



MOTOR VEHICLE COLLISIONS

Disease Information Packets – Slide Set
Public Health Services, Community Health Statistics
10/2023



LIVE WELL
SAN DIEGO



What are Motor Vehicle Collisions?



- A motor vehicle collision is an unintended event involving a motor vehicle in transport, whether moving or ready to move, that cause death, injury, or property damage on a public road.
- Among unintentional injuries, motor vehicle collisions were one of the top three causes of death among people aged 5-44 years old in 2020.
- There were close to 41,000 deaths from vehicle collisions in 2020, which amounted to \$430 billion from medical cost and cost estimates for lives lost.
- Globally, around 1.35 million people (approximately 3,740 people every day) are fatally wounded, and 20-50 million people are injured in motor vehicle collisions every year.
- In 2019, there were 3,737 people killed and 269,031 people injured from motor vehicle collisions in California.



Demographic Risk Factors



■ Age

- In 2021, 20-34-year-olds in the United States had the highest rates of being involved in a motor vehicle collision, followed by 35-69-year-olds. Children younger than 13 years old were least likely to be involved in a motor vehicle collision resulting in death compared to other age groups.
- Death rates due to motor vehicle collisions increase as the child seat age requirement decreases.
- Counties with a higher age requirement for occupying child/boosters have fewer youth death rates compared to counties with a lower age requirement.
- Newly licensed teens are most vulnerable to motor vehicle collisions due to driver inexperience and the transition to independent driving.
- For every 1,000 motor vehicle collisions, older adults ages 70 and older have higher death rates compared to middle-aged adults ages 34-54.



Sources: Institute Insurance for Highway Safety (IIHS). Fatality Facts 2021 Yearly Snapshot. <https://www.iihs.org/topics/fatality-statistics/detail/yearly-snapshot>.

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Demographic Risk Factors



■ Race/Ethnicity

- In the United States, Non-Hispanic American Indian/Alaska Native (AIAN) (24.0 per 100,000 population) and Non-Hispanic Black (18.1 per 100,000 population) Americans had higher death rates due to motor vehicle collisions compared to Non-Hispanic White (12.2 per 100,000) Americans in 2020.

■ Sex

- In the United States, males (18.1 per 100,000 population) had higher death rates due to motor vehicle collisions than females (6.7 per 100,000 population) at all ages in 2020.



Social and Behavioral Risk Factors



■ Location

- In the United States, motor vehicle collisions to pedestrians are more likely to happen in areas further from an intersection.
 - There are more objects that help reduce speed and make drivers more aware of their surroundings in an intersection, such as stop signs, stop lights, and crosswalks.
- Children living in rural areas are more likely to die from a motor vehicle collision compared to children in urban areas.
 - Seat belts and child car seats are used more in urban areas.
- Most pedestrian deaths due to motor vehicle collisions happen in urban areas.
 - Population is denser in urban areas, increasing the likelihood that a crash would happen, compared to rural areas where there is less traffic and people are more spread out.



Social and Behavioral Risk Factors



Alcohol Use

- A driver with a blood alcohol concentration (BAC) of more than 0.08 grams per deciliter (g/dL) is considered alcohol-impaired in the United States.
- In 2020, 3 out of 10 motor vehicle collision fatalities in the United States involved an alcohol-impaired driver.



Social and Behavioral Risk Factors



■ Drug Abuse

- Both illicit and prescription drugs can impair an individual.
- Drug usage may double the driver's risk of being involved in a motor vehicle collision in the United States.
- Drugs and alcohol intake may increase the likelihood of a driver being involved in a motor vehicle collision.

■ Seat Belt use

- Seat belts may reduce collision-related injuries and deaths by half.
- Seat belts were designed to:
 - Keep you upright and close to your seat.
 - Slow your body from hitting another object in the case of a motor vehicle collision.



Social and Behavioral Risk Factors



■ Nighttime driving

- In 2019, most pedestrian deaths due to motor vehicle collisions happened at night in the United States.
 - 46% of motor vehicle collision deaths happened between 6pm and 3am.

■ Speeding

- Speeding is driving a motor vehicle at a speed that is too fast for conditions, racing or exceeding the speed limit.
- Higher vehicle speeds increase likelihood of a pedestrian being struck by a motor vehicle.
- Over the past decade, speeding had been a factor in 1 of 4 motor collision deaths in the United States.



Sources: Institute Insurance for Highway Safety (IIHS). Fatality Facts 2021 Yearly Snapshot. <https://www.iihs.org/topics/fatality-statistics/detail/yearly-snapshot>.

National Highway Traffic Safety Administration. Traffic Safety Facts 2019 Data: Pedestrians. U.S. Department of Transportation, Washington, DC; 2021. Available at <https://crashstats.nhtsa.dot.gov/Api/Public/Publication/813079>. Accessed 14 June 2023.

Torbjörn Åkerstedt, PhD and others, Night Driving, Season, and the Risk of Highway Accidents, Sleep, Volume 24, Issue 4, June 2001, Pages 401–406, <https://doi.org/10.1093/sleep/24.4.401>.

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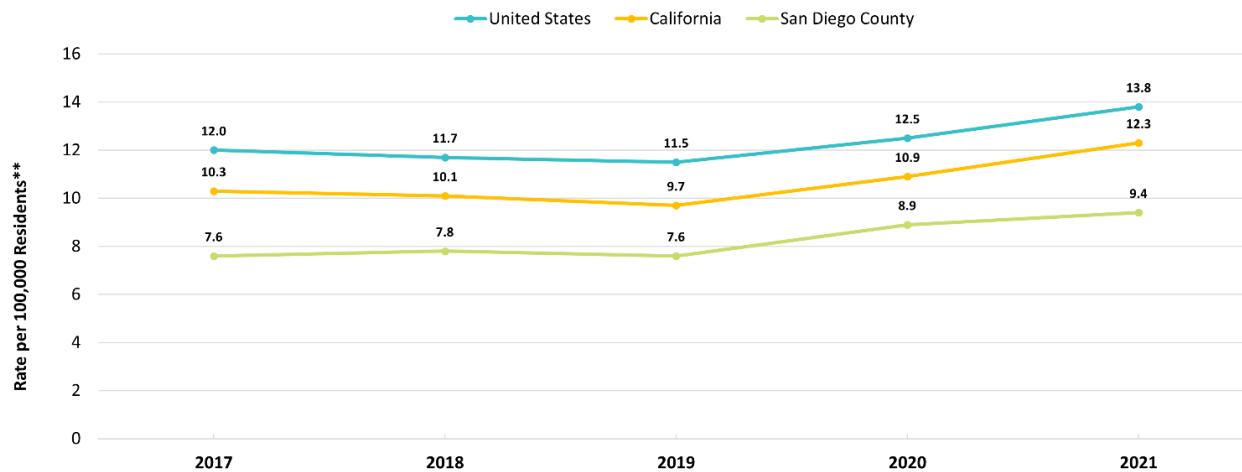
National, State, Local Statistics and Disparities



- In 2021, more than 40,000 people died due to motor vehicle collisions in the United States.
- Compared to California and the United States, San Diego County had a lower age-adjusted death rate due to motor vehicle collisions from 2017-2021.
- Although San Diego County's age-adjusted death rate due to motor vehicle collisions was lower than California's and the United States, it is important to practice prevention efforts because death rates continued to increase in San Diego County from 2019-2021.



