's Rules and Regulations, which have the full force and effect of law. They also license all manufactures, importers, wholesalers, and retailers of alcoholic beverages, tobacco, tobacco products, electronic nicotine delivery systems, and alternative nicotine. This division works very closely with Alabama Law Enforcement Agency (ALEA) regarding under-age sales and service, as well as other city, county, state, and federal governmental and law enforcement agencies. The Licensing and Compliance Division also handles all administrative violations of Title 28 and ABC Rules and Regulations.

Action Items:

- Continue to offer the Alabama Responsible Vendor Program. This is a voluntary program that allows licensees to become certified through the Alcoholic Beverage Control Board. Alabama's program requires the licensee to train all employees who are involved in the management, sale and/or service of alcoholic beverages. This training includes Alabama alcoholic beverage laws, legal age determination, civil and criminal penalties, and risk reducing techniques. Licensees who voluntarily join the program are also required to establish policies ensuring legal, responsible sales and to train employees in these policies.

3.2 Community Based Programs

"Community" here refers to those organizations and agencies that currently exist to fulfill other primary goals but have a health and safety mission. The prevention strategies they would participate in implementing would be primarily directed toward driver attitudes but might also involve family or social interaction with drivers to influence them against taking the wheel when they are in no condition to do so. The ideal settings would include schools, places of employment, medical and health care environments, and other community coalitions and traffic safety programs implemented by advocate groups. Some of these will be detailed below.

3.2.1 Schools

School-based prevention programs must begin in elementary school and continue through college and trade school. If implemented properly, such programs play a critical role in preventing underage drinking and impaired driving, not only when the recipients attain the age of obtaining licenses themselves, but as a collective influence in the family and the community. Every effort in the planning process was made to assure that the proposed programs were developmentally appropriate, culturally relevant and coordinated with other drug prevention and health promotion programs ongoing in the community.

Action Items:

- Provide training to those involved with the educational system through the Drug Impairment Training for the Educational Professional (DITEP) courses (see Sections 4.2 and 4.7.3)
- Support legislation that will help to eliminate all underage drinking and drug use (see Section 4.1);
- Promote stronger GDL laws and their enforcement;
- Create greater awareness of the role that negative advertising plays on young people in all areas of unsafe driving.
- Continue to offer Under Age Under Arrest, a program of ABC, to middle school and high school students located throughout Alabama.

3.2.2 Employers

The loss of a key individual due to either injury, death, or incarceration, can be devastating to an employer. This countermeasure type requires first the convincing of employers that it is in the best interests of their company or non-profit agency to conduct programs to show their employees the alternatives to impaired driving, and even to provide alternatives for them (e.g., alternative transportation). Employers also need to be made aware of the responsibility that rests upon them for company-sponsored parties, which are often held near or on holidays when some participants may have already been indulging. These countermeasures provide information and technical assistance to employers and encourage them to offer programs to reduce underage drinking and impaired driving by employees and their families.

Action Items:

Initiate AIDPC interaction with private companies and trade organizations that have a common goal of reducing crashes caused by ID. These might include organizations exemplified by, but not limited to, the following entities:

- The Alabama Trucking Association (ATA; http://www.alabamatrucking.org/), which sponsors Infinit-i(tm) training for their membership: (http://lmstrucking.infinit-i.net/articles/Alabama_Trucking_Association.htm); and

4.0 Criminal Justice Approaches

This set of countermeasure approaches includes the entire criminal justice system, including laws, enforcement, prosecution, adjudication, criminal and administrative sanctions, and related communications. The goal is to achieve both *specific* and *general* deterrence defined as:

- **Specific deterrence** focuses on individual offenders and seeks to ensure that impaired drivers will be detected, arrested, prosecuted, and subject to swift, sure, and appropriate sanctions, and thereby reduce recidivism;
- **General deterrence** seeks to increase the public perception that impaired drivers will face severe consequences, thus discouraging all individuals from driving impaired.

A multidisciplinary approach and close coordination among all components of the criminal justice system was sought in developing this plan. Special coordination through the CTSP efforts was planned to assure that all law enforcement agencies at the State, county, municipal, and tribal levels would continue to create and sustain both specific and general deterrence.

The plan will be discussed in the following subsections in terms of:

- Laws,
- Enforcement,
- Prosecution,
- Adjudication,
- Administrative Sanctions and Support Programs, and
- Training.

4.1 Laws

The State has enacted many laws that have proven to be sound, rigorous, and easy to enforce and administer. However, efforts must continue, both in strengthening existing laws and in passing new laws that address issues developing within our society. Every attempt is being made to ensure that these laws clearly define offenses, contain provisions that facilitate effective enforcement, and establish effective punitive measures for deterrence. Legislative efforts have had and will continue to have goals of defining illegal activities and remedies, which include:

- Driving while impaired by alcohol or other drugs (whether illegal, prescription or over the counter) and treating both offenses in a comparable matter with similar punitive and remedial programs;
- Driving with a blood alcohol concentration (BAC) limit of .08 grams per deciliter, making it illegal *per se* to operate a vehicle at or above this level without having to prove impairment;
- Driving with a high BAC (i.e., .15 BAC or greater) with enhanced sanctions above the standard impaired driving offense;
- Zero Tolerance for underage drivers, making it illegal *per se* for people under age 21 to drive with any measurable amount of alcohol in their systems (i.e., .02 BAC or greater);
- Repeat offender increasing sanctions for each subsequent offense;

- BAC test refusal with sanctions at least as strict, or stricter, than a high BAC offense;
- Driving with a license suspended or revoked for impaired driving, with vehicular homicide or causing personal injury while driving impaired as separate offenses with additional sanctions;
- Open container laws, prohibiting possession or consumption of any open alcoholic beverage in the passenger area of a motor vehicle located on a public highway or right-of-way;
- Authorization of law enforcement agencies to conduct sobriety checkpoints, (i.e., stop vehicles on a nondiscriminatory basis to determine whether operators are driving while impaired by alcohol or other drugs);
- Authorization of law enforcement to use passive alcohol sensors to improve the detection of alcohol in drivers;
- Authorization of law enforcement to obtain more than one chemical test from an operator suspected of impaired driving, including preliminary breath tests, evidential breath tests, and screening and confirmatory tests for alcohol or other impairing drugs; and
- Requiring law enforcement to conduct mandatory BAC testing of drivers involved in fatal crashes.

While most of the above provisions have been implemented in the State, they continue to be listed above since many of them require either strengthening or clarification.

In addition to the above general structure for the laws themselves, the following structure is part of the plan for establishing effective penalties:

- Administrative license suspension or revocation for failing or refusing to submit to a BAC or other drug test;
- Prompt and certain administrative license suspension of at least 90 days for first-time offenders determined by chemical test(s) to have a BAC at or above the State's *per se* level or of at least 15 days followed immediately by a restricted, provisional or conditional license for at least 75 days, if such license restricts the offender to operating only vehicles equipped with an ignition interlock;
- Enhanced penalties for BAC test refusals, high BAC, repeat offenders, driving with a suspended or revoked license, driving impaired with a minor in the vehicle, vehicular homicide, or causing personal injury while driving impaired, including longer license suspension or revocation; installation of ignition interlock devices; license plate confiscation; vehicle impoundment, immobilization or forfeiture; intensive supervision and electronic monitoring; and threat of imprisonment;
- Assessment for alcohol or other drug abuse problems for all impaired driving offenders and, as appropriate, treatment, abstention from use of alcohol and other drugs, and frequent monitoring; and
- Driver license suspension for people under age 21 for any violation of law involving the use or possession of alcohol or illicit drugs.

4.1.1 Medical Cannabis

In 2021, the State Legislature passed the Darren Wesley "Ato" Hall Compassion Act to create a health care market for medical cannabis for the benefit of residents in Alabama suffering from several medical conditions whose symptoms could be alleviated by the administration of medical cannabis products if used in a controlled setting under the supervision of a physician licensed in this state. *See* Code of Ala. § 20-2A-1 *et. seq.* Individuals who suffer from a qualifying condition as listed in the Code of Ala. § 20-2A-3 may apply for a physician certification for the use of medical cannabis and so become a registered qualified patient under the Act. Registered qualified patients aged 19 and older may carry not more than 70 daily dosages of medical cannabis and must have a valid medial cannabis card that acts as a license for appropriate possession. Each license is exclusive to the licensee and is a revocable privilege that is granted by the state. Any person who is recommended a daily dosage of medical cannabis that exceeds 75 mg of delta-9-tetrahydrocannabinol shall automatically have his or her driver's license suspended, regardless of whether he or she holds a valid medical cannabis card. Code of Ala. § 20-2A-34.

Nothing in the Act allows an individual to drive under the influence of medical cannabis if doing so results in driving behavior that is in violation of the law. Impaired driving by an individual who possesses a valid medical cannabis license remains; therefore, illegal and prosecutable. The Act does not preclude the Alabama State Law Enforcement Agency or local law enforcement agencies from searching a licensee where there is probable cause to believe that a criminal law has been violated.

Action Items:

AIDPC makes special recommendations to consider and promote the following legislative actions in the forthcoming legislative sessions (ordered randomly):

1. Appendix B shows a tremendous over-representation of impaired drivers in violation of State statute 32-6-19 – driving while license privilege suspended or revoked because of a DUI or DUI related offense. To combat this, the following are recommended:
    - Impose an additional thirty-day mandatory jail sentence, not subject to suspension, attached to violations of 32-6-19 for any third or subsequent violation of the statute when the suspension/revocation is because of a DUI charge.
    - Those most closely involved: come up with other options for sentencing that will address this issue like the third time DUI offenders discussed below.
2. Alternative sentencing options for third time DUI offenders that would allow for a mandatory treatment requirement upon conviction. Upon a conviction for a third violation of 32-5A-191, the judge may elect any or all the following:
    - Require a mandatory in-patient treatment program of not less than six months (or other time period to be determined), in order to help the defendant recover from their substance addiction.
    - Require that any driver, upon conviction for a second violation of 32-5A-191, carry a personal health insurance plan or an automobile coverage plan that would cover the costs of the treatment program.

- Any driver who failed to procure the proper insurance plan would not be eligible to be sentenced to the treatment program, but instead would serve a 6-month mandatory jail sentence upon a third conviction.
- These options would not apply to violations of 32-5A-191 that involved special circumstances (e.g., Vehicular Homicide).

3. Add the fee that is now imposed on DUI convictions to also cover convictions for Driving While Suspended and Driving While Revoked when the suspension/revocation is the result of a DUI conviction. This fee goes into the Alabama Chemical Testing Training and Equipment Trust Fund, which relies heavily upon these fees to remain viable.
4. The following items were suggested as ways in which the Pardons and Paroles (P&P) tasks may not dramatically improved (*see* Section 4.5.4):
    - Enable courts to add a special condition of no alcohol for probationers convicted of impaired driving.
    - For those so sentenced, require defendants to be fitted with a Continuous Alcohol Monitoring Device that constantly measures the offender's alcohol content and communicates with P&P remotely, greatly reducing the number of visits and the amount of time the probation officers must spend meeting with impaired driving probationers. This will be a major savings in time and other resources for P&P in impaired driving offender monitoring.

While all AIDPC members did not necessarily endorse all the SHSP items above, it was felt best to include them so that they could be considered with all the other legislative recommendations.

4.2 Enforcement

This is the major effort put forth by the State, and it has been data driven to ensure that funding is allocated in the best possible way. The details of these analyses are covered in Section 7 and Appendix A. The goal is to conduct frequent, highly visible, well-publicized, and fully coordinated impaired driving (including zero tolerance) law enforcement efforts throughout the State, especially in those locations where location data analysis has determined that alcohol related fatalities are most likely to occur. To maximize visibility, the State is maximizing contact between officers and drivers by using sobriety checkpoints and saturation patrols. These efforts are being widely publicized before, during, and after they occur.

Highly visible, highly publicized efforts are scheduled periodically at focus times when impaired driving has been found to be over-represented, and on a sustained basis throughout the year. To maximize resources, the State is coordinating efforts among State, county, municipal, and tribal law enforcement agencies. The plan involves the use of CTSPs for activities such as promotion of national and local mobilizations, increasing law enforcement participation in such mobilizations, and for collaboration with local chapters of police groups and associations that represent diverse groups to gain support for enforcement efforts. In addition, the State plans to coordinate efforts with liquor law enforcement officials, and to conduct training of all law enforcement officers to increase the probability of detection, arrest, and prosecution, including Standardized Field

Sobriety Testing (SFST), Advanced Roadside Impaired Driving Enforcement (ARIDE), and selected officers will receive training in media relations and Drug Evaluation and Classification (DEC).

In addition to the deterrent and remediation benefits of ID enforcement, the decline in DUI arrests over the years from a high of 31,000 to about 15,000 in FY2021, which has exacerbated the issue of funding for the Implied Consent Laboratory (ICL). This lab is essential to the total ID criminal justice effort, since its function is critical to making most DUI cases. The recent decline coupled with the fact that, on average, only 63.9% of the fine money is collected, has created a crisis for the ICL. This problem will be addressed by a planned increased emphasis on DUI detection and arrest. As many officers will be on patrol as the current force will allow. To the extent possible overtime will be used to increase the force. However, reductions in the numbers of patrol officers over the past few years have made it extremely difficult to obtain officer hours even on an overtime basis. Every effort will be made to address these issues.

4.2.1 Drug Recognition Expert (DRE) Program

Alabama is one of 50 states and the District of Columbia to implement the Drug Evaluation and Classification Program (DECP). At the heart of this program is the Drug Recognition Expert (DRE). A DRE is a law enforcement officer trained in detecting and recognizing impairment caused by substances other than alcohol. The Los Angeles Police Department originated the program in the early 1970s when officers noticed that many of the individuals arrested for driving under the influence had very low or zero alcohol concentrations. The officers reasonably suspected that the arrestees were under the influence of drugs but lacked the knowledge and skills to support their suspicions. Working with medical doctors, research psychologists, and other medical professionals they developed a simple, standardized procedure for recognizing drug influence and impairment, which led to the first DRE program. In the early 1980s, the National Highway Traffic Safety Administration (NHTSA) took notice of the LAPD's DRE program. The two agencies collaborated to develop a standardized DRE protocol, which led to the DEC program. During the ensuing years, NHTSA and various other agencies and research groups examined the DEC program. Their studies demonstrated that a properly trained DRE could successfully identify drug impairment and accurately determine the category of drugs causing such impairment. Recent studies conducted by NHTSA have established the value of DRE programs.

The DRE comes into a case at the request of the arresting officer. A typical scenario: An officer initiates a traffic stop and subsequently conducts a DUI investigation. The officer makes a determination that the driver is impaired; however, there is either no evidence of alcohol consumption or a subsequent breath test result is not consistent with the level of impairment. At this point, the officer requests a DRE evaluation. The DRE follows a 12-step systematic and standardized process utilized by all DREs regardless of agency. The DRE uses a drug classification system based on the premise that each drug within a category produces similar signs and symptoms. It is a pattern of effects rather than a specific effect that is unique to the category.

Without proper training and adequate resources, the average law enforcement officer will find that convicting the drug-impaired driver is almost infinitely more difficult than convicting the alcohol-impaired driver. The presence of DREs in Alabama will affect both the highway and the courtroom.

A continuation and expansion of this program will enable law enforcement officers to better detect, apprehend, assess, document, and subsequently help the prosecutor prove, in court, the defendant was under the influence of a drug while driving (or committing any other improper act, e.g., domestic violence and homicide). There are also community outreach programs in place that utilize certified DREs such as Drug Impairment Training for the Educational Professional (DITEP) in which DREs go into school systems and teach educators observable signs and effects of drug impairment.

AIDPC acknowledges the fact that many courts are not familiar with the program. Major efforts will be integrated into the training to focus on community outreach and informing judges, lawyers, and law enforcement officers on the structure of the DRE program and its benefits.

Action Items:

- Increase the number of DREs by at least six per year over the next four years. *See* Section 4.7.1.3.
- Under the oversight of the AIDPC, establish a special task force to study methods for the better implementation of the DRE program, especially to promote its value so that state and local agencies will take advantage of the DRE training opportunities.
- Determine if legislation or other state policies might be needed in support of the DRE program.

4.2.2 Intensive Focused Impaired Driving Enforcement Effort

4.2.2 Intensive Focused Impaired Driving Enforcement Effort

Appendix A demonstrates the data-driven, evidenced-based approach that the State is taking to addressing its Impaired Driving problems. It consists of the following:

- Table of the impaired driving hotspots listed by ADECA. This shows how this distribution has changed over the years since the FY2009 (criteria for hotspots remaining constant).
- FY2025 18 Interstate hotspots.
- FY2025 36 State/Federal route hotspots.
- FY2025 83 Intersection locations
- FY2025 28 Non-mile posted segment locations

For each of these categories a distribution by region is given and then the specific locations within each of the regions are listed with further detailed data about that location. The breakdown is by CTSP region to facilitate each of the coordinators' efforts in administering this program through law enforcement agencies within their regions. The following table provides the number of hotspots determined for the past nine fiscal years, and a projection for FY2024 based on three years of data (CY2020-CY2022).

Number of Impaired Driving Hotspots for Three-Year Periods

Fiscal Year	Calendar Year Data Used	Impaired Driving Hotspots
2009	2005-2007	191
2010	2006-2008	190
2011	2007-2009	194
2012	2008-2010	143
2013	2009-2011	144
2014	2010-2012	179
2015	2011-2013	198
2016	2012-2014	176
2017	2013-2015	166
2018	2014-2016	160
2019	2015-2017	350
2020	2016-2018	151
2021	2017-2019	153
2022	2018-2020	133
2023	2019-2021	149
2024	2020-2022	162
2025	2021-2023	165

In each case, a list of locations is provided for those locations. As an example, the listing that follows is for the highest ID crash locations (involving an injury or fatality) in the "mileposted Interstate" category. Locations are defined as being segments of roadway that are no longer than five miles in length. Injury (including fatal) crashes are used to surface the more severe crashes.

