

LINDA LINGLE
GOVERNOR OF HAWAII



CHIYOME LEINAALA FUKINO, M.D.
DIRECTOR OF HEALTH

STATE OF HAWAII
DEPARTMENT OF HEALTH
P.O. Box 3378
HONOLULU, HAWAII 96801-3378

In reply, please refer to:
File:

House Committee on Transportation
HB 1169 RELATING TO HIGHWAY SAFETY

Testimony of Chiyome Leinaala Fukino, M.D.
Director of Health

February 14, 2009, 9:00 a.m.

1 **Department's Position:** The Department of Health strongly supports HB 1169, which specifically
2 emphasizes mandatory helmet use for all moped operators and motor scooter operators and passengers.
3 A mandatory helmet law is the single most effective means of preventing death and reducing the
4 severity of non-fatal head injury in moped and motor scooter crashes.

5 **Fiscal Implications:** None.

6 **Purpose and Justification:** Unhelmeted moped and motor scooter riders of all ages are at risk for head
7 injury, which is the leading cause of death and disability in moped crashes. Head injuries can produce
8 effects, which are disabling, long lasting and extremely costly. Safety helmets are the single most
9 effective means of preventing death and reducing the severity of non-fatal head injury in moped or
10 motor scooter crashes.

11 Each year in Hawaii, an average of 5 moped riders are killed, and an average of 295 are involved
12 in major crashes, 93 percent of who suffer injuries (2000-2007). According to DOT crash data, only 7%
13 of moped riders involved in crashes were wearing helmets. Of the 33 moped riders killed from 2001-
14 2007, none wore a helmet at the time of the crash. Nearly two-thirds (62.5%) of these fatalities had
15 sustained a traumatic brain injury. Among the riders admitted to Queen's Medical Center, traumatic

1 brain injury was nearly twice as likely among those not wearing helmets (65%) compared to those
2 wearing helmets (38%).

3 Universal helmet laws can prevent injuries and are fiscally responsible. In Hawaii, for every
4 moped or motorcycle fatality there are 13 hospitalizations and 37 emergency department visits.
5 According to Queen's Hospital Financial System data, from 2005-2007 the average cost for an
6 unhelmeted moped rider who suffers from a traumatic brain injury is 67% higher than helmeted moped
7 rider who suffers from a traumatic brain injury (\$63,242 vs. \$42,250). Currently Medicaid, Medicare or
8 Quest incurs an average of 22.5% of the charges for head injuries related to moped, motor scooter and
9 motorcycle crashes.

10 Mandatory helmet laws are recommended by the Center for Disease Control and Prevention
11 (CDC), National Highway Traffic Safety Administration (NHTSA), Governors Highway Safety
12 Association (GHSA). In addition, they are a recommended strategy in the Hawaii Strategic Highway
13 Safety Plan (SHSP), and are considered cost effective, enforceable and successful at reducing traffic
14 related deaths and injuries.

15 Thank you for the opportunity to testify.



Deputy Directors
MICHAEL D. FORMBY
FRANCIS PAUL KEENO
BRIAN H. SEKIGUCHI
JIRO A. SUMADA

STATE OF HAWAII
DEPARTMENT OF TRANSPORTATION
869 PUNCHBOWL STREET
HONOLULU, HAWAII 96813-5097

IN REPLY REFER TO:

(January 29, 2009)

TESTIMONY OF THE DEPARTMENT OF TRANSPORTATION

HOUSE BILL NO. 1169

COMMITTEE ON TRANSPORTATION

House Bill 1169 mandates a person operating a moped or motor scooter or a passenger riding on a motor scooter to wear a safety helmet, while riding on any highway.

The Department of Transportation supports this bill.

We believe this legislation will help to reduce fatalities and injuries on our roadways because safety helmets save lives. House Bill 1169 will help to enhance safety for moped and motor scooter riders who are the most vulnerable highway users because they are so exposed. They also tend to be the most inexperienced highway users, as compared to the majority of motorcycle riders who typically take the motorcycle rider education courses.

Hawaii had the 3rd highest fatality rate in motorcycle related crashes based on 2006 statistics from the National Highway Traffic Safety Administration (NHTSA). According to NHTSA, a person without a safety helmet that operates a moped or motor scooter is 40 percent more likely to suffer a fatal head injury. In addition, it is estimated that safety helmets can reduce the likelihood of a crash fatality by 37 percent.

Wearing a safety helmet is the single most effective way to prevent head injury resulting from a moped or motor scooter crash. Head injury is a leading cause of death in moped and motor scooter crashes.