Motor Vehicle Injuries*: Age-Adjusted Death Rates**, National, State, and Local 2017-2021



*Motor Vehicle Injury Death refers to (underlying cause of death) ICD-10 codes V02-04, V09.0, V09.2, V12-14, V19.0-V19.6, V20-V79, V80.3-V80.5, V81.0, V81.1, V82.0, V82.1, V83-V86, V87.0-V87.8, V88.0-V88.8, V89.0, V89.2.

**Age-adjusted rates per 100,000 2000 US standard population.

Source: Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Mortality 1999-2020 and Mortality 2018-2021 on CDC WONDER Online Database, released in 2021. California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS), 2021. 2020 and 2021 SANDAG Population estimates were derived using the 2010 Census and data should be considered preliminary. The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality.

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Cost



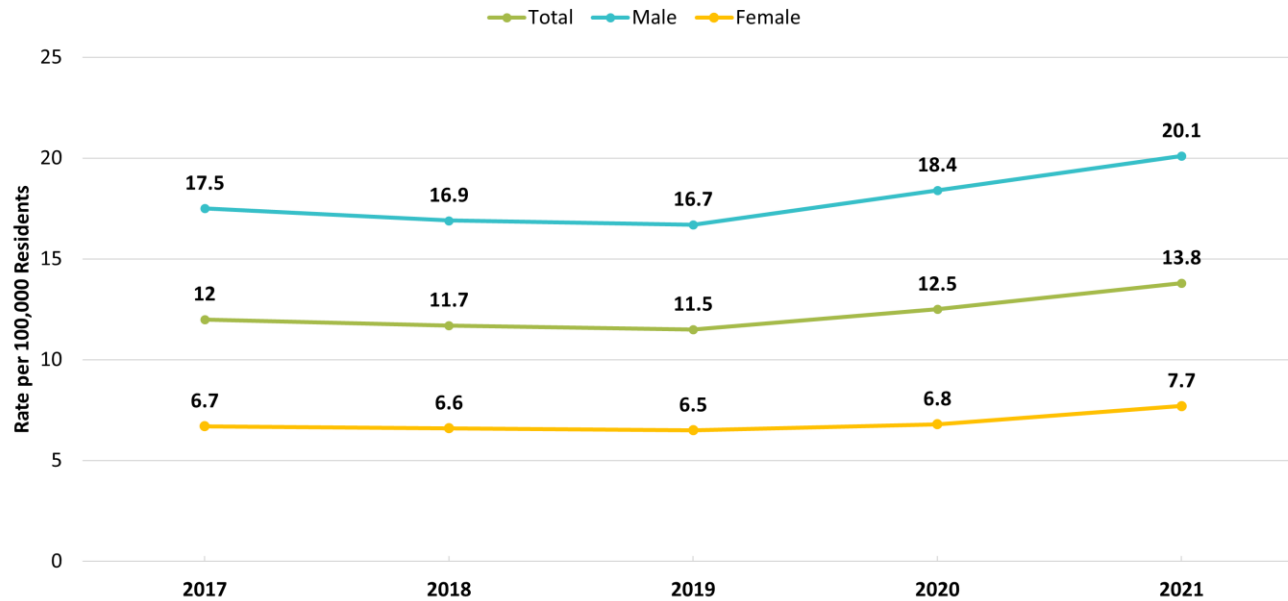
- The U.S. Department of Transportation estimated that the annual economic cost of motor vehicle collisions in the United States was \$340 billion in 2019.
- Out of the \$340 billion:
 - \$106 billion was due to lost market and household productivity.
 - \$115 billion was because of property damage.
 - Medical expenses amounted to \$31 billion.
 - Congestion caused by crashes accounted for \$36 billion.
 - All other crash-related costs totaled \$51.4 billion.



National Statistics and Disparities



Motor Vehicle Injuries*: Age-Adjusted Death Rates**, United States, 2017-2021



*Motor Vehicle Injury Death refers to (underlying cause of death) ICD-10 codes V02-04, V09.0, V09.2, V12-14, V19.0-V19.6, V20-V79, V80.3-V80.5, V81.0, V81.1, V82.0, V82.1, V83-V86, V87.0-V87.8, V88.0-V88.8, V89.0, V89.2.

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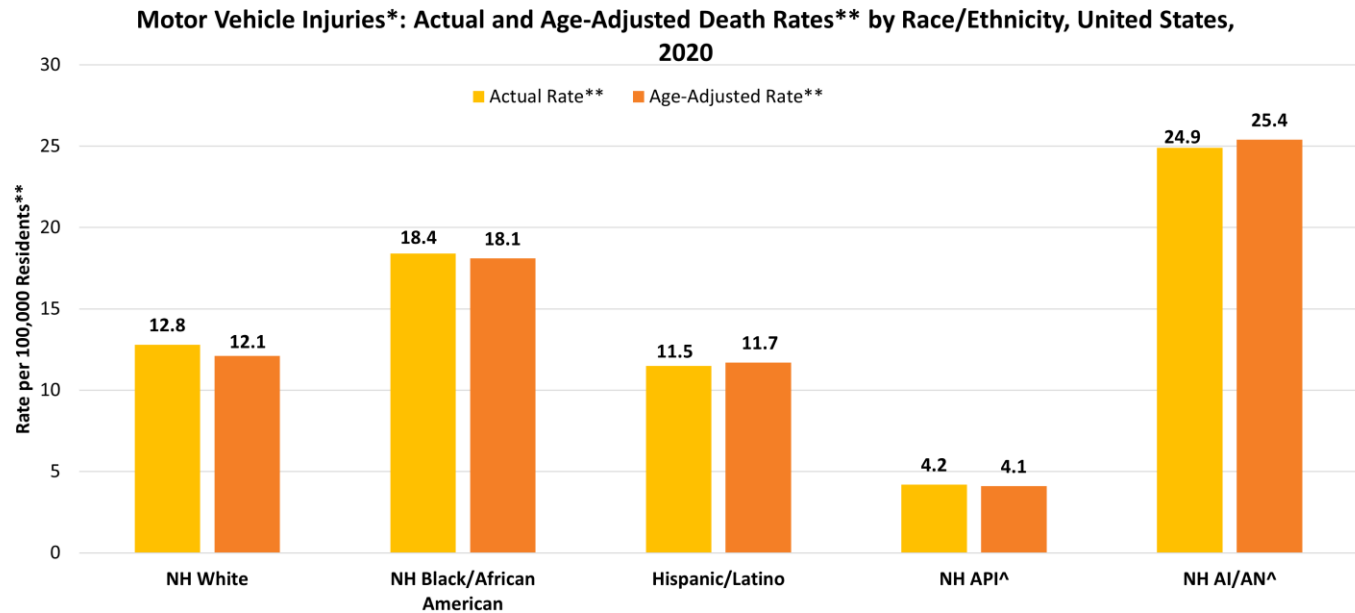
Source: Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Mortality 2000-2020 and Mortality 2018-2021 on CDC WONDER Online Database, released in 2021. The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality.