Top 17 Mileposted Interstate Locations (5 miles in length)
in Alabama with 8 or More Impaired Driving Related Crashes
Resulting in Injury or Fatality

Rank	County	City	Route	Beg MP	End MP	Total Crashes	Fatal Crashes	Injury Crashes	Agency ORI
1	Mobile	Mobile	I-65	1.1	6.1	8	3	5	Mobile PD
2	Jefferson	Bessemer	I-59	111.5	116.5	9	2	7	Bessemer PD
3	Shelby	Alabaster	I-65	235.6	240.6	10	2	8	Alabaster PD
4	Tuscaloosa	Rural Tuscaloosa	I-59	84.5	89.5	8	3	5	ALEA - Tuscaloosa Post
5	Jefferson	Birmingham	I-59	121.9	126.9	10	2	8	Birmingham PD
6	Jefferson	Hoover	I-65	246.6	251.6	14	2	12	Hoover PD
7	Montgomery	Montgomery	I-85	0.5	5.5	8	2	6	Montgomery PD
8	Lee	Auburn	I-85	50.9	55.9	10	1	9	Auburn PD
9	Jefferson	Rural Jefferson	I-65	263.8	268.8	8	1	7	ALEA - Birmingham Post
10	Madison	Huntsville	I-565	14.6	19.6	11	1	10	Huntsville PD
11	Lowndes	Rural Lowndes	I-65	139.8	144.8	9	2	7	ALEA - Montgomery Post
12	Jefferson	Rural Jefferson	I-59	116.7	121.7	12	1	11	ALEA - Birmingham Post
13	Tuscaloosa	Rural Tuscaloosa	I-59	89.6	94.6	8	1	7	ALEA - Tuscaloosa Post
14	Madison	Huntsville	I-565	9.5	14.5	8	1	7	Huntsville PD
15	Jefferson	Rural Jefferson	I-20	137	142	9	0	9	ALEA - Birmingham Post
16	Jefferson	Hoover	I-65	251.6	256.6	17	0	17	Hoover PD
17	Lee	Opelika	I-85	58	63	10	0	10	Opelika PD
18	Jefferson	Birmingham	I-65	257.9	262.9	8	0	8	Birmingham PD

Action Items:

- Conduct the intensive ID enforcement effort as detailed in Appendix A.
- Continue to perform annual problem identifications to keep the focused enforcement efforts totally data driven and evidence based and based on this information implement these efforts throughout each year.

4.3 Publicizing High Visibility Enforcement

The Plan calls for the State to communicate its impaired driving law enforcement efforts and other efforts being put forth by the criminal justice system to increase the public perception of the risks of detection, arrest, prosecution and sentencing for impaired driving. The details given below specify a year-round communications plan that: (1) provides emphasis during periods of heightened enforcement, (2) provides sustained coverage throughout the year, (3) includes both paid and earned media and (4) uses messages consistent with national campaigns. Every effort is being made to ensure that the publicity is culturally relevant, appropriate to the audience, and based on market research.

Action Items:

- Promote the concept among law enforcement that their efforts are multiplied at least 100% using effective PI&E.
- Study the current PI&E efforts to determine areas in which they can be improved.
- Implement improved PI&E efforts as are determined by the evaluations.

4.4 Prosecution

Impaired Driving cases are perhaps the most litigiously complex cases in the judicial system; yet the most inexperienced prosecutors routinely handle them. In recognition of this, the AIDPC calls for the State to utilize a comprehensive program to prosecute and publicize impaired-driving-related efforts visibly, aggressively, and effectively. It further recommends that the Traffic Safety Resource Prosecutor (TSRP) coordinate and deliver training and technical assistance to prosecutors handling impaired driving cases throughout the State.

Action Items:

- Continue to maintain a dedicated full time TSRP to provide ongoing support to all prosecution cases.
- Support the TSRP in conducting several training courses as specified in Section 4.7.
- Develop and implement a pilot program called DUI/Drug (DUI/D) days. This will be a new program with the goal of ensuring that the courts and all other relevant persons in the criminal justice system are aware of the services provided by the Alabama Department of Forensic Sciences (ADFS), and that they are taking advantage of those services. This will also serve to reduce ADFS time out of the laboratory via effective time management and planning. The plan calls for the initiation of DUI/D days within specific courts, where a toxicologist is present to cover DUI/D specific docket for the day. This pilot should start out in some of the larger jurisdictions that have more DUI/D cases. Consideration will also be given to utilizing video conferencing testimony when available.

4.5 Adjudication

The plan calls for the State to impose effective, appropriate, and research-based sanctions, followed by close supervision and the threat of harsher consequences for continued non-compliance. Drug courts are being used to reduce recidivism among repeat and high-BAC offenders. These special courts involve all criminal justice stakeholders (prosecutors, defense attorneys, probation officers, and judges) along with alcohol and drug treatment professionals, and they use a cooperative approach to systematically change participant behavior. Every effort that strengthens the effectiveness of the enforcement and prosecution is also strengthened by knowledgeable, impartial, and consistent adjudication. The Plan calls for state-of-the-art education for judges, covering Standardized Field Sobriety Test (SFST), Drug Evaluation and Classification (DEC), alternative sanctions, and emerging technologies.

The Plan calls for the continued use and expansion of Drug and DUI (alcohol) Courts to improve case management and to provide access to specialized personnel, speeding up disposition and adjudication, recognizing that these courts increase access to testing and assessment to help identify impaired driving offenders (especially those with addiction problems) thus serving to prevent them from reoffending. Recognizing their value in sentence monitoring and enforcement, the Plan calls for increased staffing and training for probation programs with the necessary resources, including technological resources, to monitor and guide offender behavior. Drug and DUI Courts currently only cover a limited number of jurisdictions, and their scope is limited due to funding considerations. Alabama supplements its Drug/DUI Courts with its Court Referral Officer (CRO) Program, which is a more comprehensive program that has been in existence for decades.

The AIDPC also considered the application of the *24/7 Sobriety Program* in the context of all the programs discussed in this section. This program, which was piloted in South Dakota in 2005 and is reportedly a tremendous success to this day, is exactly as its name implies – a twenty-four-hour-a-day and seven-day-a-week sobriety program that has the one goal of total sobriety for each of the defendants in the program. The program monitors total abstinence from alcohol and drugs by requiring the participant to submit to the testing of their blood, breath, urine, or other bodily samples to determine the presence of alcohol, marijuana, or any controlled substance in their body. Targets of the program would include persons convicted of a second or subsequent DUI as well as persons convicted of a first DUI offense with a blood-alcohol content of 0.15 or greater. Participation in the program might also be a condition of bond for persons arrested for DUI who have previously been convicted of DUI at least once. While many details would need to be resolved, it was resolved that this program should be given consideration as a treatment option in all existing remediation initiatives.

4.5.1 Court Referral Officer Program

Court Referral Officer (CRO) and Court Referral Education programs have been helping court officials and defendants in Alabama for over 30 years. The CROs perform evaluations and develop a customized case management plan for each defendant that can include education, treatment, self-help meetings, adult education, drug and alcohol screening, volunteerism, anger management, and other available resources, resulting in a multi-faceted plan to address the circumstances that resulted in the criminal behavior. The education programs have been providing Level I, Level II, and Youth & Juvenile Classes as needed. The Mandatory Treatment Act of 1990, signed by the late Governor Guy Hunt, requires that defendants that have been arrested or found guilty of any alcohol-related or drug-related offense follow the guidelines laid down in that Act. The goal of the Alabama Court Referral Program is to combat substance abuse by providing monitoring, drug testing, case management, and education. During FY2023, CROs evaluated 17,174 defendants that were court ordered, and performed 96,556 monitoring sessions.

The following is an excerpt from MTA §12-23-2 establishing the CRO Program:

> "To establish a specialized court referral officer program to promote the evaluation, education and rehabilitation of persons whose use or dependency on alcohol or drugs directly or indirectly contributed to the commission of an offense for which they were convicted in state or municipal courts, and to establish mandatory alcohol and drug abuse treatment programs to provide treatment and rehabilitation for these identified offenders."

The Act requires that defendants that are arrested or found guilty be ordered to an evaluation by the Court Referral Officer (CRO). Once the CRO has completed the evaluation, the defendant will know if (and what type of) education classes or treatments are recommended. The Act recognizes that not every person that gets a DUI necessarily has a drinking or drug problem, and that not all substance abuse problems are remediated by the same treatments or treatment types. Thus, educational classes and other treatment options have been made available for those that do not meet the more advanced treatment criteria. The Administrative Office of Courts (AOC) provides Level I, Level II, and youth/juvenile educational classes.

The following provides the authority for courts to refer defendants to authorized education and/or treatment programs (MTA § 12-23-6):

> "In order to affect the purposes of this chapter, all courts exercising jurisdiction over alcohol and drug related offenses shall be authorized to refer a defendant to a court referral program for evaluation and referral to an appropriate education and/or treatment program. At a minimum, every defendant who is not referred directly to drug or alcohol treatment shall be required to complete an alcohol and drug education program certified by the Administrative Office of Courts."

If the CRO suspects that the defendant has a substance abuse problem, a treatment referral is recommended. CROs must refer defendants to certified treatment programs to ensure treatment quality and integrity.

The Alabama Department of Mental Health (DMH) is charged with the responsibility to develop policies, procedures, and provisions for certification (MTA § 12-23-9):

> "The Department of Mental Health shall develop policies and procedures which shall be followed in the treatment of offenders. These programs shall be certified by the Alabama Department of Mental Health or the Joint Commission on Accreditation of Health-care Organizations (JCAHO).)"

The plan calls for a standardized method including the following steps that defendants follow in their legal process:

1. Accept defendant into the program.
2. Refer the defendant to the appropriate CRO.
3. CRO performs an evaluation of the defendant that involves standardized testing, interview, and a review of past history.
4. CRO determines the level of education or treatment required.
5. CRO recommends placement into education/treatment, which is validated by the appropriate judge within the jurisdiction.
6. Monitoring (monthly or more frequent, depending on defendant's compliance) to include drug testing, checking on required self-help meetings, assisting with job opportunities, assuring payment of court costs and fines, and checks on compliance with education/treatment or any other requirements of the court. Continued guidance, encouragement, and support is offered when appropriate and needed.
7. Reports on non-compliance will require additional action by the court.
8. Upon completion, the defendant is presented with a certificate of completion.

The above process is monitored closely, and defendants' actions are tracked in the Model Impaired Defendant Access System (MIDAS), which was developed as a National Model by NHTSA in the early 2000s. This system ensures that a defendant will not be in the CRO program in two different jurisdictions at the same time. It also keeps track of repeat offenders and ensures that all defendants are treated uniformly and fairly. It also produces data on defendants that have been used in the past to validate the assignments of defendants by CROs to the appropriate levels. For more details and recommendations regarding MIDAS, *see* Section 6.3.

Action Items:

- Continue to implement the CRO program as described by the various planning activities above.
- Ensure that the CRO program is well-publicized throughout the judicial system and take whatever steps are necessary to ensure that this program is being used universally.
- Provide additional liaison between the CRO program and newly developing Drug and DUI (Alcohol) Courts, which are described below in Sections 4.5.2 and 4.5.3.
- Continue to maintain and further modernize MIDAS so that it stays current with existing information technology developments.

4.5.2 Specialty Courts

Specialty Courts (including Adult Drug Court, Juvenile Drug Court, Mental Health Court, Veterans Treatment Court, and Family Drug Court) exist in most of the counties in Alabama. The objective of Specialty Courts is to give offenders the tools they need to defeat their addictions or overcome other negative stimuli and learn to live sober and productive lives. If this goal is achieved, the outcome will be a marked reduction in prison populations, reduced crime, and

greater cost savings to Alabama taxpayers. Persons meeting certain acceptance criteria may choose to be sent to a Specialty Court in lieu of traditional justice system case processing. Specialty court participants are:

1. Provided with intensive treatment and other services they require to get and stay clean/sober;
2. Held accountable by the Specialty Court judge for meeting their obligations to the court, society, themselves, and their families;
3. Randomly and regularly tested for drug use;
4. Required to appear in court frequently so that the judge may review their progress; and
5. Rewarded for doing well or sanctioned when they do not live up to their obligations.

Currently, there are 45 Adult Drug Courts, 7 Juvenile Drug Courts, 14 Mental Health Courts, 27 Veterans Treatment Courts, and 14 Family Drug Courts.

Action Items:

- Publicize the benefits of Specialty Courts to stakeholders in the justice system, as well as members of the community;
- Assure effective liaison between Specialty Courts and the CRO Programs; and
- Consider ways that the concept of the 24/7 Sobriety Program can be integrated into the Specialty Court programs.

4.5.3 DUI (Alcohol) Courts

Currently Alabama has one DUI (Alcohol) Court (henceforth-called *DUI Court*) in Alabama. It is in the Birmingham area, and it serves as a model for potential future expansion of these courts throughout the state. DUI Courts are analogous to Drug Courts, with the obvious exception that they deal with alcohol as opposed to other drugs. However, DUI Courts operate within a post-conviction model, as described in the excerpt from dwicourts.org, which follows:

- DUI Court is an accountability court dedicated to changing the behavior of the hardcore DUI offenders. The goal of DUI Court is to protect public safety by using the highly successful Drug Court model that uses accountability and long-term treatment.
- A DUI Court is an accountability court dedicated to changing the behavior of the *hardcore offenders* arrested for DUI.
- *Hardcore DUI offenders* are defined as individuals who drive with a BAC of 0.15 percent or greater, or who are arrested for or convicted of driving while intoxicated after a prior DUI conviction.
- The goal of DUI Court is to protect public safety by using the highly successful Drug Court model that uses accountability and long-term treatment to address the root cause of impaired driving: alcohol and other substance abuse.
- Unlike Drug Courts, however, DUI Courts operate within a post-conviction model. (Source: http://www.dwicourts.org/learn/about-dwi-court/what-dwi-court https://www.dwicourts.org/whatsatstake/)

Action Items:

- Fully evaluate the costs and benefits in terms of both recidivism and its total impact on the criminal justice system.
- Modify the current model in any areas where deficiencies are found.
- Once validated, extend this model to at least five counties per year.
- Consider ways that the concept of the 24/7 Sobriety Program can be integrated into the DUI Court program.

4.5.4 Pardons and Paroles

The role of the Alabama Board of Pardons and Paroles is well-established in the Alabama criminal justice system. These offenders include those who are currently being supervised for one or more offenses and include at least one conviction of a DUI offense. This agency is committed to providing quality adult probation and parole services for the State. These services are provided to the Board of Pardons and Paroles in matters involving paroles, pardons, restoration of voting rights, and other issues within the Board's authority and responsibility. Pre-sentence, pre-probation, youthful offender and other investigations and reports are provided to the sentencing courts throughout the state. The agency has sixty-one field offices positioned and staffed to provide these services to the courts and supervision for those offenders placed on parole by the Board or probation by the courts. For more information, see: http://www.pardons.state.al.us/

The action items below are recommended to provide better supervision and reduce recidivism for DUI offenders currently being supervised by Pardons and Paroles (P&P).

Action Items:

- Advise probationers and parolees that impaired driving is not inclusive to only alcohol, and that individuals should be aware of their intake of narcotic and other pain medications.
- Officers should conduct evening and night home visits to help identify those offenders who are still drinking or abusing drugs.
- Establish a system such that arrest reports (details of offenses) for offenders under supervision from other agencies can be received within 72 hours of arrest for an impaired offense, and that an alert is sent out to the appropriate supervisor if/when there is any change to the offender's record. This would greatly expedite the offender being brought back before the court or officer of the board in a timely manner.
- The following may not be policy decisions within P&P, and might require legislation; they have been included in the legislative recommendations of Section 4.1:
    - Have the courts add a special condition of "no alcohol" for probationers convicted of impaired driving.
    - For those so sentenced, require defendants to be fitted with a Continuous Alcohol Monitoring Device that constantly measures the offender's alcohol content and communicates with P&P remotely, greatly reducing the number of visits and the amount of time the probation officers must spend meeting with impaired driving probationers. This will be a major savings in time and other resources for P&P in the area of impaired driving offender monitoring.

4.6 Administrative Sanctions and Driver License Programs

The State uses administrative sanctions, including the suspension or revocation of an offender's driver's license; the impoundment, immobilization, or forfeiture of a vehicle; the impoundment of a license plate; and the use of ignition interlock devices. As resources allow, consideration will be given to other licensing activities in preventing, deterring, and monitoring impaired driving, particularly among novice drivers. It is recognized that publicizing these and related efforts is part of a comprehensive communications program. Separate consideration and definition will be given to this overall category in the following areas:

- Administrative license suspension/revocation,
- Vehicle sanctions, and
- Supportive programs.

4.6.1 Administrative License Suspension/Revocation

Administrative sanctions in Alabama include the State's Administrative Per Se Suspension (APS), and the use of ignition interlock devices (IIDs). This plan calls for the continued implementation of these laws and their potential modification as areas of the law are determined to need strengthening or further clarification.

The Alabama Law Enforcement Agency (ALEA) has been authorized by the Legislature to impose administrative penalties (generally called Administrative Per Se) including driver's license suspension. The procedure is as follows upon arrest for impaired driving. If a breath test indicates .08% blood-alcohol or more, or the individual refuses to submit to chemical testing, his/her driver's license is immediately confiscated, and the driver is issued a pink sheet of paper that serves as a formal notice of suspension and a temporary license valid for 30 days (during which the driver can obtain a hearing). After an ID arrest, the individual has ten days within which to request an administrative hearing to contest the suspension. This is called the Administrative Per Se Suspension (APS). The APS suspension is based upon Alabama's "implied consent" laws: any person driving in this state is "presumed" to imply his/her consent to chemical testing if s/he is suspected of drunk driving.

Action Items:

- The Council will rely on ALEA and council members to notify the group for any changes that need to be addressed and promoted.