IPAC

Injury Prevention Advisory Committee

February 14, 2009, 9:00 a.m.

The Honorable
Chair, Souki and the House Transportation Committee
State Capitol
Honolulu, Hawaii 96813

Dear Representative Souki and Members of the House Transportation Committee,

Subject: **Support for HB 1169**

The Injury Prevention Advisory Committee strongly supports HB 1169, which mandates the use of a helmet for moped and motor scooter operators and any passengers of motor scooters.

Established in 1990, the Injury Prevention Advisory Committee (IPAC) is an advocacy group committed to preventing and reducing injury in Hawai'i. IPAC members include public and private agencies, physicians, and professionals working together to address the eight leading areas of injury, including motorcycle and moped crashes. We are deeply concerned about the human and financial cost to Hawai'i of not having a universal mandatory helmet law for moped, motor scooter or motorcycle riders.

Mandatory helmet laws work. They are easy to enforce, because violators are highly visible. States that enact mandatory helmet laws achieve almost 100% compliance.

The benefits of a mandatory helmet law outweigh the small inconvenience to the rider. The cost of a U.S. DOT helmet is as little as \$40, which is far less burdensome than the physical, emotional and financial costs of a traumatic brain injury. Among the moped riders admitted to Queen's Medical Center, traumatic brain injury was nearly twice as likely among those not wearing helmets compared to those wearing helmets. According to 2007 Emergency Medical Systems Records, Hawai'i had 412 injury related moped crashes. Nearly 93% of the moped riders were not wearing a helmet at the time of the crash. With this magnitude of crashes a helmet law is desperately needed.

The Injury Prevention Advisory Committee urges passage of a mandatory helmet law for mopeds and motor scooters riders; it will save lives, save money, is easy to enforce and will work.

Thank you for allowing us to testify.

Sincerely,

Bruce McEwan
Chair
Injury Prevention Advisory Committee

A safe Hawai'i from the mountains to the sea.



SAFE KIDS Hawaii

TO: Transportation Committee
Rep. Souki, Chair
Rep. Awana, Vice-chair

FROM: Susan Yates, Executive Director, Keiki Injury Prevention Coalition

RE: HB 1169, February 14, 2009, Rm. 309, 9:00 a.m., State Capitol

The Keiki Injury Prevention Coalition strongly supports HB 1169 which would require helmets to be worn while operating mopeds and motor scooters.

Of the 33 moped riders killed between 2001 and 2007, not one was wearing a helmet.

Another 295 people were involved in major crashes with their mopeds during this same time. Traumatic brain injury was twice as likely among those not wearing helmets. These are horrible injuries, many of which could be prevented through the passage of HB 1179.

In 2007, 80 of 85 head injuries due to moped crashes belonged to those not wearing a helmet. Of the moped riders under the age of 18 who were injured, less than 8% wore a helmet.

The passage of HB 1179 requiring helmet use during moped and motor scooter operation also would save a considerable amount of money. According to data from Queens Medical Center, it costs 67% more to treat a non-helmeted rider.

Helmets save lives. Passage of this law is a straightforward way to save lives and to reduce head injuries, especially among our children.

The Keiki Injury Prevention Coalition is dedicated to preventing and reducing injuries to Hawaii's children. We represent all major medical and human service organizations in the state to spearhead efforts to reduce childhood injuries through education and through collaborative efforts with the government and private sector.



Ian L. Mattoch • Daniel P. Kirley • Mark F. Gallagher • Bruce A. Larson • Stuart M. Kodish • Emily K. Waters

Law Offices of Ian L. Mattoch

Pacific Guardian Center, 737 Bishop St., Suite 1835, Honolulu, HI 96813 • Ph. (808) 523-2451 Fax (808) 531-2652
www.ianmattoch.com

STATE OF HAWAII
HOUSE COMMITTEE ON TRANSPORTATION
Conference Room 309, State Capitol

February 14, 2009, 9:00 a.m.

RE: House Bill 1169: Relating to Highway Safety
House Bill 1429: Relating to Mopeds

Chair Rep. Joseph M. Souki, Vice Chair Rep. Karen Leinani Awana, and Members of the Committee:

My name is Ian Mattoch and I am offering testimony in support of H.B. 1169 and H.B. 1429 as President and legal counsel to the Brain Injury Association of Hawaii, and a personal injury attorney who specializes in brain injury cases.