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- Between 2017-2021, males in the United States had a higher age-adjusted death rate due to motor vehicle injuries compared to females.
- In the United States, between 2017-2021, males, on average, had a 2.6 times higher death rate due to motor vehicle injuries compared to females.
- From 2017-2019, the overall age-adjusted death rate due to motor vehicle injuries in the United States decreased, however, it increased from 2019-2021.



National Statistics and Disparities



*Motor Vehicle Injury Death refers to (underlying cause of death) ICD-10 codes V02-04, V09.0, V09.2, V12-14, V19.0-V19.6, V20-V79, V80.3-V80.5, V81.0, V81.1, V82.0, V82.1, V83-V86, V87.0-V87.8, V88.0-V88.8, V89.0, V89.2.

**Actual rates per 100,000 population. Age-adjusted rates per 100,000 2000 US standard population.

[^]API = Asian and Pacific Islander, AI/AN = American Indian/Alaska Native. NH refers to Non-Hispanic.

Source: Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Mortality 1999-2020 on CDC WONDER Online Database. The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality.

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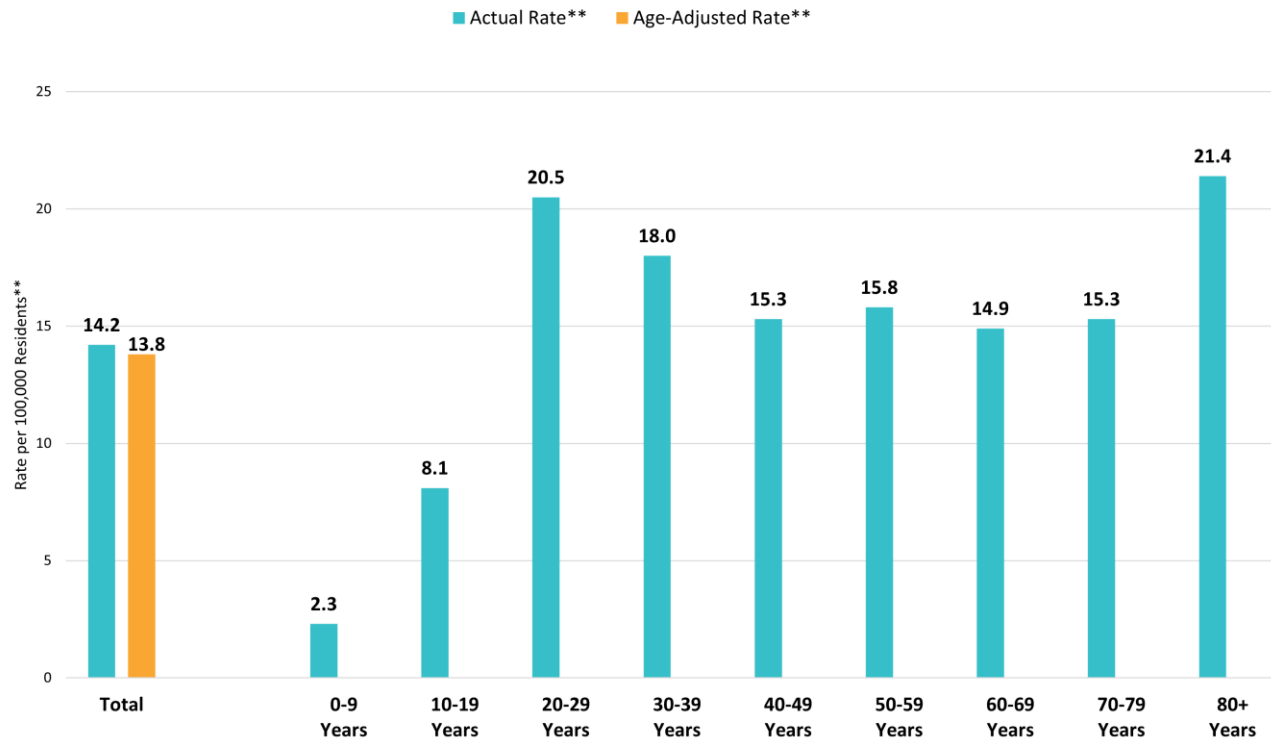
- In 2020, Non-Hispanic American Indian/Alaskan Natives had the highest actual and age-adjusted rates of death due to motor vehicle injuries compared to all other races/ethnicities in the United States.
- In 2020, Non-Hispanic Asian/Pacific Islanders had the lowest actual (4.2 per 100,000 residents) and age-adjusted (4.1 per 100,000 residents) rates of death due to motor vehicle injuries compared to all other races/ethnicities in the United States.



National Statistics and Disparities



Motor Vehicle Injuries*: Actual and Age-Adjusted Death Rates** by Age, United States, 2021



*Motor Vehicle Injury Death refers to (underlying cause of death) ICD-10 codes V02-04, V09.0, V09.2, V12-14, V19.0-V19.6, V20-V79, V80.3-V80.5, V81.0, V81.1, V82.0, V82.1, V83-V86, V87.0-V87.8, V88.0-V88.8, V89.0, V89.2.

**Actual rates per 100,000 population. Age-adjusted rates per 100,000 2000 US standard population.

Source: Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Mortality 2018-2021 on CDC WONDER Online Database, released in 2021. The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality.