4.6.2 Vehicle Sanctions

In 2011, Alabama became the 50th state to enact driving under the influence (DUI) legislation that includes the use of ignition interlock devices (IIDs). Alabama courts are required to order the installation and maintenance of IIDs for first-time offenders, if their blood alcohol levels are .15 percent or higher, and for all repeat DUI offenders. IIDs must be installed on any vehicles operated by the offender. The offender is responsible for all costs associated with the IID, including installation, monthly lease payments, service fees and removal. If the offender installs IIDs on multiple vehicles, the offender is responsible for the costs of installing and maintaining all the IIDs. Offenders must obtain IIDs from service providers that are certified by the State of Alabama. The IID is a small device that is connected to the vehicle's ignition system. The driver is required to blow into the device to submit a breath sample. The IID measures the alcohol content of the breath sample and compares it to a pre-set limit. If the breath sample indicates an alcohol level that is above the pre-set limit, the IID prevents the vehicle from starting.

IIDs require drivers to submit random breath samples while operating vehicles. If a "rolling re-test" results in a breath alcohol content that is above a pre-set limit, the IID initiates an alarm sequence that includes sounding the vehicle's horn and flashing the vehicle's lights. The alarm sequence continues until the driver turns off the vehicle or submits a clean breath sample. In some situations, the IID initiates a permanent lockout phase during which the vehicle cannot be started under any circumstances. The vehicle must be towed to the service provider to have the permanent

lockout released. The offender is responsible for all costs associated with the permanent lockout, including towing and fees imposed by the service provider.

In Alabama, a first-time DUI offender is subject to a jail sentence of up to one year, a $600 to $2,100 fine and a mandatory 90-day suspension of driving privileges. If the first-time DUI conviction involves a blood alcohol content of 0.15 or higher, refuses a chemical test, a child under 14 years of age is in the vehicle, or causes a crash where someone is injured, then the court shall order the installation and maintenance of an IID.

A second-time offender is subject to jail time up to one year, a $1,100 to $5,100 fine, the revocation of driving privileges for a period of one year and an IID requirement. There is a mandatory minimum sentence of 5 days to serve in county or municipal jail or community service for not less than 30 days.

A third DUI conviction within five years of the previous conviction results in jail time up to one year, a $2,100 to $10,100 fine, the revocation of driving privileges for a period of three years and an IID requirement. The mandatory minimum jail sentence for this offense is 60 days in the county or municipal jail; there is no option for community service once you reach this level.

A fourth and subsequent DUI conviction within five years of a previous conviction is a Class C felony. The offender serves up to ten years in jail, with a minimum of 10 days to be served in the county jail, pays a $4,100 to $10,100 fine, has driving privileges revoked for a period of five years and must meet an IID monitoring requirement.

In addition to the jail time, fines, suspension or revocation of driving privileges and ignition interlock device requirements, individuals convicted of DUI in Alabama are required to pay a $100 fee to the Impaired Drivers Trust Fund for each conviction.

Action Items:

- Investigate (by the AIDPC or a select panel) any issues regarding the full implementation of the IID laws to ensure that any bottlenecks are removed and that the law can be fully implemented.
- Conduct a study of the current IID statute to determine if a wider scope of implementation is justified, and if so, implement that extension.

4.6.3 Supportive Programs

Programs under this category reinforce and complement the State's overall program to deter and prevent impaired driving. Examples include the following types of countermeasures:

- Graduated driver licensing (GDL) for novice drivers, especially those parts of the GDL that deal with impaired driving;
- Education programs that explain alcohol's effects on driving,
- The State's zero-tolerance laws for minors, and

- Efforts to prevent individuals from using a fraudulently obtained or altered driver's license.

Action Items:

- Evaluate all current supportive programs to determine those that are most effective. Evaluations may be of existing programs within the state or similar programs in other states.
- Move forward emphasizing those programs that show the greatest promise for success in Alabama.

4.7 Training

The various training activities described in this section will be conducted through cooperation between the Traffic Safety Resource Prosecutor (TSRP) and ALEA. The TSRP provides critical support to Alabama's prosecutors, law enforcement officers, judges and other traffic safety professionals by offering competency and expertise in the area of impaired driving. The continued support for the TSRP is an essential element of this plan. The functions of this office include providing ongoing technical assistance and legal research to prosecutors on a myriad of legal issues pertaining to impaired driving prosecution. In addition to providing support and supervision for the training described in this section, the TSRP assists and/or leads prosecutions of impaired driving cases upon request. The TSRP also monitors legislative matters that impact impaired driving laws and communicates with other state agencies involved in impaired driving cases to promote uniform enforcement and prosecution of Alabama's impaired driving laws. These activities are further described on the following website maintained by the TSRP:

http://www.alabamaduiprosecution.com/

The following categories define the following sections:

- Law enforcement training,
- Interdisciplinary training, and
- Public education training.

4.7.1 Law Enforcement Training

4.7.1.1 Standardized Field Sobriety Tests (SFSTs)

The Standardized Field Sobriety Testing (SFST) training prepares police officers and other qualified persons to administer and interpret the results of the SFST battery. This training, under the auspices and direction of the International Association of Chiefs of Police (IACP) and the National Highway Traffic Safety Administration (NHTSA), has experienced remarkable success in detecting and apprehending intoxicated drivers since its inception in the 1980s.

As in any educational training program, an instruction manual is considered a "living document" that is subject to updates and changes based on advances in research technology and science. A thorough review is made of information by the Drug Evaluation Classification Program (DECP) Technical Advisory Panel (TAP) of the Highway Safety Committee of the IACP with contributions from many sources in health care science, toxicology, jurisprudence, and law enforcement. Based on this information, any appropriate revisions and modifications in background theory, facts, examination, and decision-making methods are made to improve the quality of the instruction as well as the standardization of guidelines for the implementation of the SFST Training Curriculum. The reorganized manuals are then prepared and disseminated, both domestically and internationally.

It is the responsibility of the State SFST Coordinator to work with the training section of the Alabama Peace Officers Standards and Training Commission (APOST) to ensure that any curriculum changes are disseminated to the various police academies across the state. It will also be the responsibility of the State SFST Coordinator to monitor SFST instructor training and audit academies to ensure the standardization of the SFST Training Curriculum.

4.7.1.2 Advanced Roadside Impaired Driving Enforcement (ARIDE)

The Advanced Roadside Impaired Driving Enforcement (ARIDE) program was developed by the National Highway Traffic Safety Administration (NHTSA) with input from the International Association of Chiefs of Police (IACP) Technical Advisory Panel (TAP) and the Virginia Association of Chiefs of Police. ARIDE was created to address the gap in training between the Standardized Field Sobriety Testing (SFST) and the Drug Evaluation and Classification (DEC) Program.

The SFST program trains officers to identify and assess drivers suspected of being under the influence of alcohol, while the DEC Program provides more advanced training to evaluate suspected drug impairment. The SFST assessment is typically employed at roadside, while an officer trained as a drug recognition expert (DRE) through the DEC Program conducts a drug evaluation in a more controlled environment such as at a detention facility.

ARIDE is intended to bridge the gap between these two programs by providing officers with general knowledge related to drug impairment and by promoting the use of DREs in states that have the DEC Program. One of the more significant aspects of ARIDE is its review and required student demonstration of the SFST proficiency requirements. The ARIDE program also stresses the importance of securing the most appropriate biological sample to identify substances likely causing impairment.

ARIDE is a 16-hour training course that can be taught by a team made up of DRE Instructors and assisted by an SFST Instructor for the SFST Refresher portion of the training. The planned training will be conducted under the control and approval of the DEC Program state coordinator. NHTSA

and IACP mandate that state-qualified and IACP-credentialed DRE instructors manage this course. This requires that they (1) hold currently valid certificates as DREs; (2) have completed the joint NHTSA and IACP DRE Instructor Training Course; and (3) have completed the required delivery of both classroom and certification training, under the supervision of credentialed DRE instructors.

A qualified SFST instructor will generally instruct the SFST Refresher portion leading to the preparation and evaluation of participants during the SFST proficiency examination. In addition to their occupational competencies, all instructors must be qualified trainers. They need to understand, and be able to apply, fundamental principles of instruction. Perhaps most importantly, they need to be competent coaches since much of the classroom training is devoted to hands-on practice. The quality of coaching will have a major impact on the success of those practice sessions. Every effort will be made to assure that as many instructors as possible are graduates of the NHTSA
IACP DRE Instructor Training Course.

Certain blocks of the instruction may enlist instructors with special credentials. For example, a physician would be well qualified to assist or teach session IV that covers medical aspects of impairment, and a prosecutor might be a good choice for session VIII that deals with legal issues. The training also promotes interaction with representatives from the state's prosecution community. Part of the course is intended to be taught by a local prosecutor or the state's traffic safety resource prosecutor (TSRP).

AIDPC members determined that there is a misconception in many courts and by prosecutors that
Horizontal Gaze Nystagmus (HGN) is not admissible as evidence in a courtroom. A concerted effort will be made in the ARIDE training to extend the reach (by students as well as trainers and administrators) to educate the courts and other relevant persons on the admissibility statute, 32-5A-197, to have experts available when needed, and to ensure that officers are administering all tests according to standards, thus ensuring the admissibility of HGN tests. The ARIDE classes will contain no more than 48 students, and they will be conducted statewide.

4.7.1.3 Drug Recognition Expert (DRE) School

Alabama is one of 50 states and the District of Columbia to implement the Drug Evaluation and Classification Program (DECP). At the heart of this program is the Drug Recognition Expert program
(DRE). A DRE is a law enforcement officer trained in detecting and recognizing impairment caused by substances other than alcohol. The Los Angeles Police Department originated the program in the early 1970s when officers noticed that many of the individuals arrested for driving under the influence had very low or zero alcohol concentrations. The officers reasonably suspected that the

arrestees were under the influence of drugs but lacked the knowledge and skills to support their suspicions. Working with medical doctors, research psychologists, and other medical professionals they developed a simple, standardized procedure for recognizing drug influence and impairment, which led to the first DRE program. In the early 1980s, the National Highway Traffic Safety Administration (NHTSA) took notice of the LAPD's DRE program. The two agencies collaborated to develop a standardized DRE protocol, which led to the DEC program. During the ensuing years, NHTSA and various other agencies and research groups examined the DEC program. Their studies demonstrated that a properly trained DRE could successfully identify drug impairment and accurately determine the category of drugs causing such impairment. Recent studies conducted by NHTSA have established the value of DRE programs.

The DRE comes into a case at the request of the arresting officer. A typical scenario: An officer initiates a traffic stop and subsequently conducts a DUI investigation. The officer decides that the driver is impaired; however, there is either no evidence of alcohol consumption or a subsequent breath test result is not consistent with the level of impairment. At this point, the officer requests a DRE evaluation. The DRE follows a 12-step systematic and standardized process utilized by all DREs regardless of agency. The DRE uses a drug classification system based on the premise that each drug within a category produces similar signs and symptoms. It is a pattern of effects rather than a specific effect that is unique to the category.

Without proper training and adequate resources, the average law enforcement officer will find that convicting the drug-impaired driver is exceedingly more difficult than convicting the alcohol-impaired driver. The presence of DREs in Alabama will affect both the highway and the courtroom.

A continuation and expansion of this program will enable law enforcement officers to better detect, apprehend, assess, document, and subsequently help the prosecutor prove, in court, that the defendant was under the influence of a drug while driving (or committing any other improper act, e.g., domestic violence and homicide). There are also community outreach programs in place that utilize certified DREs such as Drug Impairment Training for the Educational Professional (DITEP) in which DREs go into school systems and teach educators observable signs and effects of drug impairment.

AIDPC acknowledges the fact that many courts are not familiar with this program. Major efforts will be integrated into the training to focus on community outreach and informing judges, lawyers, and law enforcement officers on the structure of the DRE program and its benefits. The plan calls for a training selected police officers and other approved public safety officials as drug recognition experts (DREs) through a three-phase training process:

1. Drug Recognition Expert Pre-School (16 hours)
2. Drug Recognition Expert DRE School (56 hours)
3. Drug Recognition Expert Field Certification (Approximately 40 – 60 hours)

The training relies heavily on the Standardized Field Sobriety Tests (SFST's), which provide the foundation for the DEC Program. Once trained and certified, DREs become highly effective officers skilled in the detection and identification of persons impaired by alcohol and/or drugs. Because of the complexity and technical aspects of the DRE training, not all police officers may be suited for the training. Experience has shown that training a well-defined group of officers proficient in impaired driving enforcement works well and can be very effective.

The plan is to conduct at least two (2) DRE Schools annually choosing from graduates of an approved ARIDE program with no more than 25 students in each class and conducted at regional locations throughout the state.

4.7.1.4 "Cops in Court" Trial Testimony Skills Course

Designed for law enforcement officers with a wide variety of trial testimony experience, this course includes discussion and instruction on all aspects of trial preparation and courtroom testimony in an impaired driving case. Experts in the fields of law enforcement and prosecution present the curriculum to law enforcement officers, allowing the participants to learn firsthand the challenges and difficulties in impaired driving cases. This course is designed to be taught in one day and includes a mock trial presentation, with optional direct and cross-examination exercises. Additional potential topics discussed throughout the Instructor Manual are used to expand the curriculum according to student needs and interests. Segments of this training include:

- Understanding the Importance of Courtroom Testimony,
- Report Writing,
- Courtroom Preparation,
- Direct Examination,
- Cross-Examination, and
- Mock Trial.

4.7.2 Interdisciplinary Training

4.7.2.1 Prosecuting the Drugged Driver: A Trial Advocacy Course

The *Prosecuting the Drugged Driver* course uses a curriculum developed by the cooperative efforts of NHTSA and the National Traffic Law Center. This course is designed to create a teambuilding approach between prosecutors and law enforcement officers to aid in the detection, apprehension, and prosecution of impaired drivers. Prosecutors and law enforcement officers participate in interactive training classes taught by a multidisciplinary faculty.

The course begins with an overview of the drug-impaired driving problem in the United States and the substantive areas of training that police officers receive to be certified as a drug recognition expert (DRE). Learning about drug categories, signs and symptoms of drug influence, the role of the DRE in establishing impairment, and the role of toxicology in these cases will assist the prosecutor in developing methods for effectively and persuasively presenting this information in court. The course also addresses how to qualify the DRE as an expert witness in court and how to respond to common defense challenges.

Each participant gets the opportunity to prosecute a mock case including the opportunity to conduct a direct examination of a DRE and a toxicologist. Each phase of the trial is videotaped. Participants receive critiques of the live and videotaped presentations from experienced faculty. Throughout every stage of the course, participants receive direct feedback on their courtroom skills with assistance in how to compose arguments that are more persuasive and deliver presentations that are more dynamic.

4.7.2.2 "Prosecuting the Impaired Driver: DUI Cases" Trial Advocacy Course

This course is designed to create a team-building approach between prosecutors and law enforcement officers to aid in the detection, apprehension, and prosecution of impaired drivers. Prosecutors and law enforcement officers participate in interactive training classes taught by a multidisciplinary faculty focusing on building skills in trying an alcohol-related impaired driving case. The course includes a discussion of the role of the prosecutor in both alcohol-impaired driving cases and community safety, and it covers standardized field sobriety tests, the pharmacology of alcohol and chemical testing. Each participant prosecutes a "case," and is critiqued on his/her live performance and given an opportunity to view him/herself on videotape. Throughout every stage of the course, participants receive direct feedback on their courtroom skills with assistance in how to compose arguments that are more persuasive and deliver presentations that are more dynamic.

4.7.2.3 "Lethal Weapon: DUI Homicide" Advanced Trial Advocacy Course

Vehicular fatality cases are complex, requiring prosecutors to have a working knowledge of crash reconstruction and toxicology, as well as skills to work with expert witnesses and victims. The Lethal Weapon course is focused on assisting prosecutors to develop their knowledge and skills in trying these cases. A substantial portion of this four-and-a-half-day course involves presentations on crash reconstruction, technical investigation at the scene, and toxicology. The course also provides an advanced trial advocacy component in which participants receive a case file and participate in mock trial sessions where each of them conducts every stage of the trial. A unique feature of Lethal Weapon is the opportunity for prosecutors to conduct direct and cross-examinations of actual reconstructionist and toxicologists. Specifically, this course teaches prosecutors to:

- Learn how a crash reconstructionist determines speed from skid marks and vehicle damage
- Determine how vehicle and occupant kinematics assist in cases involving driving identification
- Understand the prosecutor's role at the scene of a traffic fatality
- Calculate BAC by learning alcohol "burn-out" rates and the Widmark formula

The primary participants in this training are prosecutors with a preferred experience level of four years of trying impaired driving cases. It is also of interest to prosecutors who currently handle vehicular fatality cases, and to experienced prosecutors who want to increase their understanding of the technical evidence required to prove guilt in cases involving vehicular fatalities, and at the same time improve their trial advocacy skills. The plan is for this course to be conducted every five years at the direction of the TSRP.

4.7.2.4"Protecting Lives/Saving Futures" Interactive Participant-Centered Course

This model curriculum is designed to jointly train police and prosecutors in the detection, apprehension and prosecution of alcohol and drug impaired drivers. This training is unique in two ways:

1. Experts in the fields of toxicology, optometry, prosecution, and law enforcement designed and developed the curriculum; and
2. Law enforcement officers and prosecutors are trained together by the experts in their respective disciplines. The training is the first of its kind to be developed nationally and is adaptable to all local jurisdictions.

The joint-training approach allows all the involved disciplines to learn from each other inside a classroom, as opposed to the *ad hoc* communications outside the courtroom shortly before a trial.

Each profession learns firsthand the challenges and difficulties the others face in impaired driving cases. This allows for greater understanding on the part of police officers as to what evidence prosecutors must have in an impaired driving case. Conversely, this training gives prosecutors the opportunity to learn to ask better questions in pretrial preparation, as well as in the courtroom. Both prosecutors and law enforcement officers learn firsthand from toxicologists about breath, blood, and urine tests. A nationally recognized optometrist instructs police and prosecutors about the effects of alcohol and other drugs on an individual's eyes, specifically, HGN. In turn, optometrists and toxicologists gain a greater appreciation for the challenges officers face at the scene in gathering forensic evidence and the legal requirements prosecutors must meet in presenting evidence in court. This exchange of information is beneficial to all involved. Some of the key subjects of the training include:

- Initial detection and apprehension of an impaired driver;

- Standardized Field Sobriety Tests (SFSTs) and the effective documentation of observations of suspects;
- The medical background of the Horizontal Gaze Nystagmus (HGN) test, including the correlation of HGN to alcohol and other drugs;
- The scientific background of the breath/blood/urine alcohol and drug tests, and advantages and limitations of forensic testing;
- Identification of impairment due to alcohol as well as other drugs; and
- The effective presentation of evidence in court through trial preparation exercises.

AIDPC members determined that there is a misconception in many courts and prosecutors that HGN is not admissible. A concerted effort will be made in the conduct of this course to extend its reach (by students as well as trainers and administrators) to educate the courts and other relevant person to have experts available when needed, and to ensure that officers are administering all tests according to standards, thus assuring the admissibility of HGN tests.

4.7.2.5 TSRP Regional Training

This course is designed each summer to address current DUI trends in Alabama and incorporate the interdisciplinary trainings outlined above. Speakers from around the state are utilized to enhance each participant's specialization in investigating and prosecuting DUIs. The course is held throughout the state of Alabama four to five times a year.

4.7.3 Public Education Training

Drug Impairment Training for Educational Professionals (DITEP)

Generally, instructors for this course are DREs who are also SFST Instructors, DRE instructors, or DREs with other verifiable instructor training. At a minimum, the instructor must have attended the Drug Impairment Training for Educational Professionals (DITEP) orientation briefing.

The planned DITEP training lasts for two days. The first day is for all who are interested in this type of training. Day one works well for high-level administrators since it focuses on general drug impairment and policies. Day two is best suited for those who will conduct the hands-on evaluations, e.g., school nurses and school resource officers.

Day one of the course program outline includes the following: introduction and overview; drugs in society; policy, procedures, and rules; overview of alcohol drug identification, categories and effects; contacting the parent(s); and other reference materials. Day two incudes: the use of eye examinations; vital signs; divided attention tests; poly drugs; assessment process; and conclusions and applications.

The plans call for a DITEP course to be conducted annually utilizing the DRE instructors from

Alabama. This course would be conducted at the direction of the DRE Coordinator.

5.0 Communication

It is recognized that, in addition to the focused Public Information and Education (PI&E) efforts, every project within the impaired driving program could have some type of communications and public relations component associated with it. It is important that these be coordinated, and for this reason, they will be collectively addressed within this planning document. The goal of the management of this comprehensive PI&E effort will be to ensure that there is coordination regarding the efforts being made. Thus, a comprehensive communications program will be developed that supports priority policies and program efforts and is directed at impaired driving; underage drinking; and reducing the risk of injury, death, and resulting medical, legal, social, and other costs. Therefore, while this category will overlap with efforts made in several other categories where public relations or publicity is part of the countermeasure, the purpose of breaking this out separately is to maintain coordination among these various efforts. Thus, this section will heavily reference many of the other sections of this plan.

The plan calls for a comprehensive communication program that supports priority policies and program efforts. Communication programs and material will be developed to be culturally relevant and multilingual as appropriate. These will include:

- Development and implementation of a year-round communication plan that includes
    - policy and program priorities;
    - comprehensive research;
    - behavioral and communications objectives;
    - core message platforms;
    - campaigns that are audience-relevant and linguistically appropriate;
    - key alliances with private and public partners;
    - specific activities for advertising, media relations, and public affairs;
    - special emphasis periods during high-risk times; and
    - evaluation and survey tools;
- Development and employment of a communications strategy principally focused on increasing knowledge and awareness, changing attitudes, and influencing and sustaining appropriate behavior;
- The use of traffic-related data and market research to identify specific audience segments to maximize resources and effectiveness; and
- The adoption of a comprehensive marketing approach that coordinates elements like media relations, advertising, and public affairs/advocacy.

The remainder of this chapter will be organized according to the agencies that will be involved in the communications efforts.

5.1 Alabama Department of Economic and Community Affairs (ADECA)

5.1.1 General Public Service Announcements

ADECA houses a Communications and External Affairs Division whose focus is to share and promote activities and campaigns in which the department is involved. It is the principal contact for the news media, and the division prepares and distributes news releases about grants and other ADECA activities. This Division also develops the department's Internet web site. ADECA has also worked with a media production group to develop Public Service Announcements (PSAs) that demonstrate creativity and have maximum impact on Alabama drivers. Both paid and earned media support these PSAs. The following illustrate a pair of videos that were designed to be used together (although not necessarily at the same times).

https://mpg.auburn.edu/project/adeca-lets/

The idea is to demonstrate the contrast between making the right decision and making the wrong decision. The gap between seeing the two is anticipated to increase the effectiveness of the total package.

Action Items:

- Continue to use ADECA social media platforms and website to promote safe driving messages and awareness of Impaired Driving campaigns;
- Continue to support the year-round PSA efforts.

5.1.2 Safe Home Alabama (http://www.safehomealabama.gov/)

The SafeHomeAlabama.com traffic safety information portal provides comprehensive information both to the traffic safety community and to the general public, with the primary goal of reducing the number of people killed and the overall suffering and economic loss caused by traffic collisions. Being comprehensive, it has the objective of providing a communication conduit among all of those involved in traffic safety so that these efforts can be better coordinated. While it centers on efforts within Alabama, much of the information that is available has universal applicability.

The tabs on the top of the screen organize this site. Each tab contains a drop-down list of page titles that point toward specific subjects within the overall category. The following gives a brief overview of each of the tabs:

- SHA Home – recommended for those new to the site, this tab contains a drop-down of overall information about traffic safety in general and the site itself. It points to several data sources on both this site and others and gives indexes to all the pages on this site.
- Service Groups – these are private advocacy groups and charitable institutions that have special interests in traffic safety.
- Government Agencies

    - State Agencies – this is a long list of the various governmental agencies that are involved in traffic safety in Alabama, as well as some of the multi-agency programs. In addition, there is a link to traffic safety web sites in all other states.
    - Federal Agencies – NHTSA, FHWA, FMCSA, and USDOT Volpe Center.
- University – university-based traffic safety efforts within Alabama.
- Safety Topics – items under this tab generally refer to information and training materials generally used in public information and education efforts. The safety topic of particular concern for Impaired Driving is under the Driver Issues tab within this high-level topical tab.
- Data/Analysis – This provides information on and access to Alabama and FARS crash data (e.g., CARE and ADANCE) as well as a number of efforts that are largely data intensive, such as Impaired Driving (ID), Distracted Driving (DD), Road Improvements, the SHSP Document and Work Zone efforts. It also contains information about the Alabama electronic crash report (eCrash) and the electronic citation issuance system (eCite).

Updates to SafeHomeAlabama.gov average at least two per workday, with the entire traffic safety community of Alabama invited to submit updates. All additions or modifications are posted by the Twitter SafeHomeAlabama account and can easily be located by #SafeHomeAL and seen by a more general audience on #TrafficSafety. Tweets are sent out as soon as updates are made informing interested parties of the most recent updates and providing them with direct links to their topics of interest.

Action Items:

- Continue to support the ongoing maintenance of the SHA web site with current topics.
- Bring the current website up to date with a new version that assists users in finding what they are looking for on the site.

5.2 Alabama Law Enforcement Agency (ALEA)

The Alabama Law Enforcement Agency's Public Affairs Officers/External Affairs is involved in many ongoing communications activities. The following provides some examples of current efforts:

- Sends out press releases and often holds press conferences prior to major travel holiday periods to promote highway safety and highlight our enforcement efforts.
- Performs enforcement efforts that target the driver behaviors that contribute to crashes with injuries and fatalities and provides PI&E and PSAs in conjunction with these enforcement efforts.
- Partners in these communication and enforcement efforts with other traffic safety agencies in the state, such as ALDOT, ADECA and local law enforcement agencies.
- Participates in NHTSA campaigns such as Click It or Ticket, Drive Sober or Get Pulled Over, etc.

- Participates in the ADECA funded advertising campaigns by appearing in TV commercials and billboards, for Alabama as well as holding press conferences (Public Affairs Unit).
- Involves their Public Affairs Officers (PAOs) in:
    - Conducting safety programs daily to promote safe driving habits.
    - Participating in traffic safety campaigns alongside private companies. The latest push has been Texting while Driving. Recently, we participated in campaigns with AT&T and TOYOTA to promote the dangers of distracted driving.
    - Being interviewed by local media to discuss/promote ID reduction efforts.
- Involves the PI/E Unit in:
    - Participating in the ADECA funded campaigns, by appearing in TV commercials and billboards, for Alabama as well as holding press conferences.
    - Working with FMCSA on PSAs promoting commercial vehicle safety and changes/additions to the Federal Commercial Vehicle rules & regulations.
    - Working with ALEA Driver License Division to educate the public about changes/additions to the driver license laws and issues.
    - Designing and producing "rack cards" posters and other educational type material to educate the public about various safety topics, including impaired driving.

While some of these efforts might focus on areas other than impaired driving, every effort is made to leverage all these activities to focus on what has been established as the major killers on our highways today, and one of the highest-ranking factors is that of impaired driving.

Action Items:

- Continue current communication efforts with strong coordination with ADECA, ALDOT and local agencies.
- Continue to leverage current activities to deal with impaired driving; an example is the addition of an impaired driving cause to the weekly news releases being sponsored in part by ALDOT to include the number caused by impaired driving. Currently only the number of fatalities that were not properly restrained is being publicized.
- Evaluate current PSA and PI&E efforts to establish strengths and weaknesses and move forward accordingly.

5.3 ALDOT Strategic Highway Safety Roundtable

This is a newly launched effort by the Alabama Department of Transportation (ALDOT) and ADECA to network with agencies and groups throughout the state and collaborate on traffic safety initiatives. The meetings involve participants from the following organizations:

- Alabama Department of Transportation
- Alabama Law Enforcement Agency
- Alabama Department of Economic and Community Affairs
- Federal Highway Administration

- National Highway Traffic Safety Administration
- Alabama Department of Public Health
- Alabama Department of Education
- Alabama Transportation Institute at The University of Alabama
- University of Alabama Center for Advanced Public Safety
- Transportation Policy Research Center at UA/ATI
- Operation Lifesaver
- Mothers Against Drunk Driving (MADD)
- All other traffic safety advocate groups that wish to participate.

This program consists of quarterly stakeholder meetings, an active research-based highway safety marketing campaign and an expanding program of community outreach. This program, under the branding umbrella of "Drive Safe Alabama," will strive to focus on messaging and activities related to seat belt use, speeding, distracted driving, impaired driving, work zone safety, railroad crossing safety, bicycle, and pedestrian safety, and Alabama's Move Over Law.

Action Items:

- Establish a formal liaison between the Roundtable and the AIDPC.

5.4 Traffic Safety Resource Prosecutor (TSRP)

The Office of Prosecution Services, which is a state agency, employs the Traffic Safety Resource Prosecutor (TSRP). A website (http://alabamaduiprosecution.com) maintained by the TSRP provides general ongoing information on courses and addressing the many issues that prosecutors of ID cases face. Prosecutors are tasked with making a number of decisions in every case; chief among them involves determining which witnesses to call to lay the proper foundation for the admission of evidence. For example, in impaired driving cases involving a blood draw and a subsequent analysis of the blood, it is essential to establish that a qualified person drew the blood. Beyond that, the officer's testimony should be sufficient to establish the chain of custody of the blood evidence from the moment of the blood draw to the point where the officer places it in the evidence locker at the police station or delivers it to the Alabama Department of Forensic Sciences via U.S. mail or hand delivery. In addition to other information provided, the TSRP maintains a Facebook & Twitter account designed to improve the ability of Alabama prosecutors and law enforcement to effectively communicate with the TSRP.

Action Items:

- Maintain support for the TSRP and promote the communication efforts that are being made through the website and social media.

5.5 Alabama Department of Public Health

The Alabama Department of Public Health, Injury Prevention Branch is involved in several ongoing communications activities. The following provides some examples of the current efforts:

- The Injury Prevention Branch website (http://www.adph.org/injuryprevention/) includes links to more detailed information on Motor Vehicle, Prescription Drug, and other injury topics and is periodically updated with new reports, press releases, infographics, etc. from CDC and other partners.
- The Alabama Child Death Review System (ACDRS) reviews all non-medical child (<18yo) deaths in Alabama and does in-depth local multidisciplinary reviews of several categories, including vehicular deaths. ACDRS publishes its findings, trend analysis, and prevention recommendations in annual reports. This effort also has developed and maintains a website (http://www.adph.org/cdr/) with all this information and more, as well as links to state and national partners.
- ACDRS maintains a separate website (http://www.adph.org/teendriving/) and original publications, media ads, and social media content as part of a multifaceted Teen Driving Safety Campaign that focuses, along with other risk topics, on the dangers of impaired driving. In its first year, this campaign was individually singled out for recognition by the U.S. Secretary of Transportation.

- The Alabama Child Passenger Restraint Program (CPRP) disseminates information, conducts Car Seat Clinics, and distributes literature in support of its efforts.
- The Alabama Violent Death Reporting System (AVDRS) is a program that was scheduled to begin in FY2017 under a new National Violent Death Reporting System grant from CDC. AVDRS will review and analyze violent deaths in Alabama across all ages and its involvement in quantifying and preventing deaths due to impaired driving at all ages will be similar to what ACDRS (above) does for children less than 18 years old.
- ADPH and the Injury Prevention Branch also frequently collaborate in communication and outreach efforts with other traffic safety partners in the state, such as ALDOT, ADPS, ADECA, and state and local law enforcement agencies.

Many of these efforts cover multiple areas of fatality and injury risks but, due to the known prevalence, high risk, and compounding effect of impaired driving, it remains a primary focus in reviews, recommendations, and prevention strategies.

Action Items:

- Continue current/ongoing education, outreach, and prevention campaigns that address risks and trends of impaired driving.
- Use ACDRS/AVDRS findings to inform and support all appropriate impaired driving prevention efforts.
- Continue current communication efforts with strong coordination with ALDOT, ALEA, ADECA, and other partners.

6.0 Substance Abuse: Screen, Assessment, Treatment and Rehabilitation

This plan recognizes that impaired driving frequently is a symptom of a larger alcohol or other drug problems. Many first-time impaired driving offenders and most repeat offenders have alcohol or other drug abuse or dependency problems. Without appropriate assessment and treatment, these offenders are more likely to repeat their crimes. In addition, alcohol use leads to other injuries and health care problems. Frequent visits to emergency departments present an opportunity for intervention, which might prevent future arrests or motor vehicle crashes, and result in decreased alcohol consumption and improved health.

This part of the plan has the goal of encouraging employers, educators, and health care professionals to implement systems to identify, intervene, and refer individuals for appropriate substance abuse treatment. This effort will be organized according to the following components:

- Screening and assessment
    - Within the criminal justice system
    - Within medical and health care settings
- Treatment and Rehabilitation
- Monitoring of Identified Past Impaired Drivers.

6.1 Screening and Assessment

This plan calls for employers, educators, and health care professionals to have a systematic program to screen and/or assess drivers to determine whether they have an alcohol (or other drug) abuse problem and, as appropriate, briefly intervene or refer them for appropriate treatment. A marketing campaign will be developed for each of these to promote year-round screening and brief intervention to medical, health, and business partners and to other pertinent audiences. Special emphasis on screening and assessment will be given to that occurring within the criminal justice system and within medical and health care settings.

6.1.1 Criminal Justice System

The plan calls for the development of a system whereby people convicted of an impaired driving offense will be assessed to determine whether they have an alcohol/drug abuse problem, and to effectively determine what treatment they need. One objective is to make this assessment required by law and completed prior to sentencing or reaching a plea agreement.

Action Items:

- *See* Sections 4.5.1 (Court Referral Officer Program)

6.1.2 Medical and Health Care Settings

To the extent possible, the medical and health care industry will be involved in screening. The plan calls for professionals within medical or health care settings to screen any adults or adolescents who they see to determine whether they may have an alcohol or drug abuse problem. If the person is found to have an alcohol/drug abuse or dependence problem, a brief intervention should be conducted and, if appropriate, the person should be referred for assessment and further treatment.
While this approach is the ideal, it is recognized that issues of privacy and medical record confidentiality may prevent this ideal from being reached.

The Alabama Department of Public Health (ADPH) has established the Prescription Drug Monitoring Program (PDMP) to promote the public health and welfare by detecting diversion, abuse, and misuse of prescription medications classified as controlled substances under the Alabama Uniform Controlled Substances Act. PDMP monitors the distribution of prescription medications classified as controlled substances under the Alabama Uniform Controlled Substances Act. Under the Code of Alabama, 1975, § 20-2-210, which has enabled ADPH to establish, create, and maintain a controlled substances prescription database program. This law requires anyone who dispenses Class II, III, IV, or V controlled substances to report the dispensing of these drugs to the database. PDMP goals include:

- To provide a source of information for practitioners and pharmacists regarding the controlled substance usage of a patient;
- To reduce prescription drug abuse by providers and patients;
- To reduce time and effort to explore leads and assess the merits of possible drug diversion cases; and
- To educate physicians, pharmacists, policy makers, law enforcement, and the public regarding the diversion, abuse, and misuse of controlled substances.

Action Items:

- Establish liaison between the AIDPC and the PDMP efforts to improve awareness in all involved.
- If warranted augment the AIDPC with an appropriate representative from ADPH.

6.2 Treatment and Rehabilitation

Screening is of no value unless it is followed up by effective treatment and rehabilitation. The plan calls for a coordinated effort among health care professionals, public health departments, and third-party providers to establish and maintain treatment programs for persons referred through the criminal justice system, medical or health care professionals, and other entities. The goal is to ensure that offenders with alcohol or other drug dependencies begin appropriate

treatment and complete recommended treatment, if appropriate as a condition for their licenses to be reinstated.

Action Items:

- *See* Section 4.5.1 (Court Referral Officer Program).