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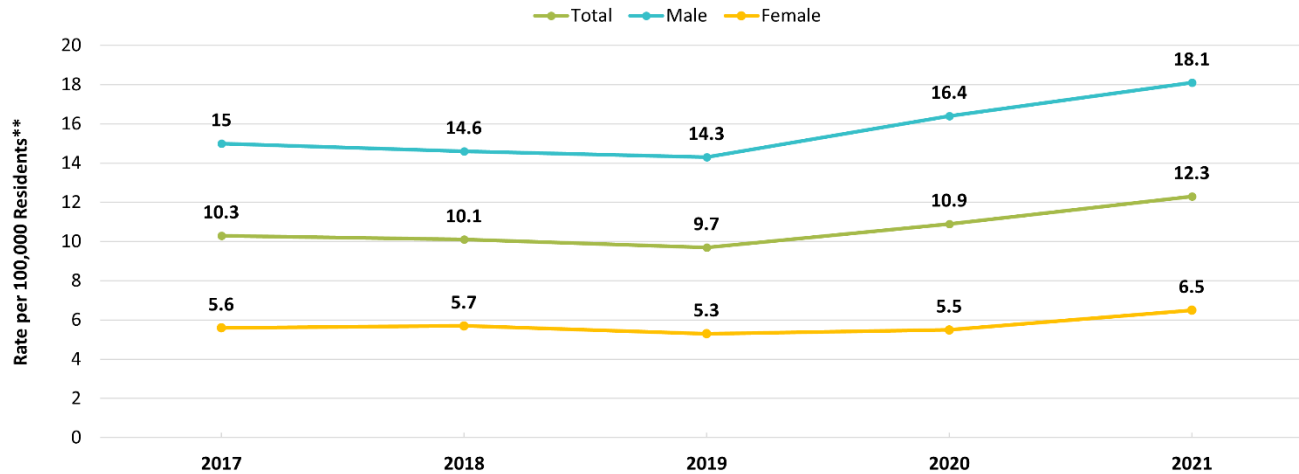
- Individuals 80 years and older (21.4 per 100,000 residents) had the highest actual death rate due to motor vehicle collisions; followed closely by 20-29-year-olds (20.5 per 100,000 residents).
- Among every age group 20 years and older, the death rate due to motor vehicle injuries was higher than the total actual and age-adjusted death rate in the United States.



State Statistics and Disparities



Motor Vehicle Injuries:* Age-Adjusted Death Rates** by Sex, California, 2017-2021



*Motor Vehicle Injury Death refers to (underlying cause of death) ICD-10 codes V02-04, V09.0, V09.2, V12-14, V19.0-V19.6, V20-V79, V80.3-V80.5, V81.0, V81.1, V82.0, V82.1, V83-V86, V87.0-V87.8, V88.0-V88.8, V89.0, V89.2.

**Age-adjusted rates per 100,000 2000 US standard population.

Source: Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Mortality 1999-2020 and Mortality 2018-2021 on CDC WONDER Online Database, released in 2021. The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality.

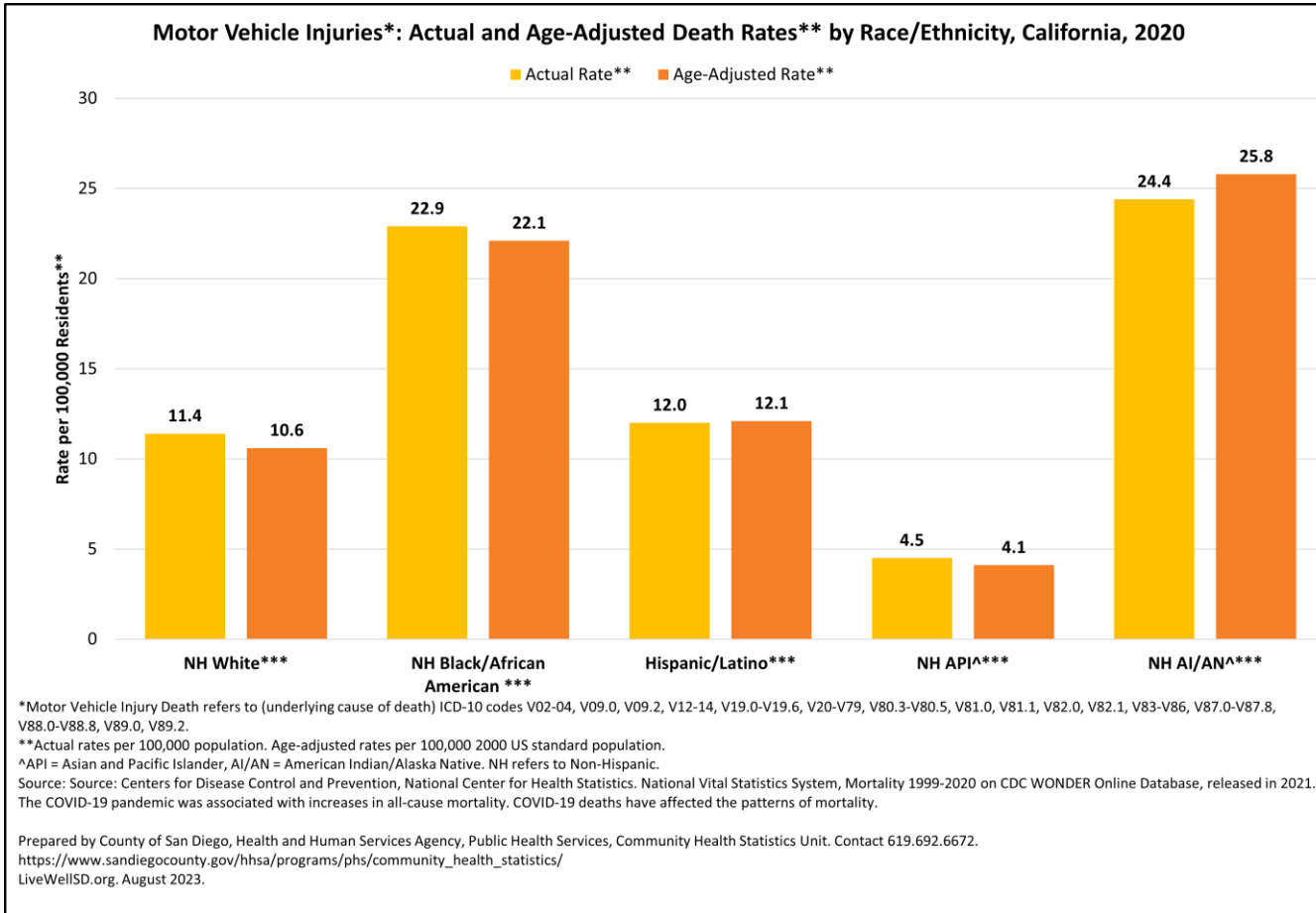
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LiveWellSD.org. August 2023.

- Between 2017-2021, males in California had higher age-adjusted death rates due to motor vehicle injuries compared to females.
- In California, between 2017-2021, males, on average, had 2.7 times higher motor vehicle injury death rates compared to females.