6.3 Monitoring of Identified Past Impaired Drivers

The State established a program called the Model Impaired Driver Access System (MIDAS) well over a decade ago to facilitate close monitoring of identified impaired drivers. Continued controlled input, access to, and maintenance/enhancements of, this impaired driver tracking system, with appropriate security protections, are essential. Monitoring functions are currently housed in the Administrative Office of the Courts (AOC), and it is recognized that this system and the
information generated by it needs to be made more readily available to driver licensing, judicial, corrections, and treatment agencies. MIDAS can determine the status of all offenders in meeting their sentencing requirements for sanctions and/or rehabilitation and it has the capability to alert courts of noncompliance. Additional efforts may be required to ensure that monitoring requirements are established by law to ensure compliance with sanctions by offenders and responsiveness of the judicial system so that noncompliant offenders are handled swiftly, either judicially or administratively. It is critical that local drug courts also use MIDAS to monitor ID offenders.

Action Items:

- Maintain the Court Referral Officer (CRO) Program as described in Section 4.5.1.
- Enhance and modernize MIDAS to take advantage of the many advances in technology that have occurred since its development.

7.0 Program Evaluation and Data Collection

The State currently has easy access through the Critical Analysis Reporting Environment (CARE) to reliable data sources (e.g., crash reports and citations) that are being analyzed for problem identification and program planning. Several different types of evaluations are being performed to effectively measure progress, to determine program effectiveness, to plan and implement new program strategies, and to ensure that resources are allocated appropriately. CARE has been set up to process FARS and several other data sources. If it is seen to be essential to problem identification or evaluation, it will be extended to process other available data sources (e.g., Census or CODES) to fully support the ID program and planning efforts. A statewide Traffic Records Coordinating Committee (TRCC) has been established to represent the interests of all public and private sector stakeholders and the wide range of disciplines that need the information to guide the development and the use of records system for all phases of traffic safety. CARE is used daily to satisfy requests from the wide variety of interests in the traffic safety community.

MIDAS (Model Integrated Defendant Access System) is a case management tool originally developed for the State of Alabama Court Referral Program, and now additionally utilized by specialty courts (Drug Court, Veterans Treatment Court, Mental Health Court, Family Drug Court) and Community Corrections Programs. This web-based application was developed by the Administrative Office of Courts under the leadership of the Alabama Supreme Court Chief Justice and the Administrative Director of Courts, and with funding from the National Highway Safety Traffic Administration. MIDAS continues to be hosted and managed by the Administrative Office of Courts to: (1) identify impaired drivers; (2) maintain a complete driving history of impaired drivers; and (3) receive timely and accurate arrest and conviction data from law enforcement agencies and the courts.

All information obtained through MIDAS shall be used ONLY for official criminal justice activities. Such information shall be used and disseminated in strict compliance with applicable federal and state laws, regulations, policies, and procedures including, but not limited to, Drivers Privacy Protection Act (18 U.S.C. § 2721 et. seq., Public Law 103-322), §13A-10-82, §36-25-5 and §36-25-8, Cade of Alabama 1975.

This section will continue with discussions of the problem identification, an evaluation of current activities, and future plans.

7.1 Problem Identification Process

Table 7.1 provides the context for the problem identification results summarized in this section. This table is sorted so that the crash type category with the highest number of fatal crashes

(fatalities in the case of occupant restraints) is listed first, descending to the crash type category with the lowest number of fatal crashes listed last.

The categories given in Table 7.1 are not mutually exclusive (e.g., you could have unrestrained passengers in an alcohol/drug crash that involved speeding). However, they still tend to demonstrate the relative criticality of each of the categories. Clearly impaired driving is one of the most critical factors in fatality causation. For this reason, the State has put considerable emphasis on impaired driving countermeasures, and extensive analyses (exemplified by Appendixes A and B) have been performed to determine the best approaches to combatting this problem.

Table 7.1: Crash Data Organized by Top Fatality Causes – CY2023

Crash Type (Causal Driver)	Fatal Number	Fatal %	Injuries	Injury %	PDO No.	PDO %	Total
Seat Belt Restraint Fault*	407	4.13%	3,731	37.87%	5,660	57.46%	9,851
ID/DUI All Substances	168	3.43%	1,703	34.73%	2,882	58.78%	4,903
Speed Involved	165	2.28%	2,252	31.14%	4,691	64.86%	7,233
Hit Obstacle on Roadside	138	2.58%	1,600	29.93%	3,534	66.12%	5,345
Wrong Way Items	122	3.69%	725	21.92%	2,365	71.49%	3,308
Pedestrian Involved	120	16.06%	554	74.16%	31	4.15%	747
Fail to Yield or Ran (All)	111	0.36%	8,236	26.98%	21,591	70.74%	30,522
Large Truck Involved	99	1.06%	1,684	18.01%	7,434	79.49%	9,352
Mature (65 or Older) Causal	98	0.72%	2,813	20.80%	10,364	76.65%	13,522
License Deficiency Causal	90	1.73%	1,517	29.23%	3,463	66.72%	5,190
Motorcycle Involved	89	5.60%	1,040	65.41%	423	26.60%	1,590
Youth (16-20) Causal Driver	82	0.41%	3,905	19.48%	15,728	78.46%	20,047
Aggressive Operation	69	2.51%	708	25.80%	1,879	68.48%	2,744
Distracted Driving	55	0.42%	2,532	19.11%	10,454	78.90%	13,249
Drowsy Driving	40	1.27%	1,129	35.76%	1,931	61.17%	3,157
Utility Pole	27	1.20%	674	30.08%	1,434	63.99%	2,241
Vehicle Defects – All	21	0.59%	741	20.84%	2,728	76.72%	3,556
Work Zone Related	19	1.07%	358	20.10%	1,386	77.82%	1,781
Vision Obscured	11	0.97%	263	23.13%	844	74.23%	1,137
Bicycle Involved	11	4.68%	168	71.49%	46	19.57%	235
Railroad Trains	7	11.86%	19	32.20%	32	54.24%	59
Child Restraint Fault*	5	0.21%	313	12.89%	2,111	86.91%	2,429
School Bus Involved	3	0.51%	76	12.97%	494	84.30%	586
Roadway Defects – All	0	0.00%	27	23.48%	83	72.17%	115

* All categories list the number of crashes except for the "Restraint Deficient" and "Child Restraint Deficient" categories. The restraint categories cannot accurately be measured by number of crashes, so they list number of unrestrained persons for each severity classification.

** Grants Management Solution Suite

Given that reducing impaired driving crashes is so important to fatality and injury reduction in general, the next step in the problem identification process is to determine the "who, what, where, when and why" of crashes involving impaired drivers, and thus to determine the best approaches for countermeasure implementation (i.e., the "how"). This starts by determining those types of crashes that are will be targeted for impaired driver countermeasure implementation.

For the data-driven enforcement program, specific locations were identified where there were concentrations of crashes involving impaired drivers. Once the hotspots were defined and the locations were found using the Critical Analysis Reporting Environment (CARE) software, the Community Traffic Safety Program (CTSP/LEL) Coordinators from across the state were given information on the hotspot locations for the state. They were also provided detailed hotspot reports specific to their regions to assist them in their focused efforts. Using the reports and maps developed for each region, the CTSP/LEL Coordinators will further develop their plans, including the time schedule and work assignments, for their region that focuses on the hotspot locations. The goals set on a regional basis will be in line with the goals and strategies laid out statewide. More details of these processes are given in Section and Appendixes A and B.

Action Items:

- Continue to support a data-driven evidence-based approach to all countermeasures to which analytical improvement might apply (e.g., locations, PI&E/PSA targeting, etc.).
- Evaluate the processes being used to identify hot spots and other key indicators for decision-making and determine of the problem identification process itself might be improved.
- Continue to improve both the process and the results of the process recognizing value of the Deming approach of "continuous improvement forever."

7.2 Evaluation Process

Evaluations generally fall into two categories: administrative and effectiveness. *Administrative evaluations* determine if what was planned in each project was performed, independent of what effects it might have had. These types of evaluations will be part of the reporting process that is required of all projects funded through ADECA, with special emphasis upon meeting all the NHTSA requirements in this regard.

Effectiveness evaluations strive to determine the crash or severity reductions that result from any given countermeasure project. The plan calls for the use of CARE to provide effectiveness evaluations on as many of the countermeasures given in this plan as resources will allow. These

will be performed on a prioritized basis depending upon the resources consumed and the criticality of the
countermeasure project. CARE could get down to specific locations on a before-and-after basis and compare test areas against control areas. However, it must be recognized that to perform a scientific evaluation on many of the proposed projects would cost as much (if not more in some cases) as the projects themselves. Where NHTSA and other federal agencies have supported evaluations in the past, these studies will not be repeated if it is seen that the results are transferable to the State.

In those cases where evaluations are warranted, CARE will be used to home in on specific subsets of the crash or citation records to ensure that the evaluations are as precise as possible.

Action Items:

- Define those areas that are most critical to the decision-making process for which analytical studies will be cost-beneficial.
- Provide support for those evaluation efforts determined to be most critical.

APPENDIXES

This document contains the following appendixes:

Appendix A. Specific Location Problem Identification Results

Appendix B. General Problem Identification Results

Appendix A. Specific Location Problem Identification Results

This appendix demonstrates the data-driven evidenced-based approach that the State is taking to addressing its Impaired Driving problems. It consists of the following:

- Table of Impaired Driving hotspots. This shows how this distribution has changed over the years since FY2009 (criteria for hotspots remaining constant).
- Top 18 Interstate hotspots.
    - Distribution by region
    - Listing of location
- Top 36 State/Federal route hotspots.
    - Distribution by region
    - Listing of location
- Top 83 intersection locations
    - Distribution by region
    - Listing of location
- Top 28 non-mile posted segment locations
    - Distribution by region
    - Listing of location

In the following table the hotspots for a given fiscal year's selective enforcement is based on the most recent closed-out data that is available the previous complete calendar years; as an example, FY2024 was estimated based on CY2020-2022 data.

Number of Impaired Driving Hotspots for Three-Year Periods

Fiscal Year	Calendar Year Data Used	Impaired Driving Hotspots
2009	2005-2007	191
2010	2006-2008	190
2011	2007-2009	194
2012	2008-2010	143
2013	2009-2011	144
2014	2010-2012	179
2015	2011-2013	198
2016	2012-2014	176
2017	2013-2015	166
2018	2014-2016	160
2019	2015-2017	350
2020	2016-2018	151
2021	2017-2019	153
2022	2018-2020	133
2023	2019-2021	149
2024	2020-2022	162
2025	2021-2023	165

FY2025 Top 18 Mileposted Interstate Locations (5 miles in length) in Alabama with 8 or More Impaired Driving Related Crashes Resulting in Injury or Fatality

Rank	County	City	Route	Beg MP	End MP	Total Crashes	Fatal Crashes	Injury Crashes	Agency ORI
1	Mobile	Mobile	I-65	1.1	6.1	8	3	5	Mobile PD
2	Jefferson	Bessemer	I-59	111.5	116.5	9	2	7	Bessemer PD
3	Shelby	Alabaster	I-65	235.6	240.6	10	2	8	Alabaster PD
4	Tuscaloosa	Rural Tuscaloosa	I-59	84.5	89.5	8	3	5	ALEA - Tuscaloosa Post
5	Jefferson	Birmingham	I-59	121.9	126.9	10	2	8	Birmingham PD
6	Jefferson	Hoover	I-65	246.6	251.6	14	2	12	Hoover PD
7	Montgomery	Montgomery	I-85	0.5	5.5	8	2	6	Montgomery PD
8	Lee	Auburn	I-85	50.9	55.9	10	1	9	Auburn PD
9	Jefferson	Rural Jefferson	I-65	263.8	268.8	8	1	7	ALEA - Birmingham Post
10	Madison	Huntsville	I-565	14.6	19.6	11	1	10	Huntsville PD
11	Lowndes	Rural Lowndes	I-65	139.8	144.8	9	2	7	ALEA - Montgomery Post
12	Jefferson	Rural Jefferson	I-59	116.7	121.7	12	1	11	ALEA - Birmingham Post
13	Tuscaloosa	Rural Tuscaloosa	I-59	89.6	94.6	8	1	7	ALEA - Tuscaloosa Post
14	Madison	Huntsville	I-565	9.5	14.5	8	1	7	Huntsville PD
15	Jefferson	Rural Jefferson	I-20	137	142	9	0	9	ALEA - Birmingham Post
16	Jefferson	Hoover	I-65	251.6	256.6	17	0	17	Hoover PD
17	Lee	Opelika	I-85	58	63	10	0	10	Opelika PD
18	Jefferson	Birmingham	I-65	257.9	262.9	8	0	8	Birmingham PD

FY2025 Top 36 Mileposted State and Federal Route Locations (5 Miles in Length) in Alabama with 8 or More Impaired Driving Related Crashes Resulting in Injury or Fatality

Rank	County	City	Route	Beg MP	End MP	Total Crashes	Fatal Crashes	Injury Crashes	Agency ORI
1	Mobile	Mobile	S-42	18	23	10	4	6	Mobile PD
2	Madison	Huntsville	S-1	330.1	335.1	8	1	7	Huntsville PD
3	Madison	Rural Madison	S-1	346	351	8	2	6	ALEA - Huntsville Post
4	Limestone	Rural Limestone	S-2	65	70	8	0	8	ALEA - Decatur Post
5	Chilton	Rural Chilton	S-22	59.3	64.3	8	1	7	ALEA - Montgomery Post
6	Etowah	Rural Etowah	S-1	267.6	272.6	8	0	8	ALEA - Gadsden Post
7	Marshall	Albertville	S-1	278.2	283.2	8	1	7	Albertville PD
8	Jefferson	Hoover	S-150	7.8	12	8	1	7	Hoover PD
9	Madison	Huntsville	S-2	88.6	93.6	12	2	10	Huntsville PD
10	Madison	Rural Limestone	S-2	83.5	88.5	8	1	7	ALEA - Decatur Post
11	Madison	Rural Madison	S-1	339	344	9	0	9	ALEA - Huntsville Post
12	Baldwin	Foley	S-59	5.4	10.4	10	1	9	Foley PD
13	Jackson	Rural Jackson	S-35	42.6	47.6	8	1	7	ALEA - Huntsville Post
14	Tuscaloosa	Tuscaloosa	S-7	82.2	87.2	8	1	7	Tuscaloosa PD
15	Limestone	Athens	S-2	76.9	81.9	8	0	8	Athens PD
16	Russell	Phenix City	S-8	209	214	8	1	7	Phenix City PD
17	Etowah	Attalla	S-1	262.6	267.6	9	0	9	Attalla PD
18	Russell	Phenix City	S-1	110	115	9	0	9	Phenix City PD
19	Baldwin	Daphne	S-42	35.9	40.9	16	0	16	Daphne PD
20	Cullman	Cullman	S-3	319.9	324.9	9	0	9	Cullman PD
21	Houston	Dothan	S-210	0	5	10	1	9	Dothan PD
22	Marshall	Albertville	S-205	5.4	10.4	9	0	9	Albertville PD
23	Coffee	Enterprise	S-12	178.9	183.9	9	1	8	Enterprise PD
24	Barbour	Eufaula	S-1	63.9	68.9	11	0	11	Eufaula PD
25	Baldwin	Daphne	S-181	13.3	18.3	10	1	9	Daphne PD
26	Marshall	Guntersville	S-1	288.8	293.8	9	0	9	Guntersville PD
27	Baldwin	Gulf Shores	S-59	0	5	9	1	8	Gulf Shores PD

28	Coffee	Enterprise	S-248	0.1	5.1	9	0	9	Enterprise PD
29	Mobile	Rural Mobile	S-42	12.9	17.9	8	0	8	ALEA - Mobile Post
30	Tuscaloosa	Northport	S-6	42.7	47.7	8	0	8	Northport PD
31	Talladega	Childersburg	S-38	32.1	37.1	8	0	8	Childersburg PD
32	Mobile	Prichard	S-17	1	6	8	0	8	Prichard PD
33	Tuscaloosa	Tuscaloosa	S-215	2.1	7.1	13	0	13	Tuscaloosa PD
34	Calhoun	Anniston	S-21	252.2	257.2	13	0	13	Anniston PD
35	Morgan	Decatur	S-3	353	358	9	0	9	Decatur PD
36	Madison	Huntsville	S-53	318.6	323.6	8	0	8	Huntsville PD

FY2025 Top 83 Intersection Locations Statewide with 3 or More Total Impaired Driving Related Crashes

Rank	County	City	Total Crashes	Fatal Crashes	Injury Crashes	Node 1	Route	Location	Agency ORI
1	Mobile	Mobile	4	2	0	2852	5523	GATOTKOCO DR at MILITARY RD	Mobile PD
2	Madison	Huntsville	3	0	3	1345	1028	CARMICHAEL AVE NW at PULASKI PIKE NW	Huntsville PD
3	Madison	Madison	3	0	2	397	1005	ABBY LN at WALL TRIANA HWY	Madison PD
4	Madison	Huntsville	4	0	3	5755	7530	MEM PKWY SER RD W SIDE at UNIVERSITY DR	Huntsville PD
5	Madison	Huntsville	4	0	3	12345	S-53	NO DESCRIPTION AVAILABLE	Huntsville PD
6	Montgomery	Montgomery	4	1	1	4450	S-6	AL-21 at AL-6	Montgomery PD
7	Madison	Huntsville	4	0	3	5701	S-1	MEMORIAL PKY NW at N MEMORIAL PKY	Huntsville PD
8	Lee	Opelika	3	0	2	270	5275	W E MORTON AVE at S LONG ST	Opelika PD
9	Madison	Huntsville	3	0	2	3199	S-53	AL-20 at AL-53	Huntsville PD
10	Jefferson	Birmingham	3	1	0	2365	4587	23RD ST N at MORRIS AVE	Birmingham PD
11	Madison	Huntsville	5	0	3	1399	S-2	MEMORIAL PKY NW at N MEMORIAL PKY	Huntsville PD
12	Mobile	Rural Mobile	3	0	2	8369	1335	CR-11 at GRAND BAY WILMER RD S	ALEA - Mobile Post
13	Madison	Huntsville	3	0	2	4780	5565	SAM SANDLIN RD at NO DESCRIPTION AVAILABLE	Huntsville PD
14	Lee	Auburn	3	0	2	693	S-147	AL-267 at CR-137	Auburn PD
15	Madison	Huntsville	3	0	2	4107	S-53	AL-53 at CAMERON RD SW	Huntsville PD
16	Jefferson	Birmingham	3	0	2	3478	3293	NO DESCRIPTION AVAILABLE	Birmingham PD
17	Madison	Huntsville	3	0	2	2714	6298	EXECUTIVE DR NW at SPARKMAN DR NW	Huntsville PD
18	Madison	Huntsville	3	0	2	5344	S-2	MOORES MILL RD at NO DESCRIPTION AVAILABLE	Huntsville PD
19	Jefferson	Birmingham	3	0	2	4125	0685	3RD AVE S at 83RD ST S	Birmingham PD
20	Madison	Huntsville	4	0	3	8022	S-53	AL-53 at ARDMORE HWY	Huntsville PD
21	Madison	Huntsville	5	0	2	10162	S-2	CROMWELL CIR at DEAD END	Huntsville PD

22	Madison	Huntsville	9	0	5	2356	S-53	AL-2 at AL-53	Huntsville PD
23	Madison	Huntsville	5	0	3	3563	7219	JOHNSON RD SW at TRIANA BLVD SW	Huntsville PD
24	Madison	Huntsville	5	0	3	3625	S-53	AIRPORT RD SW at S MEMORIAL PKY	Huntsville PD
25	Mobile	Rural Mobile	5	0	4	8248	1145	CR-28 at JIM MCNEIL LOOP RD E	ALEA - Mobile Post
26	Madison	Huntsville	4	0	2	2065	5626	DRAKE AVE SW at TRIANA BLVD SW	Huntsville PD
27	Jefferson	Bessemer	4	0	3	913	S-5	AL-5 at AL-7	Bessemer PD
28	Jefferson	Bessemer	4	0	2	674	1247	CR-52 at CR-6	Bessemer PD
29	Walker	Jasper	3	0	1	1294	S-5	PECAN PL at NO DESCRIPTION AVAILABLE	Jasper PD
30	Montgomery	Montgomery	3	0	2	4449	1254	AL-21 at AL-6	Montgomery PD
31	Tuscaloosa	Tuscaloosa	3	0	1	4135	5177	23RD AVE at 4TH ST	Tuscaloosa PD
32	Lauderdale	Florence	3	0	1	743	5312	AL-13 at AL-2	Florence PD
33	Jefferson	Fultondale	3	0	1	540	S-3	AL-3 at CR-121	Fultondale PD
34	Lauderdale	Florence	5	0	2	317	S-2	AL-13 at AL-157	Florence PD
35	Madison	Huntsville	5	0	2	958	6298	PULASKI PIKE NW at SPARKMAN DR NW	Huntsville PD
36	Madison	Huntsville	4	0	1	3411	S-53	AL-53 at JORDAN LN NW	Huntsville PD
37	Madison	Huntsville	9	0	4	1363	5932	OAKWOOD AVE NW at PULASKI PIKE NW	Huntsville PD
38	Montgomery	Montgomery	3	0	2	5013	1254	SPRING VALLEY RD at WOODLEY RD	Montgomery PD
39	Jefferson	Birmingham	3	0	1	3473	no data	NO DESCRIPTION AVAILABLE	Birmingham PD
40	Mobile	Mobile	3	0	1	1359	no data	SALLIE CT at WESLEY LN E	Mobile PD
41	Madison	Huntsville	3	0	1	13569	6298	NO DESCRIPTION AVAILABLE	Huntsville PD
42	Madison	Huntsville	3	0	1	5860	S-2	AL-2 at ENTERPRISE WAY NW	Huntsville PD
43	Madison	Huntsville	3	0	1	2707	6298	SPARKMAN DR at UNIVERSITY DR	Huntsville PD
44	Jefferson	Hoover	3	0	1	846	5067	LORNA RD at PATTON CHAPEL RD	Hoover PD
45	Etowah	Gadsden	3	0	2	1044	S-291	AL-291 at AL-759	Gadsden PD
46	Madison	Huntsville	6	0	2	8024	S-53	AL-53 at ARDMORE HWY	Huntsville PD

47	Madison	Huntsville	4	0	1	4228	S-1	AL-1 at CALIFORNIA ST SE	Huntsville PD
48	Jefferson	Hoover	4	0	1	302	5067	LODGE DR at LORNA RD	Hoover PD
49	Madison	Huntsville	4	0	1	2068	5626	DRAKE AVE SW at WESTWIND CIR SW	Huntsville PD
50	Madison	Huntsville	4	0	1	209	S-1	AL-1 at AL-2	Huntsville PD
51	Montgomery	Montgomery	4	0	2	4481	S-6	AL-21 at AL-6	Montgomery PD
52	Montgomery	Montgomery	3	0	1	1378	8192	ATLANTA HWY SR-8 US-80 at EAST BLVD SER RD S SIDE	Montgomery PD
53	Montgomery	Montgomery	3	0	1	4370	S-8	AL-21 at AL-53	Montgomery PD
54	Madison	Huntsville	3	0	1	3908	6178	W HELENA DR NW at MASTIN LAKE RD NW	Huntsville PD
55	Baldwin	Rural Baldwin	3	0	1	7276	1116	CR-26 at GRANTHAM RD	ALEA - Mobile Post
56	Madison	Huntsville	3	0	1	3858	1028	MASTIN LAKE RD NW at PULASKI PIKE NW	Huntsville PD
57	Mobile	Mobile	3	0	1	1842	6051	GAYLARK RD N at SUNNYVALE LN W	Mobile PD
58	Etowah	Gadsden	3	0	1	1983	S-1	AL-1 at AL-211	Gadsden PD
59	Madison	Huntsville	4	0	1	2566	7228	BOB WALLACE AVE SW at JORDAN LN SW	Huntsville PD
60	Madison	Huntsville	4	0	1	8017	1324	MOORES MILL RD at WINCHESTER RD NE	Huntsville PD
61	Montgomery	Montgomery	4	0	1	4323	8058	AL-271 at CR-626	Montgomery PD
62	Madison	Huntsville	9	0	1	619	S-1	AL-1 at AL-2	Huntsville PD
63	Madison	Huntsville	5	0	0	2161	S-2	AL-2 at PULASKI PIKE NW	Huntsville PD
64	Morgan	Decatur	5	0	0	1004	1089	14TH AVE SE at CYPRESS ST SE	Decatur PD
65	Montgomery	Montgomery	4	0	0	4286	8058	AL-21 at AL-53	Montgomery PD
66	Madison	Huntsville	3	0	0	5405	6185	BAXTER AVE NW at MERRY OAKS DR NW	Huntsville PD
67	Madison	Huntsville	3	0	0	4651	6014	CLINTON AVE E at GREENE ST SE	Huntsville PD
68	Mobile	Rural Mobile	3	0	0	8524	1373	CR-32 at CR-33	ALEA - Mobile Post

69	Madison	Rural Madison	3	0	0	7291	1116	JACK THOMAS RD at MOUNT LEBANON RD	ALEA - Huntsville Post
70	Madison	Huntsville	3	0	0	4754	6017	HOLMES AVE NE at LINCOLN ST NE	Huntsville PD
71	Madison	Huntsville	3	0	0	3698	1028	GREENHILL DR NW at PULASKI PIKE NW	Huntsville PD
72	Madison	Huntsville	3	0	0	5932	no data	NO DESCRIPTION AVAILABLE	Huntsville PD
73	Madison	Huntsville	3	0	0	32184	1031	BILTMORE DR NW at INDIAN CREEK RD NW	Huntsville PD
74	Etowah	Gadsden	3	0	0	978	5659	7TH ST N at S 7TH ST	Gadsden PD
75	Mobile	Mobile	3	0	0	5732	S-16	NO DESCRIPTION AVAILABLE	Mobile PD
76	Autauga	Prattville	3	0	0	890	1002	CR-75 at E MAIN ST	Prattville PD
77	Etowah	Gadsden	3	0	0	2315	S-1	AL-1 at AL-291	Gadsden PD
78	Tuscaloosa	Tuscaloosa	3	0	0	283	5558	15TH ST at HACKBERRY LN	Tuscaloosa PD
79	Jefferson	Hoover	3	0	0	1	4568	NO DESCRIPTION AVAILABLE	Hoover PD
80	Mobile	Mobile	3	0	0	2340	6200	CR-70 at OLD SHELL RD	Mobile PD
81	Tuscaloosa	Tuscaloosa	3	0	0	525	5558	2ND AVE E at FOREST LAKE DR	Tuscaloosa PD
82	Etowah	Attalla	3	0	0	438	5130	NO DESCRIPTION AVAILABLE	Attalla PD
83	Jefferson	Bessemer	3	0	0	1870	2714	AL-150 at LAKESHORE PKY	Bessemer PD

FY2025 Top 28 Segment Locations Statewide with 3 or More Total Impaired Driving Related Crashes

Rank	County	City	Total Crashes	Fatal Crashes	Injury Crashes	Node 1	Node 2	Route	Location	Agency ORI
1	Escambia	Rural Escambia	3	1	1	7834	7833	1033	COWPEN CREEK RD at JERKINS LOOP and COWPEN CREEK RD at JERKINS LOOP	ALEA - Evergreen Post
2	Madison	Rural Madison	3	0	3	7765	63573	2208	COUNTY LAKE RD at MAYSVILLE RD and NO DESCRIPTION AVAILABLE	ALEA - Huntsville Post
3	Madison	Rural Madison	3	1	1	7473	7478	1333	HARVEST RD at W HIGHLANDER RD and HARVEST RD at WALL-TRIANA HWY	ALEA - Huntsville Post
4	Lee	Opelika	3	1	1	1476	1582	5553	AL-38 at BIRMINGHAM HWY and NO DESCRIPTION AVAILABLE	Opelika PD
5	Mobile	Rural Mobile	3	0	2	44639	8730	1524	GLENWOOD RD at GLENWOOD FARMS DR and GLENWOOD RD at NATCHEZ TRACE RD	ALEA - Mobile Post
6	Mobile	Rural Mobile	3	1	0	8191	7681	1216	CR-19 at 16TH ST and CR-19 at CR-24	ALEA - Mobile Post
7	Calhoun	Oxford	3	0	2	1293	1292	6458	Segment: NO DESCRIPTION AVAILABLE	Oxford PD
8	Lee	Rural Lee	3	0	2	7104	7103	1275	CR-275 at CR-279 and CR-272 at CR-275	ALEA - Opelika Post
9	Madison	Huntsville	3	0	2	41443	39798	1229	CECIL ASHBURN DR SE at DONEGAL DR SE and NO DESCRIPTION AVAILABLE	Huntsville PD
10	Jefferson	Mountain Brook	3	0	2	221	636	5165	AL-38 at CHEROKEE RD and CHEROKEE RD at SHERWOOD RD	Mountain Brook PD

11	Tuscaloosa	Tuscaloosa	3	0	2	5030	5203	1185	25TH AVE NE at JACK WARNER PKY NE and HELEN KELLER BLVD at JACK WARNER PKY NE	Tuscaloosa PD
12	Jackson	Rural Jackson	3	0	2	8769	7165	1034	CR-77 at HORIZON LN and CR-337 at CR-377	ALEA - Huntsville Post
13	Houston	Rural Houston	3	0	1	7387	7406	1178	CR-29 at HODGESVILLE RD and CR-29 at 3RD AVE	ALEA - Dothan Post
14	Madison	Rural Madison	3	0	1	8115	8113	1005	CAPSHAW RD at WALL TRIANA HWY and LITTLE RD at WALL TRIANA HWY	ALEA - Huntsville Post
15	Calhoun	Jacksonville	3	0	2	644	7540	1270	ENGLEWOOD DR at MTAIN ST NE and NO DESCRIPTION AVAILABLE	Jacksonville PD
16	Coffee	Rural Coffee	3	0	1	7698	7714	1301	CR-304 at CR-82 and CR-303 at CR-309	ALEA - Dothan Post
17	Elmore	Rural Elmore	3	0	1	9627	8331	1054	R P CREEL LN at NO DESCRIPTION AVAILABLE and CR-3 at BROOKFIELD DR	ALEA - Montgomery Post
18	Baldwin	Summerdale	3	0	1	7513	7527	1171	Segment: NO DESCRIPTION AVAILABLE	Summerdale PD
19	Marshall	Rural Marshall	3	0	1	9281	7605	1543	CR-543 at BLESSING RD and CR-388 at CR-543	ALEA - Huntsville Post
20	Jefferson	Birmingham	3	0	2	4350	4331	no data	Segment: NO DESCRIPTION AVAILABLE	Birmingham PD
21	Lee	Rural Lee	3	0	1	7391	7355	1146	AL-51 at CR-146 and CR-112 at CR-146	ALEA - Opelika Post
22	Madison	Rural Madison	4	0	1	7238	7270	1154	JOE QUICK RD at WIDOW HORNBUCKLE RD and JOE QUICK RD at ROY DAVIS RD	ALEA - Huntsville Post
23	Madison	Rural Madison	3	0	1	9648	38414	1075	LIBERTY HILL RD NW at MONROE RD and MONROE RD at SOYBEAN DR	ALEA - Huntsville Post
24	Houston	Rural Houston	3	0	1	2770	3673	1172	Segment: NO DESCRIPTION AVAILABLE	ALEA - Dothan Post

25	Lee	Auburn	5	0	0	315	316	5047	MAGNOLIA AVE at SR 147 COLLEGE ST and AL-147 at N COLLEGE ST	Auburn PD
26	Madison	Rural Madison	3	0	0	7063	7049	1274	BUTTER AND EGG RD at ELKWOOD SECTION RD and ELKWOOD SECTION RD at WILL HOLT RD	ALEA - Huntsville Post
27	Madison	Rural Madison	3	0	0	7328	63901	1157	PATTERSON LN at PULASKI PIKE and MIMI LN at PATTERSON LN	ALEA - Huntsville Post
28	Limestone	Rural Limestone	3	0	0	7896	7893	1048	HUNTSVILLE BROWNSFERRY RD at LUCAS FERRY RD and HUNTSVILLE BROWNSFERRY RD at MURPHY RD	ALEA - Decatur Post

Appendix B. General Problem Identification Results

Introduction

This section presents the results of a comparison of ID crashes compared to non-ID crashes in the most recent five-year period for which data are available (CY2018-2022). After this, the comparison between ID and non-ID crashes will be presented under the following headings:

- Geographic Factors
- Time Factors
- Factors Affecting Severity
- Driver and Vehicle Demographics

The final section will present the State's Judicial Analysis.

Overall Crashes by Year

Total Crashes by Severity for Calendar Years 2019-2023

	2019	2020	2021	2022	2023	TOTAL
Fatal Injury	846	857	891	909	891	4394
Suspected Serious Injury	3909	3582	3901	3657	3688	18737
Suspected Minor Injury	12799	11338	12376	11893	11886	60292
Possible Injury	14798	11521	11979	10751	11144	60193
Property Damage Only	122623	103506	119198	113685	112891	571903
Unknown	4226	3529	4031	3404	2956	18146
TOTAL	159201	134333	152376	144299	143456	**733665**

Location Analysis

Below is an example of the location analysis conducted in the state.

FY 2025 Top Impaired Driving Statewide Locations

FY2020 - Impaired Driving	Hotspots
Mileposted Interstate Locations	18
State and Federal Routes	36
Intersections	83
Segments	28
TOTAL	165

Impaired Driving (ID) Update for FY2022

A summary of findings are presented below. The first category is a general comparison of all crashes 2022 against 2018-2021.

- **General Comparison of 2022 against 2018-2021**
  - Overall crash frequency for 2022 was 7,252 crashes lower than the average per year totals for 2018-2021. This indicates a general decline in the number of crashes after 2018. Total crashes in 2018 and 2019 were about 16,000 and 15,000, respectively, more than the frequency of crashes in 2022. However, the number of crashes in 2020 were about 9,950 less than the total number of crashes recorded in 2022. The number of crashes recorded in 2022 were over 8,000 lower than those recorded in 2021.
  - In a comparison over the five years, overall fatal crashes generally increased, with 2022 having about 41 more fatal crashes than would be expected from the previous four-year average.
  - A similar a comparison of the calendar years of ID fatal crashes showed a decrease from 182 in 2018 to 179 in 2022 (a decrease of only 3 fatal crashes) and 185 in 2019 to 179 in 2022 (a decrease of only 6 fatal crashes). The total number of fatal crashes in 2020 were 20 less than that of 2022. However, the number of fatal ID crashes in 2021 were 11 more than the number recorded in 2022 (indicating a 6.1% decrease in fatal ID crashes from 2021 to 2022).
  - Considering the overall percentage of ID fatalities to total fatalities, the results for each year from 2018 through 2022 were 21.1%; 22.8%; 18.3%; 21.8% and 20.1%, which was stable except for 2020.

The categories below are obtained from a comparison of ID vs. Non-ID crashes for all five years (2018-2022).

- **Geographical Factors**
    - County - Generally, the over-represented counties are those with combined large population centers and large rural areas, as opposed to the highly urbanized counties or the extremely rural counties. One reason that the highly urbanized counties are under-represented is the large number of low severity crashes that occur there separate and apart from ID crashes. See the rural-urban comparison below. Placed in Max Gain order, the ones with the highest potential for reduction were Baldwin, Madison, Cullman, Limestone, Marshall, Jackson, Morgan, and Blount.
    - City Comparisons of ID crashes to Non-ID Crash Frequency. There is little surprise in this output, which tracks the areas by population. Traffic safety professionals should look for any locations that fall counter to this trend. The county rural areas (virtual cities) with max gains in excess of 160 ID crashes over their expected numbers are: Rural Mobile, Rural Madison, Rural Cullman, Rural Baldwin, Rural Limestone, Rural Tuscaloosa, Rural Blount, and Rural Elmore. [Expected numbers (or expectations) here and below are obtained from the proportion for non-ID crashes.]
    - Overall Area Comparisons Conclusions – Generally those rural areas that are adjacent to (or contain) significant urbanized areas are over-represented, since their urban areas generate more traffic even in the rural areas. Possible factors for relatively fewer severe ID crashes within urban areas include:
        - Less need for motor vehicle travel and shorter distances to the drinking establishments.
        - Larger police presence in the metropolitan areas; and
        - Lower speeds in rural areas.
    - Severity of ID Crashes by Rural-Urban – While only about 41% of ID crashes occur in rural areas, 68.4% of the fatal crashes occur there. Similar results are found for the highest severity of non-fatal ID crashes, with about 57% of suspected serious injury crashes occurring in rural areas. This is obviously the result of higher impact speeds in the rural areas. Note that additional causes of increased severity are given in the Factors Affecting Severity Section, below.
    - Rural/Urban ID Crash Frequency – Not only are impaired driving crashes more severe in rural areas, but the frequency of ID crashes in rural areas is quite high, despite the much lower population and traffic volumes. ID crashes occurred in about 41% rural as compared to about 59% urban. While only 23.16% of the total crashes in the state occurred in the rural areas, the ID proportion of crashes in the rural areas is 41.04%, or about double its expected value (significant odds ratio = 1.772).
    - Highway Classifications – County roads had 1.96 times their expected proportion of crashes, and State routes had about 4% more than expected. All other roadway classifications were under-represented. County road characteristics no doubt contribute to the crash frequency. County roads are also known to be less

"crashworthy" (i.e., they result in more severe crashes at comparable impact speeds).