State Statistics and Disparities



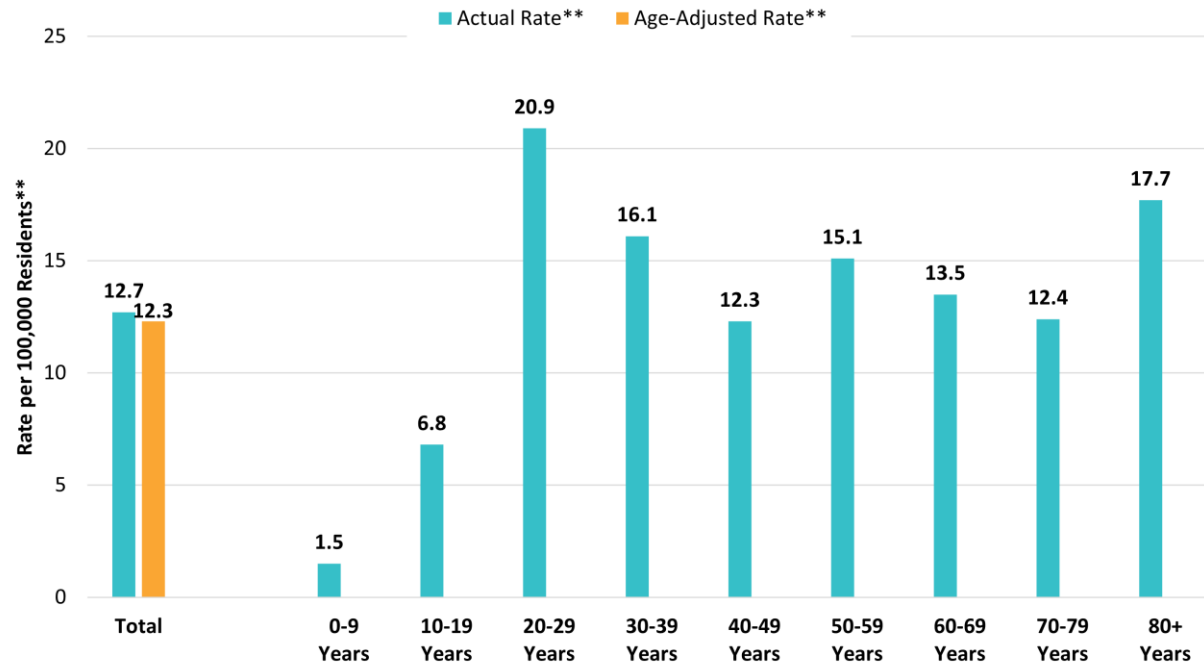
- In 2020, Non-Hispanic American Indian/Alaskan Natives had the highest actual and age-adjusted death rate due to motor vehicle injuries compared to all other races/ethnicities in California.
- In 2020, Non-Hispanic Asian/Pacific Islanders had the lowest actual and age-adjusted death rates due to motor vehicle injuries compared to all other races/ethnicities in California.



State Statistics and Disparities



Motor Vehicle Injuries*: Actual and Age-Adjusted Death Rates by Age, California, 2021**



*Motor Vehicle Injury Death refers to (underlying cause of death) ICD-10 codes V02-04, V09.0, V09.2, V12-14, V19.0-V19.6, V20-V79, V80.3-V80.5, V81.0, V81.1, V82.0, V82.1, V83-V86, V87.0-V87.8, V88.0-V88.8, V89.0, V89.2.

**Actual rates per 100,000 population. Age-adjusted rates per 100,000 2000 US standard population.

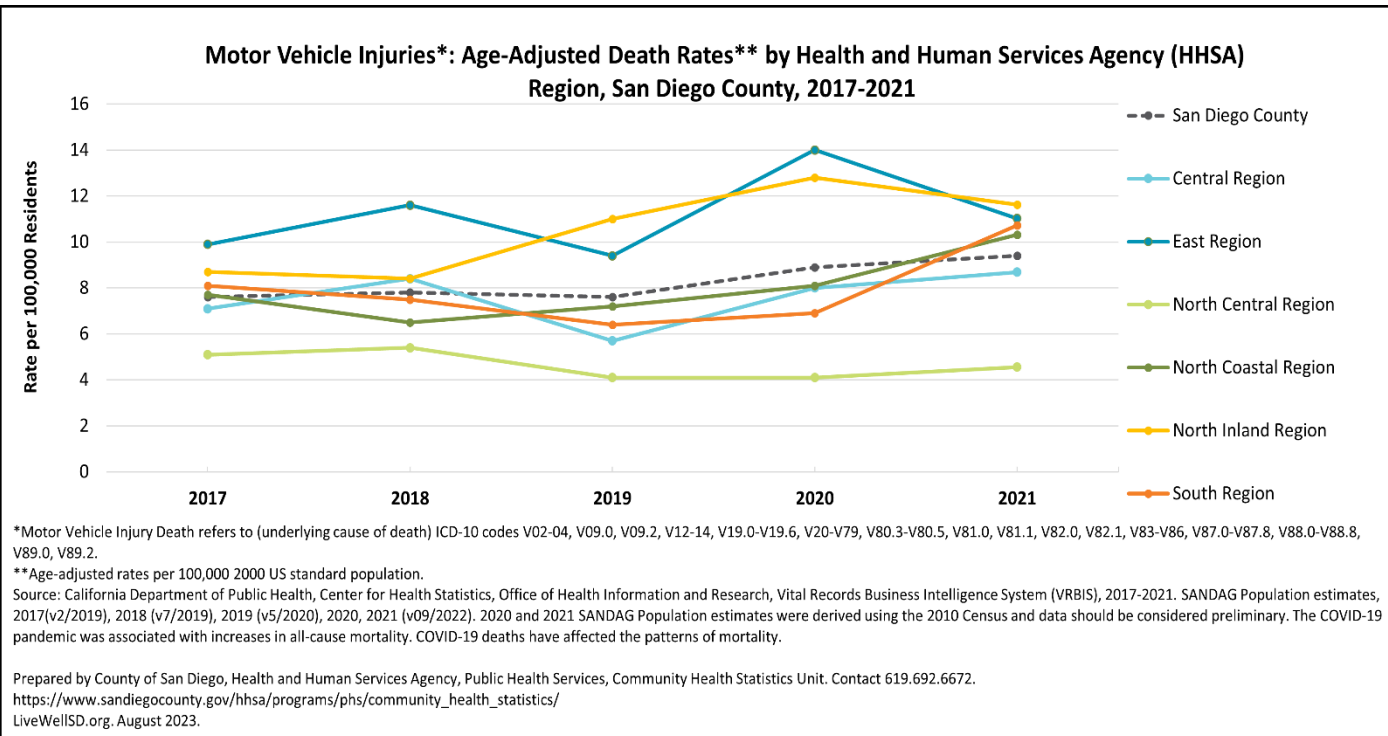
Source: Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Mortality 2018-2021 on CDC WONDER Online Database, released in 2021. The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality.

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- In 2021, 20-29-year-olds had the highest death rate due to motor vehicle injuries (20.9 per 100,000 residents), followed by those 80 years and older (17.7 per 100,000 residents).