- Locale – Reflecting the rural over-representation, open country and residential roadways show a high level of over-representation (1.543 and 1.329 odds ratios, respectively) as compared with the more urbanized area types, especially Shopping or Business, which only has about half of its expected proportion.

- **Time Factors**
  - Year – The years 2020 and 2021 are the most over-represented. Odds ratios come down from 2018 to 2019 for ID crashes but significantly increased in 2020 and 2021. By 2022, the odds ratio for ID crashes was back to pre-covid times. In terms of crash frequency, reported ID related crashes have consistently decreased by about 200 crashes from 5723 in 2018 to 5383 in 2020 but increased to 5847 in 2021. The number of ID crashes then significantly decreased to 5005 in 2022. The total number of non-ID crashes followed a similar trend as the ID crashes.
  - Month – The only significant over-representation of ID crashes by month were in March and April, indicating that the number of ID crashes correlated well with the other crashes during the rest of the months, except for October, which was significantly under-represented.
  - Day of the Week – This analysis is not only useful for the typical work week, but it also reflects the typical "holiday weekend" patterns. The days can be classified as follows:
    - Typical work weekday (Monday through Thursday) – these days are under-represented in ID crashes due to the need for many to go to work the following day.
    - Friday – this pattern is also reflected in the day before a weekend (or holiday), i.e., before a day off. The high ID frequency on this day is due to those who are getting an early substance abuse start to the weekend, recognizing that they have no work responsibilities the following day. However, the large numbers of non-ID crashes on Fridays causes Friday to be under-represented.
    - Saturday – the "Saturday" pattern is the worse for ID crashes in that it has both an early morning component (like Sunday) and a late night component (like Friday). So, it could be viewed as a combination of the typical Friday and Sunday.
    - Sunday – since this is the last day of a holiday sequence or weekend, its over-representation comes mainly from those who start on Saturday night and do not complete their use of alcohol/drugs until after midnight. Sunday is the most over-represented day with over twice it expected number of ID crashes; however, the low number of non-ID crashes on Sunday also contributes to this over-representation.

- "Holiday Weekends" – these can be viewed as a sequence of the weekend-pattern sequence. For example, the Wednesday before Thanksgiving would follow the Friday pattern assuming that most are at work on Wednesday. The Thursday, Friday and Saturday would follow the Saturday pattern, and the Sunday at the end of the weekend would follow the typical Sunday pattern. This is the reason that long holiday events (i.e., several days off) can be much more prone to ID crashes than the typical weekend. Three-day weekends typically give Monday off, so that Monday would behave like the typical Sunday, and both the Saturday and Sunday would follow the Saturday pattern.
- Time of Day – The extent to which night-time hours are over-represented is quite striking. Optimal times for ID enforcement would start immediately following any rush hour details and would continue through at least 3:00 to 3:59 AM (odds ratio 4.803). The 4-5 and 5-6 AM hours are also significantly over-represented with odds ratios of 3.107 and 1.293, respectively.
- Time of Day by Day of the Week – This quantifies the extent of the crash concentrations on Friday nights, Saturday mornings and Saturday nights and early Sunday mornings. This is a very useful summary for deploying selective enforcement details, especially during the weekend hours.

- **Factors Affecting Severity**
  - ID Crash Severity -- The rate of injuries and fatalities are consistently higher in ID crashes than that of non-ID crashes. Fatality crashes are nearly 6.8 times their expected proportion, while the two highest non-fatal injury classifications have over two times their expected values when compared with non-ID crashes. The odds ratio is nearly four (3.978) for the highest non-fatal classification, suspected serious injury.

  The other attributes analyzed in this section give the reasons for this disparity.

  - Speed at Impact – All impact speeds above 50 MPH (with the sole exception of 61-65 and 66-70 MPH) are dramatically overrepresented with odds ratios above 2.00. The overrepresentations increase, as expected, with increased speed with 51-55 MPH having an odds ratio of 2.091, and over 100 MPH being 9.643. Past analyses have found the general rule of thumb that for every 10 MPH increase in speeds, the probability of a crash being fatal doubles. This was validated by a cross-tabulation of impact speeds by severity for CY2018-2022.
  - Restraint Use by Impaired Drivers – The impaired drivers are close to 8 times more likely to be unrestrained than the non-ID causal drivers. Clearly ID drivers lose a good part of their concept of risk when they are willing to drive while impaired.
  - Fatality Crashes by Restraint Use for Impaired Drivers – A comparison of the probability of a fatal crash indicates that a fatality is over five (5.05) times more

likely if the impaired driver is not using proper restraints. Generally, one in 60 ID crashes are fatal; but without restraints, the fatal crash ratio is 1 in about 11. So, the combined effect of lower restraint use and higher speeds is a devastating combination that accounts for much of the high lethality of ID crashes.

- Number Injured (Including Fatalities) – Not only are ID crashes generally more severe to the driver, but the number of multiple injuries in these ID crashes is overrepresented as well. This might have something to do with the preference of those going out to socialize to take some of their friends with them. All the multiple injury categories are overrepresented in the ID crashes, as is the single injury classification. The multiple injury classifications of 4, 5 and 6 injured had at least twice their expectations, and the 2 and 3 injuries all had close to twice their expectations (as measured by the Odds Ratio) as well.
- Police Arrival Delay – ID crashes generally had longer police arrival delays; in this case all arrival delays between 0 and 5 minutes and over 31 minutes were overrepresented. There can be little doubt this has to do with the rural nature of these crashes and the potential that the late-night occurrence might not be discovered for some time. Delay times of 91 to 120 minutes had over twice its expected proportion (Odds Ratio 2.077) as compared to non-ID crashes.
- EMS Arrival Delay – Higher EMS delays were overrepresented for impaired driving injury crashes in all categories above ten minutes, and dramatically (over twice the expected) for the very longer times of 61 minutes and above. This obviously contributes to the injury severity of crashes including the chances the crash results in one or more fatalities. As for the very long times, these might be due to the delay in discovering crashes that have run off the roads due to their generally overrepresented rural locations.

- **Driver and Vehicle Demographics**
  - Driver Age – Younger (16 to 20-year-old) drivers have a very serious problem in crash causation even in the absence of impairment. However, ID crashes are not generally caused by youth and inexperience. In fact, 16-18-year-old drivers are highly statistically underrepresented, with Odds Ratios of 0.158, 0.276, and 0.463, respectively, but this under-representation diminishes linearly through age 22, where it first becomes statistically over-represented. The over-representations continue to age 60. There is a bimodal distribution in the 21–60-year-olds; the first group is 21 through about 40; a second group is seen from 41 to 60. Generally, the first of these might be classified largely as social drinkers; while it is inescapable that the middle-aged driver-caused ID crashes are largely attributed to problem drinkers, or those addicted to alcohol or other drugs.
  - Impaired Driver Gender – Impaired Driver Gender – Males are a far greater issue in ID crashes, and if there are countermeasures that can be directed toward them, doing so would be much more cost- effective than those that are not gender-based, all other things being equal. The ratio of male to female causal ID

drivers is close to 3 to 1, with males having 71.90% of the crashes and females having 24.60%.

- Causal Vehicle Type – Pick-ups had a significant overrepresentation and came out at the top of the Max Gain (1662) order because of their number of ID involvements. Motorcycles were also highly overrepresented. Also of interest is the proportion of pedestrians that involve ID, which is over twice their expected number (2.641). Four-wheel ATVs had the highest over-representation (Odds Ratio = 3.564), perhaps because ATV drivers do not believe the ID laws apply to them if they are not on the public highways. In order of their number of their ID crashes, the following had significant odds ratios: Passenger Car, Pick- Up (Four-Tire Light Truck), Motorcycle, Pedestrian, and 4-Wheel/Off Road ATV.
- Driver License Status – ID crashes are very highly overrepresented in causal drivers without legitimate licenses, which challenges the effectiveness of license suspension and revocations as a traffic safety countermeasure. There is no way to estimate its deterrent value, but the correlation of irregular licenses with ID crashes indicates that within itself, these actions are not definitive. Those who will drive while intoxicated will only rarely be affected by their license status. Revoked is overrepresented for the ID causal drivers by over six times its expected proportion (compared to non-ID crashes). The following gives the highest overrepresented categories along with the number of additional crashes (in parenthesis) that were attributed to the over-representation in the five-year period: Suspended (2237), Revoked (1439), Not Applicable or Unlicensed (3031), and Expired (519).
- Driver Employment Status –ID driver unemployment rate is 19.71%, and its proportion is about 80% higher than expected over the 2018-2022 time period. Self-employed and employed sum to 43.27%. This is an important factor that will be given continued consideration as the economy rebounds from the 2020 COVID-19 pandemic.

Judicial Analysis

The State has enacted many laws that have proven to be sound, rigorous, and easy to enforce and administer. However, efforts must continue, both in strengthening existing laws and in passing new laws that address issues that are developing within our society. Every attempt is being made to ensure that these laws clearly define offenses, contain provisions that facilitate effective enforcement, and establish effective punitive measures for deterrence. Legislative efforts have been and will continue to have goals of defining illegal activities and remedies, which include:

- Driving while impaired by alcohol or other drugs (whether illegal, prescription or over-the-counter) and treating both offenses in a comparable matter with similar punitive and remedial programs;

- Driving with a blood alcohol concentration (BAC) limit of .08 grams per deciliter, making it illegal *per se* to operate a vehicle at or above this level without having to prove impairment;
- Driving with a high BAC (i.e., .15 BAC or greater) with enhanced sanctions above the standard impaired driving offense;
- Zero Tolerance for underage drivers, making it illegal *per se* for people under age 21 to drive with any measurable amount of alcohol in their system (i.e., .02 BAC or greater);
- Repeat offender increasing sanctions for each subsequent offense;
- BAC test refusal with sanctions at least as strict, or stricter, than a high BAC offense;
- Driving with a license suspended or revoked for impaired driving, with vehicular homicide or causing personal injury while driving impaired as separate offenses with additional sanctions;
- Open container laws, prohibiting possession or consumption of any open alcoholic beverage in the passenger area of a motor vehicle located on a public highway or right-of-way;
- Authorization of law enforcement agencies to conduct sobriety checkpoints, (i.e., stop vehicles on a nondiscriminatory basis to determine whether operators are driving while impaired by alcohol or other drugs);
- Authorization of law enforcement to use passive alcohol sensors to improve the detection of alcohol in drivers;
- Authorization of law enforcement to obtain more than one chemical test from an operator suspected of impaired driving, including preliminary breath tests, evidentiary breath tests, and screening and confirmatory tests for alcohol or other impairing drugs; and
- Requiring law enforcement to conduct mandatory BAC testing of drivers involved in fatal crashes.

While most of the above provisions have been implemented in the State, they continue to be listed above since many of them require either strengthening or clarification.

In addition to the above general structure for the laws themselves, the following structure is part of the plan for establishing effective penalties:

- Administrative license suspension or revocation for failing or refusing to submit to a BAC or other drug test;
- Prompt and certain administrative license suspension of at least 90 days for first-time offenders determined by chemical test(s) to have a BAC at or above the State's *per se* level or of at least 15 days followed immediately by a restricted, provisional or conditional license for at least 75 days, if such license restricts the offender to operating only vehicles equipped with an ignition interlock;
- Enhanced penalties for BAC test refusals, high BAC, repeat offenders, driving with a suspended or revoked license, driving impaired with a minor in the vehicle, vehicular homicide, or causing personal injury while driving impaired, including longer license suspension or revocation; installation of ignition interlock devices; license plate confiscation; vehicle impoundment, immobilization or forfeiture; intensive supervision and electronic monitoring; and threat of imprisonment;

- Assessment for alcohol or other drug abuse problems for all impaired driving offenders and, as appropriate, treatment, abstention from use of alcohol and other drugs, and frequent monitoring; and
- Driver license suspension for people under age 21 for any violation of law involving the use or possession of alcohol or illicit drugs.

This appendix demonstrates the data-driven evidenced-based approach that the State is taking to addressing its Impaired Driving problems. It consists of the following:

- Table of Impaired Driving hotspots. This shows how this distribution has changed over the years since FY2009 (criteria for hotspots remaining constant).
- Top 18 Interstate hotspots.
    - Distribution by region
    - Listing of location
- Top 36 State/Federal route hotspots.
    - Distribution by region
    - Listing of location
- Top 83 intersection locations
    - Distribution by region
    - Listing of location
- Top 28 non-mile posted segment locations
    - Distribution by region
    - Listing of location

In the following table the hotspots for a given fiscal year's selective enforcement is based on the most recent closed-out data that is available the previous complete calendar years; as an example, FY2024 was estimated based on CY2020-2022 data.

Number of Impaired Driving Hotspots for Three-Year Periods

Fiscal Year	Calendar Year Data Used	Impaired Driving Hotspots
2009	2005-2007	191
2010	2006-2008	190
2011	2007-2009	194
2012	2008-2010	143
2013	2009-2011	144
2014	2010-2012	179
2015	2011-2013	198
2016	2012-2014	176
2017	2013-2015	166
2018	2014-2016	160
2019	2015-2017	350
2020	2016-2018	151
2021	2017-2019	153
2022	2018-2020	133
2023	2019-2021	149
2024	2020-2022	162
2025	2021-2023	165

FY2025 Top 18 Mileposted Interstate Locations (5 miles in length) in Alabama with 8 or More Impaired Driving Related Crashes Resulting in Injury or Fatality

Rank	County	City	Route	Beg MP	End MP	Total Crashes	Fatal Crashes	Injury Crashes	Agency ORI
1	Mobile	Mobile	I-65	1.1	6.1	8	3	5	Mobile PD
2	Jefferson	Bessemer	I-59	111.5	116.5	9	2	7	Bessemer PD
3	Shelby	Alabaster	I-65	235.6	240.6	10	2	8	Alabaster PD
4	Tuscaloosa	Rural Tuscaloosa	I-59	84.5	89.5	8	3	5	ALEA - Tuscaloosa Post
5	Jefferson	Birmingham	I-59	121.9	126.9	10	2	8	Birmingham PD
6	Jefferson	Hoover	I-65	246.6	251.6	14	2	12	Hoover PD
7	Montgomery	Montgomery	I-85	0.5	5.5	8	2	6	Montgomery PD
8	Lee	Auburn	I-85	50.9	55.9	10	1	9	Auburn PD
9	Jefferson	Rural Jefferson	I-65	263.8	268.8	8	1	7	ALEA - Birmingham Post
10	Madison	Huntsville	I-565	14.6	19.6	11	1	10	Huntsville PD
11	Lowndes	Rural Lowndes	I-65	139.8	144.8	9	2	7	ALEA - Montgomery Post
12	Jefferson	Rural Jefferson	I-59	116.7	121.7	12	1	11	ALEA - Birmingham Post
13	Tuscaloosa	Rural Tuscaloosa	I-59	89.6	94.6	8	1	7	ALEA - Tuscaloosa Post
14	Madison	Huntsville	I-565	9.5	14.5	8	1	7	Huntsville PD
15	Jefferson	Rural Jefferson	I-20	137	142	9	0	9	ALEA - Birmingham Post
16	Jefferson	Hoover	I-65	251.6	256.6	17	0	17	Hoover PD
17	Lee	Opelika	I-85	58	63	10	0	10	Opelika PD
18	Jefferson	Birmingham	I-65	257.9	262.9	8	0	8	Birmingham PD

FY2025 Top 36 Mileposted State and Federal Route Locations (5 Miles in Length) in Alabama with 8 or More Impaired Driving Related Crashes Resulting in Injury or Fatality

Rank	County	City	Route	Beg MP	End MP	Total Crashes	Fatal Crashes	Injury Crashes	Agency ORI
1	Mobile	Mobile	S-42	18	23	10	4	6	Mobile PD
2	Madison	Huntsville	S-1	330.1	335.1	8	1	7	Huntsville PD
3	Madison	Rural Madison	S-1	346	351	8	2	6	ALEA - Huntsville Post
4	Limestone	Rural Limestone	S-2	65	70	8	0	8	ALEA - Decatur Post
5	Chilton	Rural Chilton	S-22	59.3	64.3	8	1	7	ALEA - Montgomery Post
6	Etowah	Rural Etowah	S-1	267.6	272.6	8	0	8	ALEA - Gadsden Post
7	Marshall	Albertville	S-1	278.2	283.2	8	1	7	Albertville PD
8	Jefferson	Hoover	S-150	7.8	12	8	1	7	Hoover PD
9	Madison	Huntsville	S-2	88.6	93.6	12	2	10	Huntsville PD
10	Madison	Rural Limestone	S-2	83.5	88.5	8	1	7	ALEA - Decatur Post
11	Madison	Rural Madison	S-1	339	344	9	0	9	ALEA - Huntsville Post
12	Baldwin	Foley	S-59	5.4	10.4	10	1	9	Foley PD
13	Jackson	Rural Jackson	S-35	42.6	47.6	8	1	7	ALEA - Huntsville Post
14	Tuscaloosa	Tuscaloosa	S-7	82.2	87.2	8	1	7	Tuscaloosa PD
15	Limestone	Athens	S-2	76.9	81.9	8	0	8	Athens PD
16	Russell	Phenix City	S-8	209	214	8	1	7	Phenix City PD
17	Etowah	Attalla	S-1	262.6	267.6	9	0	9	Attalla PD
18	Russell	Phenix City	S-1	110	115	9	0	9	Phenix City PD
19	Baldwin	Daphne	S-42	35.9	40.9	16	0	16	Daphne PD
20	Cullman	Cullman	S-3	319.9	324.9	9	0	9	Cullman PD
21	Houston	Dothan	S-210	0	5	10	1	9	Dothan PD
22	Marshall	Albertville	S-205	5.4	10.4	9	0	9	Albertville PD
23	Coffee	Enterprise	S-12	178.9	183.9	9	1	8	Enterprise PD
24	Barbour	Eufaula	S-1	63.9	68.9	11	0	11	Eufaula PD
25	Baldwin	Daphne	S-181	13.3	18.3	10	1	9	Daphne PD
26	Marshall	Guntersville	S-1	288.8	293.8	9	0	9	Guntersville PD
27	Baldwin	Gulf Shores	S-59	0	5	9	1	8	Gulf Shores PD

28	Coffee	Enterprise	S-248	0.1	5.1	9	0	9	Enterprise PD
29	Mobile	Rural Mobile	S-42	12.9	17.9	8	0	8	ALEA - Mobile Post
30	Tuscaloosa	Northport	S-6	42.7	47.7	8	0	8	Northport PD
31	Talladega	Childersburg	S-38	32.1	37.1	8	0	8	Childersburg PD
32	Mobile	Prichard	S-17	1	6	8	0	8	Prichard PD
33	Tuscaloosa	Tuscaloosa	S-215	2.1	7.1	13	0	13	Tuscaloosa PD
34	Calhoun	Anniston	S-21	252.2	257.2	13	0	13	Anniston PD
35	Morgan	Decatur	S-3	353	358	9	0	9	Decatur PD
36	Madison	Huntsville	S-53	318.6	323.6	8	0	8	Huntsville PD

FY2025 Top 83 Intersection Locations Statewide with 3 or More Total Impaired Driving Related Crashes

Rank	County	City	Total Crashes	Fatal Crashes	Injury Crashes	Node 1	Route	Location	Agency ORI
1	Mobile	Mobile	4	2	0	2852	5523	GATOTKOCO DR at MILITARY RD	Mobile PD
2	Madison	Huntsville	3	0	3	1345	1028	CARMICHAEL AVE NW at PULASKI PIKE NW	Huntsville PD
3	Madison	Madison	3	0	2	397	1005	ABBY LN at WALL TRIANA HWY	Madison PD
4	Madison	Huntsville	4	0	3	5755	7530	MEM PKWY SER RD W SIDE at UNIVERSITY DR	Huntsville PD
5	Madison	Huntsville	4	0	3	12345	S-53	NO DESCRIPTION AVAILABLE	Huntsville PD
6	Montgomery	Montgomery	4	1	1	4450	S-6	AL-21 at AL-6	Montgomery PD
7	Madison	Huntsville	4	0	3	5701	S-1	MEMORIAL PKY NW at N MEMORIAL PKY	Huntsville PD
8	Lee	Opelika	3	0	2	270	5275	W E MORTON AVE at S LONG ST	Opelika PD
9	Madison	Huntsville	3	0	2	3199	S-53	AL-20 at AL-53	Huntsville PD
10	Jefferson	Birmingham	3	1	0	2365	4587	23RD ST N at MORRIS AVE	Birmingham PD
11	Madison	Huntsville	5	0	3	1399	S-2	MEMORIAL PKY NW at N MEMORIAL PKY	Huntsville PD
12	Mobile	Rural Mobile	3	0	2	8369	1335	CR-11 at GRAND BAY WILMER RD S	ALEA - Mobile Post
13	Madison	Huntsville	3	0	2	4780	5565	SAM SANDLIN RD at NO DESCRIPTION AVAILABLE	Huntsville PD
14	Lee	Auburn	3	0	2	693	S-147	AL-267 at CR-137	Auburn PD
15	Madison	Huntsville	3	0	2	4107	S-53	AL-53 at CAMERON RD SW	Huntsville PD
16	Jefferson	Birmingham	3	0	2	3478	3293	NO DESCRIPTION AVAILABLE	Birmingham PD
17	Madison	Huntsville	3	0	2	2714	6298	EXECUTIVE DR NW at SPARKMAN DR NW	Huntsville PD
18	Madison	Huntsville	3	0	2	5344	S-2	MOORES MILL RD at NO DESCRIPTION AVAILABLE	Huntsville PD

19	Jefferson	Birmingham	3	0	2	4125	0685	3RD AVE S at 83RD ST S	Birmingham PD
20	Madison	Huntsville	4	0	3	8022	S-53	AL-53 at ARDMORE HWY	Huntsville PD
21	Madison	Huntsville	5	0	2	10162	S-2	CROMWELL CIR at DEAD END	Huntsville PD
22	Madison	Huntsville	9	0	5	2356	S-53	AL-2 at AL-53	Huntsville PD
23	Madison	Huntsville	5	0	3	3563	7219	JOHNSON RD SW at TRIANA BLVD SW	Huntsville PD
24	Madison	Huntsville	5	0	3	3625	S-53	AIRPORT RD SW at S MEMORIAL PKY	Huntsville PD
25	Mobile	Rural Mobile	5	0	4	8248	1145	CR-28 at JIM MCNEIL LOOP RD E	ALEA - Mobile Post
26	Madison	Huntsville	4	0	2	2065	5626	DRAKE AVE SW at TRIANA BLVD SW	Huntsville PD
27	Jefferson	Bessemer	4	0	3	913	S-5	AL-5 at AL-7	Bessemer PD
28	Jefferson	Bessemer	4	0	2	674	1247	CR-52 at CR-6	Bessemer PD
29	Walker	Jasper	3	0	1	1294	S-5	PECAN PL at NO DESCRIPTION AVAILABLE	Jasper PD
30	Montgomery	Montgomery	3	0	2	4449	1254	AL-21 at AL-6	Montgomery PD
31	Tuscaloosa	Tuscaloosa	3	0	1	4135	5177	23RD AVE at 4TH ST	Tuscaloosa PD
32	Lauderdale	Florence	3	0	1	743	5312	AL-13 at AL-2	Florence PD
33	Jefferson	Fultondale	3	0	1	540	S-3	AL-3 at CR-121	Fultondale PD
34	Lauderdale	Florence	5	0	2	317	S-2	AL-13 at AL-157	Florence PD
35	Madison	Huntsville	5	0	2	958	6298	PULASKI PIKE NW at SPARKMAN DR NW	Huntsville PD
36	Madison	Huntsville	4	0	1	3411	S-53	AL-53 at JORDAN LN NW	Huntsville PD
37	Madison	Huntsville	9	0	4	1363	5932	OAKWOOD AVE NW at PULASKI PIKE NW	Huntsville PD
38	Montgomery	Montgomery	3	0	2	5013	1254	SPRING VALLEY RD at WOODLEY RD	Montgomery PD
39	Jefferson	Birmingham	3	0	1	3473	no data	NO DESCRIPTION AVAILABLE	Birmingham PD
40	Mobile	Mobile	3	0	1	1359	no data	SALLIE CT at WESLEY LN E	Mobile PD

41	Madison	Huntsville	3	0	1	13569	6298	NO DESCRIPTION AVAILABLE	Huntsville PD
42	Madison	Huntsville	3	0	1	5860	S-2	AL-2 at ENTERPRISE WAY NW	Huntsville PD
43	Madison	Huntsville	3	0	1	2707	6298	SPARKMAN DR at UNIVERSITY DR	Huntsville PD
44	Jefferson	Hoover	3	0	1	846	5067	LORNA RD at PATTON CHAPEL RD	Hoover PD
45	Etowah	Gadsden	3	0	2	1044	S-291	AL-291 at AL-759	Gadsden PD
46	Madison	Huntsville	6	0	2	8024	S-53	AL-53 at ARDMORE HWY	Huntsville PD
47	Madison	Huntsville	4	0	1	4228	S-1	AL-1 at CALIFORNIA ST SE	Huntsville PD
48	Jefferson	Hoover	4	0	1	302	5067	LODGE DR at LORNA RD	Hoover PD
49	Madison	Huntsville	4	0	1	2068	5626	DRAKE AVE SW at WESTWIND CIR SW	Huntsville PD
50	Madison	Huntsville	4	0	1	209	S-1	AL-1 at AL-2	Huntsville PD
51	Montgomery	Montgomery	4	0	2	4481	S-6	AL-21 at AL-6	Montgomery PD
52	Montgomery	Montgomery	3	0	1	1378	8192	ATLANTA HWY SR-8 US-80 at EAST BLVD SER RD S SIDE	Montgomery PD
53	Montgomery	Montgomery	3	0	1	4370	S-8	AL-21 at AL-53	Montgomery PD
54	Madison	Huntsville	3	0	1	3908	6178	W HELENA DR NW at MASTIN LAKE RD NW	Huntsville PD
55	Baldwin	Rural Baldwin	3	0	1	7276	1116	CR-26 at GRANTHAM RD	ALEA - Mobile Post
56	Madison	Huntsville	3	0	1	3858	1028	MASTIN LAKE RD NW at PULASKI PIKE NW	Huntsville PD
57	Mobile	Mobile	3	0	1	1842	6051	GAYLARK RD N at SUNNYVALE LN W	Mobile PD
58	Etowah	Gadsden	3	0	1	1983	S-1	AL-1 at AL-211	Gadsden PD
59	Madison	Huntsville	4	0	1	2566	7228	BOB WALLACE AVE SW at JORDAN LN SW	Huntsville PD
60	Madison	Huntsville	4	0	1	8017	1324	MOORES MILL RD at WINCHESTER RD NE	Huntsville PD
61	Montgomery	Montgomery	4	0	1	4323	8058	AL-271 at CR-626	Montgomery PD

62	Madison	Huntsville	9	0	1	619	S-1	AL-1 at AL-2	Huntsville PD
63	Madison	Huntsville	5	0	0	2161	S-2	AL-2 at PULASKI PIKE NW	Huntsville PD
64	Morgan	Decatur	5	0	0	1004	1089	14TH AVE SE at CYPRESS ST SE	Decatur PD
65	Montgomery	Montgomery	4	0	0	4286	8058	AL-21 at AL-53	Montgomery PD
66	Madison	Huntsville	3	0	0	5405	6185	BAXTER AVE NW at MERRY OAKS DR NW	Huntsville PD
67	Madison	Huntsville	3	0	0	4651	6014	CLINTON AVE E at GREENE ST SE	Huntsville PD
68	Mobile	Rural Mobile	3	0	0	8524	1373	CR-32 at CR-33	ALEA - Mobile Post
69	Madison	Rural Madison	3	0	0	7291	1116	JACK THOMAS RD at MOUNT LEBANON RD	ALEA - Huntsville Post
70	Madison	Huntsville	3	0	0	4754	6017	HOLMES AVE NE at LINCOLN ST NE	Huntsville PD
71	Madison	Huntsville	3	0	0	3698	1028	GREENHILL DR NW at PULASKI PIKE NW	Huntsville PD
72	Madison	Huntsville	3	0	0	5932	no data	NO DESCRIPTION AVAILABLE	Huntsville PD
73	Madison	Huntsville	3	0	0	32184	1031	BILTMORE DR NW at INDIAN CREEK RD NW	Huntsville PD
74	Etowah	Gadsden	3	0	0	978	5659	7TH ST N at S 7TH ST	Gadsden PD
75	Mobile	Mobile	3	0	0	5732	S-16	NO DESCRIPTION AVAILABLE	Mobile PD
76	Autauga	Prattville	3	0	0	890	1002	CR-75 at E MAIN ST	Prattville PD
77	Etowah	Gadsden	3	0	0	2315	S-1	AL-1 at AL-291	Gadsden PD
78	Tuscaloosa	Tuscaloosa	3	0	0	283	5558	15TH ST at HACKBERRY LN	Tuscaloosa PD
79	Jefferson	Hoover	3	0	0	1	4568	NO DESCRIPTION AVAILABLE	Hoover PD
80	Mobile	Mobile	3	0	0	2340	6200	CR-70 at OLD SHELL RD	Mobile PD
81	Tuscaloosa	Tuscaloosa	3	0	0	525	5558	2ND AVE E at FOREST LAKE DR	Tuscaloosa PD
82	Etowah	Attalla	3	0	0	438	5130	NO DESCRIPTION AVAILABLE	Attalla PD
83	Jefferson	Bessemer	3	0	0	1870	2714	AL-150 at LAKESHORE PKY	Bessemer PD

FY2025 Top 28 Segment Locations Statewide with 3 or More Total Impaired Driving Related Crashes

Rank	County	City	Total Crashes	Fatal Crashes	Injury Crashes	Node 1	Node 2	Route	Location	Agency ORI
1	Escambia	Rural Escambia	3	1	1	7834	7833	1033	COWPEN CREEK RD at JERKINS LOOP and COWPEN CREEK RD at JERKINS LOOP	ALEA - Evergreen Post
2	Madison	Rural Madison	3	0	3	7765	63573	2208	COUNTY LAKE RD at MAYSVILLE RD and NO DESCRIPTION AVAILABLE	ALEA - Huntsville Post
3	Madison	Rural Madison	3	1	1	7473	7478	1333	HARVEST RD at W HIGHLANDER RD and HARVEST RD at WALL-TRIANA HWY	ALEA - Huntsville Post
4	Lee	Opelika	3	1	1	1476	1582	5553	AL-38 at BIRMINGHAM HWY and NO DESCRIPTION AVAILABLE	Opelika PD
5	Mobile	Rural Mobile	3	0	2	44639	8730	1524	GLENWOOD RD at GLENWOOD FARMS DR and GLENWOOD RD at NATCHEZ TRACE RD	ALEA - Mobile Post
6	Mobile	Rural Mobile	3	1	0	8191	7681	1216	CR-19 at 16TH ST and CR-19 at CR-24	ALEA - Mobile Post
7	Calhoun	Oxford	3	0	2	1293	1292	6458	Segment: NO DESCRIPTION AVAILABLE	Oxford PD
8	Lee	Rural Lee	3	0	2	7104	7103	1275	CR-275 at CR-279 and CR-272 at CR-275	ALEA - Opelika Post
9	Madison	Huntsville	3	0	2	41443	39798	1229	CECIL ASHBURN DR SE at DONEGAL DR SE and NO DESCRIPTION AVAILABLE	Huntsville PD

10	Jefferson	Mountain Brook	3	0	2	221	636	5165	AL-38 at CHEROKEE RD and CHEROKEE RD at SHERWOOD RD	Mountain Brook PD
11	Tuscaloosa	Tuscaloosa	3	0	2	5030	5203	1185	25TH AVE NE at JACK WARNER PKY NE and HELEN KELLER BLVD at JACK WARNER PKY NE	Tuscaloosa PD
12	Jackson	Rural Jackson	3	0	2	8769	7165	1034	CR-77 at HORIZON LN and CR-337 at CR-377	ALEA - Huntsville Post
13	Houston	Rural Houston	3	0	1	7387	7406	1178	CR-29 at HODGESVILLE RD and CR-29 at 3RD AVE	ALEA - Dothan Post
14	Madison	Rural Madison	3	0	1	8115	8113	1005	CAPSHAW RD at WALL TRIANA HWY and LITTLE RD at WALL TRIANA HWY	ALEA - Huntsville Post
15	Calhoun	Jacksonville	3	0	2	644	7540	1270	ENGLEWOOD DR at MTAIN ST NE and NO DESCRIPTION AVAILABLE	Jacksonville PD
16	Coffee	Rural Coffee	3	0	1	7698	7714	1301	CR-304 at CR-82 and CR-303 at CR-309	ALEA - Dothan Post
17	Elmore	Rural Elmore	3	0	1	9627	8331	1054	R P CREEL LN at NO DESCRIPTION AVAILABLE and CR-3 at BROOKFIELD DR	ALEA - Montgomery Post
18	Baldwin	Summerdale	3	0	1	7513	7527	1171	Segment: NO DESCRIPTION AVAILABLE	Summerdale PD
19	Marshall	Rural Marshall	3	0	1	9281	7605	1543	CR-543 at BLESSING RD and CR-388 at CR-543	ALEA - Huntsville Post
20	Jefferson	Birmingham	3	0	2	4350	4331	no data	Segment: NO DESCRIPTION AVAILABLE	Birmingham PD
21	Lee	Rural Lee	3	0	1	7391	7355	1146	AL-51 at CR-146 and CR-112 at CR-146	ALEA - Opelika Post

22	Madison	Rural Madison	4	0	1	7238	7270	1154	JOE QUICK RD at WIDOW HORNBUCKLE RD and JOE QUICK RD at ROY DAVIS RD	ALEA - Huntsville Post
23	Madison	Rural Madison	3	0	1	9648	38414	1075	LIBERTY HILL RD NW at MONROE RD and MONROE RD at SOYBEAN DR	ALEA - Huntsville Post
24	Houston	Rural Houston	3	0	1	2770	3673	1172	Segment: NO DESCRIPTION AVAILABLE	ALEA - Dothan Post
25	Lee	Auburn	5	0	0	315	316	5047	MAGNOLIA AVE at SR 147 COLLEGE ST and AL-147 at N COLLEGE ST	Auburn PD
26	Madison	Rural Madison	3	0	0	7063	7049	1274	BUTTER AND EGG RD at ELKWOOD SECTION RD and ELKWOOD SECTION RD at WILL HOLT RD	ALEA - Huntsville Post
27	Madison	Rural Madison	3	0	0	7328	63901	1157	PATTERSON LN at PULASKI PIKE and MIMI LN at PATTERSON LN	ALEA - Huntsville Post
28	Limestone	Rural Limestone	3	0	0	7896	7893	1048	HUNTSVILLE BROWNSFERRY RD at LUCAS FERRY RD and HUNTSVILLE BROWNSFERRY RD at MURPHY RD	ALEA - Decatur Post