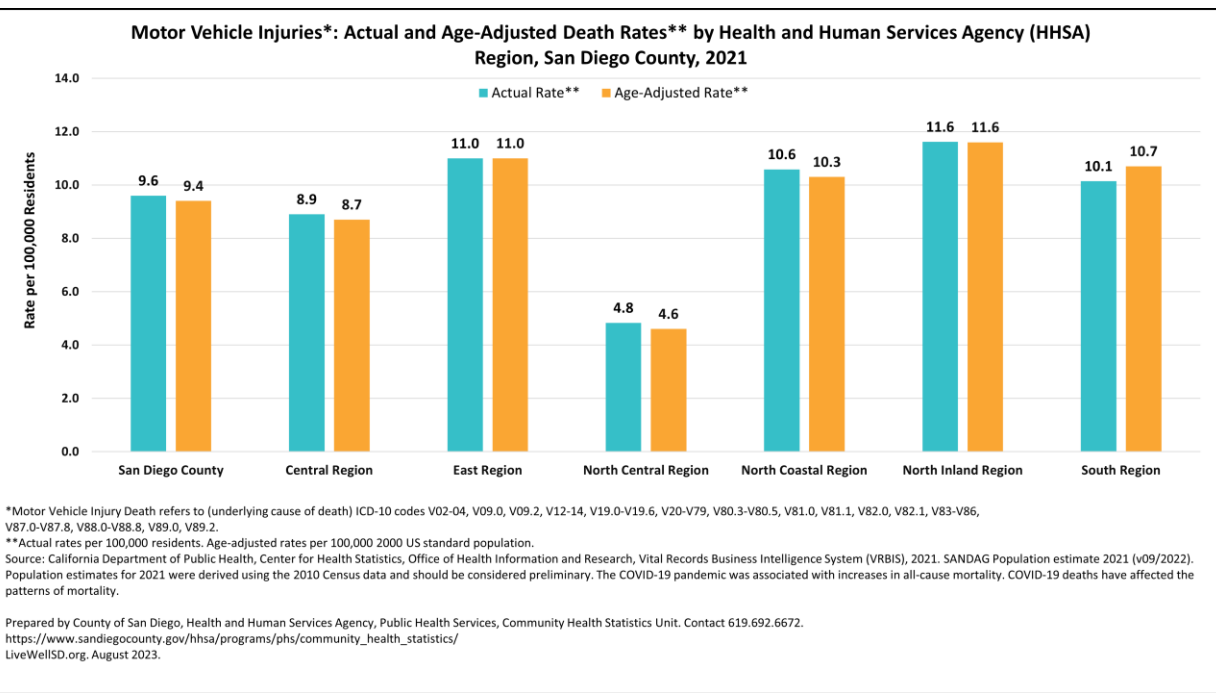
Local Statistics and Disparities



- The age-adjusted death rate from motor vehicle injuries in North Central Region was lower than San Diego County and all other Health and Human Services Agency (HHS) regions, every year between 2017-2021.
- The age-adjusted death rate from motor vehicle injuries in East Region and North Inland Region was higher than San Diego County and all other HHS regions, every year between 2017-2021.



Local Statistics and Disparities



- In San Diego County, North Inland Region had the highest actual and age-adjusted death rates (11.6 per 100,000 residents respectively) due to motor vehicle injuries, followed by East Region (11.0 per 100,000 residents respectively) in 2021.
- In San Diego County, North Central Region had the lowest actual (4.8 per 100,000 residents) and age-adjusted (4.6 per 100,000) death rates due to motor vehicle injuries, followed by Central Region (8.9 per 100,000 residents actual and 8.7 per 100,000 residents age-adjusted) in 2021.

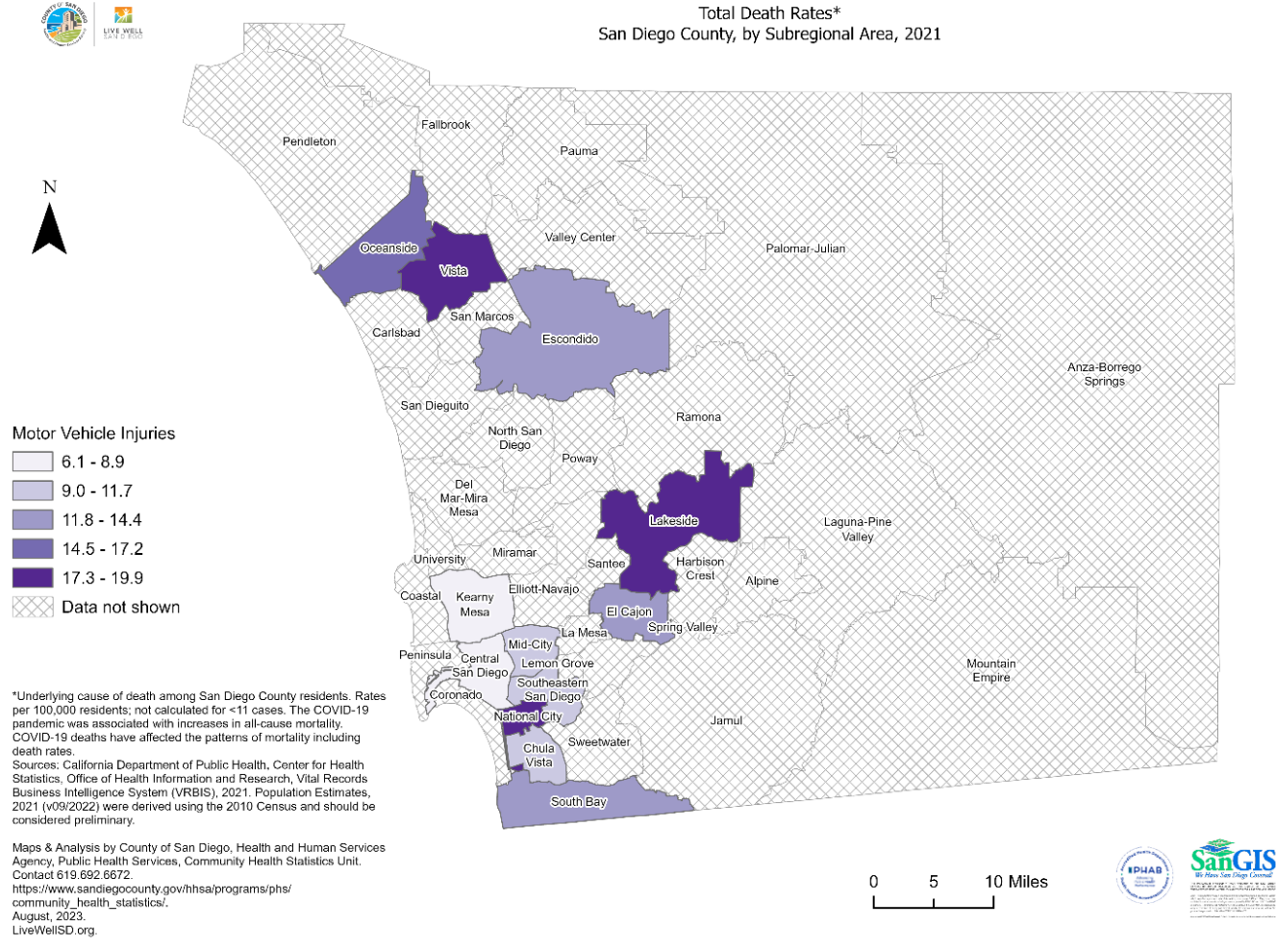


Local Statistics and Disparities



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Total Death Rates*
San Diego County, by Subregional Area, 2021



- In 2021, residents of subregional areas National City, Lakeside, and Vista had the highest motor vehicle injury death rates in San Diego County.
- Compared to other subregional areas, in 2021, residents of Kearny Mesa and Central San Diego had the lowest motor vehicle injury death rates in San Diego County.

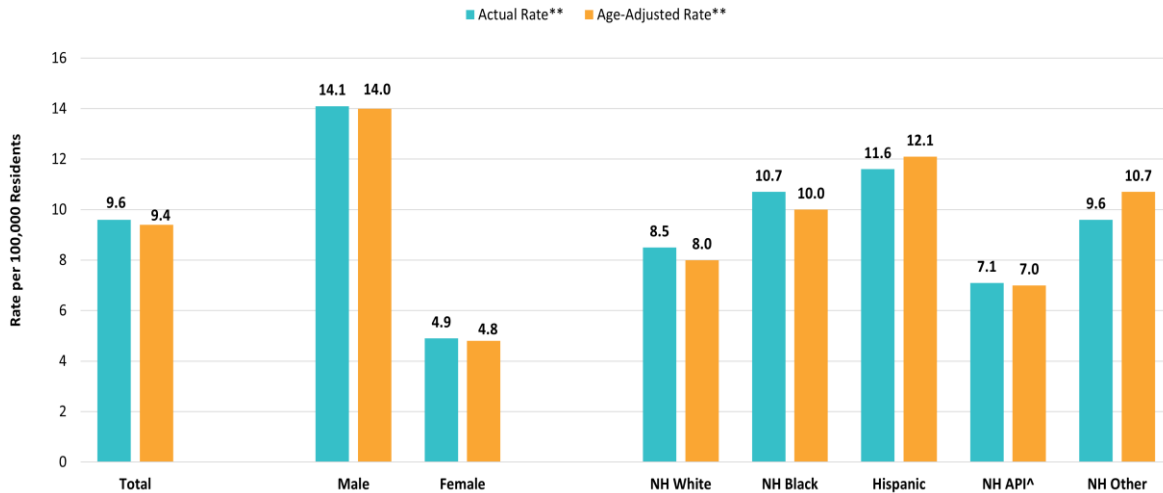


Local Statistics and Disparities



- In 2021, Non-Hispanic Asian/Pacific Islanders had the lowest actual and age-adjusted rates of death due to motor vehicle injuries in San Diego County compared to other race/ethnicities.
- Compared to other race/ethnicities, Hispanic residents of San Diego County had the highest actual (11.6 per 100,000 residents) and age-adjusted (12.1 per 100,000 residents) rates of death due to motor vehicle injuries in 2021.
- In 2021, males in San Diego County had higher actual (14.1 per 100,000 residents) and age-adjusted (14.0 per 100,000 residents) rates of death due to motor vehicle injuries compared to females.

Motor Vehicle Injuries*: Actual and Age-Adjusted Death Rates** by Sex and Race/Ethnicity, San Diego County, 2021



*Motor Vehicle Injury Death refers to (underlying cause of death) ICD-10 codes V02-04, V09.0, V09.2, V12-14, V19.0-V19.6, V20-V79, V80.3-V80.5, V81.0, V81.1, V82.0, V82.1, V83-V86, V87.0-V87.8, V88.0-V88.8, V89.0, V89.2.
 **Actual rates per 100,000 residents. Age-adjusted rates per 100,000 2000 US standard population.
 ^API = Asian and Pacific Islander. NH refers to Non-Hispanic.
 Source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS), 2021. SANDAG Population estimate 2021 (v09/2022).
 Population estimates for 2021 were derived using the 2010 Census data and should be considered preliminary. The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality.

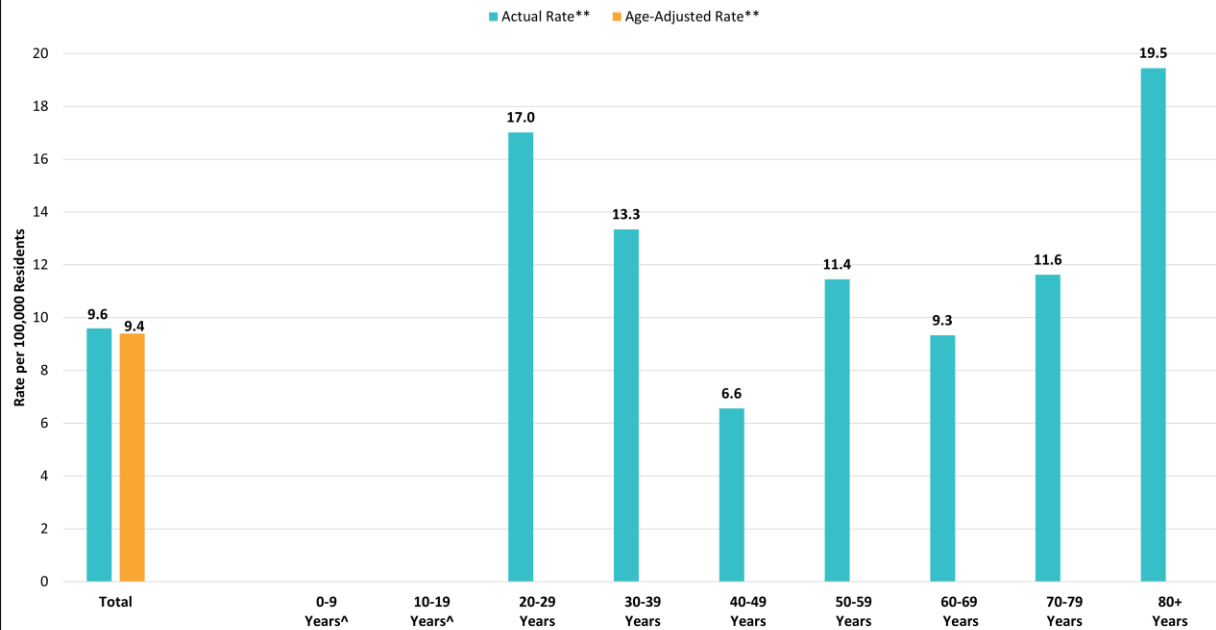
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Local Statistics and Disparities



Motor Vehicle Injuries*: Actual and Age-Adjusted Death Rates** by Age, San Diego County, 2021



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 **Actual rates per 100,000 residents. Age-adjusted rates per 100,000 2000 US standard population.
 ^ Rates not calculated for <11 cases.
 Source: Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Mortality 1999-2020 on CDC WONDER Online Database, released in 2021. California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS), 2021. SANDAG Population estimates 2021 (v09/2022). Population estimates for 2021 were derived using the 2010 Census data and should be considered preliminary. The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality.

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- In San Diego County, 40-49-year-olds (6.6 per 100,000 residents) and 60-69-year-olds (9.3 per 100,000 residents) had lower death rates due to motor vehicle crashes in 2021 compared to residents overall in San Diego County (9.6 per 100,000 residents actual and 9.4 per 100,000 adjusted).
- In 2021, individuals 80 years and older (19.5 per 100,000 residents) had the highest actual death rate in San Diego County, followed by 20-29-year-olds (17.0 per 100,000 residents).



Motor Vehicle Collisions: Prevention for Individuals

Deaths due to motor vehicle collisions are unfortunate and costly, but can be prevented. Risk of injury due to a motor vehicle collision can be reduced with modifiable risk factors.



Prevention



■ Seat Belts and Car Seats

- When inside of a vehicle, use your seat belt. Using seat belts can help reduce collision-related injuries and deaths.
- Children ages 8 and younger should occupy a safety/booster seat.



■ Impaired Driving

- Avoid consuming any alcohol, other illicit drugs, and any prescription/over-the-counter medications known to impair driving.
- If impaired or under the influence, plan ahead and get a ride home and/or agree on a designated driver.



■ Distracted Driving

- Avoid multitasking while driving.
- If possible, assign navigation or other tasks to the passenger to reduce distractions.



■ Bicyclists/Motorcyclists

- Wear a helmet.
 - Wearing a helmet can reduce the risk of head and brain injuries and is at least 37% effective in preventing deaths among motorcycle riders.
 - Helmets may reduce the risk of head injury by 69%.

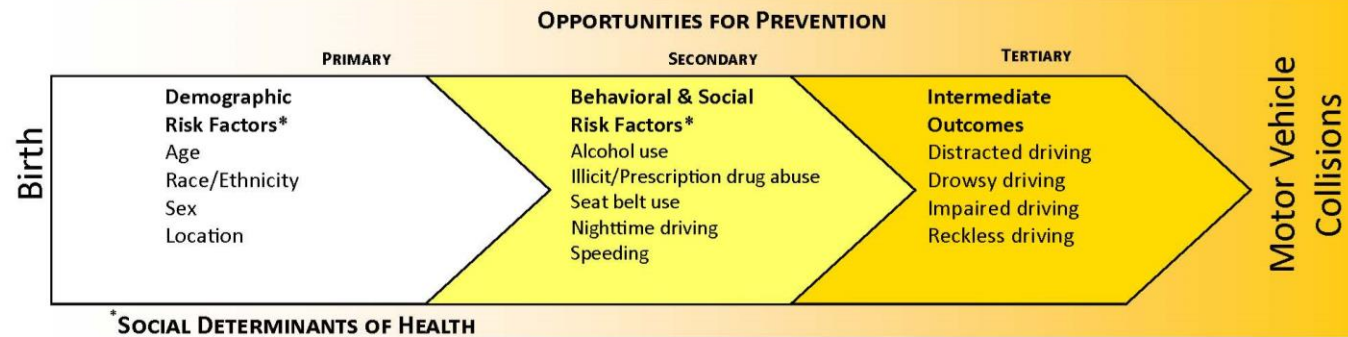


Critical Pathway for Motor Vehicle Collisions

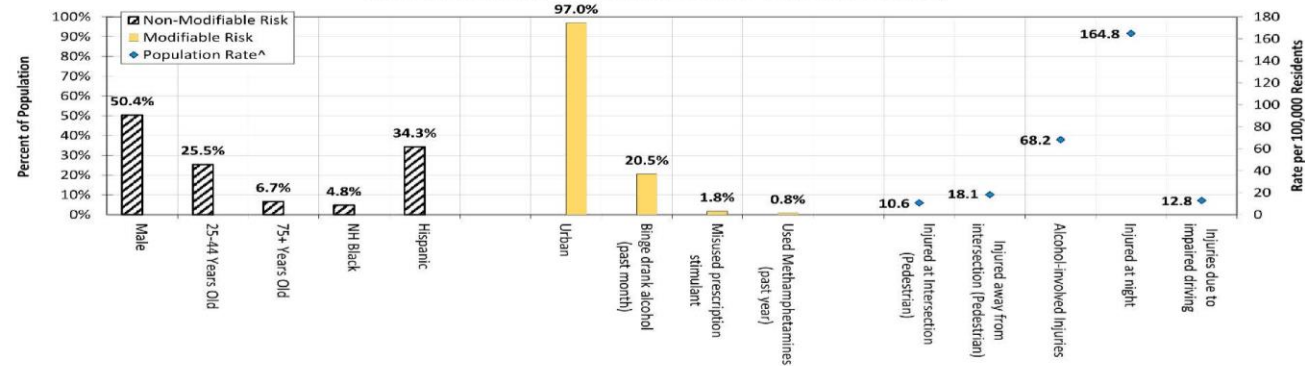


Critical Pathway

Motor Vehicle Collisions



Characteristics of Residents, San Diego County, 2021
Selected Elements from Motor Vehicle Collisions Pathway^{19,20}



[^]The most up-to-date non-provisional data from TIMS is 2020. Rates were calculated using 2020 TIMS data. The data reported are for injury collisions occurring on public roads in San Diego County. Rates include anyone traveling on San Diego County roads. Rates are not calculated for fewer than 5 events. The location of collisions is based on reports filed by law enforcement report and may not contain specific geographic coordinates. Locational data may be different when data are finalized by TIMS. Rates displayed are "crude" rates not adjusted for age and calculated per 100,000 resident population.



CDC Transportation Safety

<https://www.cdc.gov/transportationsafety/>

Eight Danger Zones:

<https://www.cdc.gov/parentsarethekey/danger/index.html>

Contact Us



For more information, including data, resources and reports from the County of San Diego's Community Health Statistics Unit:

www.SDHealthStatistics.com

(619)692-6667



The Public Health Services department, County of San Diego Health and Human Services Agency, has maintained national public health accreditation, since May 17, 2016, and was re-accredited by the Public Health Accreditation Board on August 21, 2023.