The bills before you propose to require all operators of motor scooters and all passengers on motor scooters and mopeds on any highway to wear a safety helmet with a chin strap. According to the National Highway Traffic Safety Administration (NHTSA) head injury is the leading cause of death in motorcycle crashes. In accidents where the rider survives, helmets are 67% effective in preventing brain injuries. Data collected by NHTSA in three states with universal helmet laws showed that without the helmet law, total extra inpatient charges would have doubled from \$2,325,000 to \$4,095,000. This figure does not account for long-term care which can cost the state on average approximately \$2 million dollars over the lifetime of the survivor. When private sources of payment are considered, the cost is even greater.

The dynamics of a two-wheeled vehicle are much like a bowling ball released from the hand of a bowler. Once released, a change of course is not possible. Additionally, a two-wheeled vehicle offers no protection to its rider or its passenger, so that all of the energy of impact causes direct injury to the rider or passenger. When the injury is to the head, it is catastrophic. While "mild" traumatic brain injury is in fact a medical description, there is no such thing. Every head injury is significant.

The economic and social cost of head injury, whether paid by private resources or by the society through governmental agency funding, is great. Anecdotally, by an example, our client Beverly Gomes sustained a severe brain injury in a vehicular accident. The cost of her lifetime care was projected to be \$9 million dollars. The cost of purchasing a structure to fund that lifetime care was \$3,921,953.00. While

Hilo
586 Kanoelohua Ave., Ste. 200
Hilo, HI 96720

Maui
1 Main Plaza, 2200 Main St., Ste. 523
Wailuku, HI 96793

Waimea
Spencer House, Ste. 3
65-1148 Mamalahoa Hwy.
Kamuela, HI 96743

Kona
75-127 Lunapule Rd., Ste. 15B
Kailua-Kona, HI 96740

Lihue
4473 Pahee Street, Suite L
Lihue, HI 96766

RE: House Bill Nos. 1169 and 1429: Relating to Highway Safety
February 14, 2009
Page 2

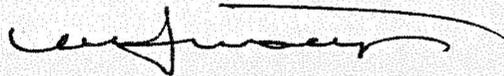
Beverly was not injured in a two-wheel vehicle accident, her life care plan would be the same as a rider on one of the vehicles sought to be regulated.

In the case of Juong Lee, a retired Marine Corps officer and a motorcycle rider, the head injury was less severe. After being knocked from her motorcycle by an inattentive driver, Juong struck her head on a close-by curb. Had she been wearing a helmet at the time, she would not have required the extensive acute inpatient care at Queen's Medical Center. Attached is a photo of Ms. Lee in the neuro intensive care at Queen's.

There is no natural constituency for support of a helmet law. Persons who have never sustained a head injury as a result of not wearing a helmet are unaware of the consequences of failing to take this simple and inexpensive form of protection. Once severely injured or dead, the cost of failing to take such protection becomes apparent to the survivor or his loved ones. As a society, we have taken steps to protect members of the military serving in Iraq. Isn't it now time to face up to the need for the protection a helmet provides a person riding on a two-wheeled vehicle on our crowded roadways? A difficult political decision, but irrefragably, the right decision to make.

On behalf of those uninjured persons who have yet to realize the risk of unprotected riding of two-wheeled vehicles, I urge you to give your favorable consideration of House Bill 1169 and House Bill 1429 in the name of safe cycling. This legislation is not draconian as its critics might allege: it is the responsible action of a legislative decisionmaker exercising concerns for the people of Hawaii.

Respectfully,



IAN L. MATTOCH

ILM:lww
Encl.





Mothers Against Drunk Driving HAWAII
700 Bishop Street, Suite 1111
Honolulu, HI 96813
Phone (808) 532-6232
Fax (808) 532-6004
www.maddhawaii.org

February 14, 2009

To: Representative Joseph M. Souki, Chair – House Committee on
Transportation; Representative Karen Leinani Awana, Vice Chair; and
members of the committee

From: Arkie Koehl, Chairman –Public Policy Committee, MADD-Hawaii

Re: House Bill 1169– Relating to Highway Safety

I am Arkie Koehl, speaking in support of House Bill 1169 on behalf of the membership of MADD-Hawaii.

MADD supports the use of safety helmets for those operating mopeds and motor scooters, as well as for motorcycle riders. Research shows that helmets reduce crashes as well as deaths and serious injury on the highways.

Thank you for the opportunity to submit testimony.

Brian Grayling, State Director
Street Bikers United
P.O. Box 5003
Kaneohe, HI 96744
(808) 216-2040

Thursday, February 12, 2009

Committee on Transportation

Representative Joseph M. Souki, Chair
Representative Karen Leinani Awana, Vice-Chair

Representative Henry Aquino
Representative Faye Hanohano
Representative Gilbert Keith-Agaran
Representative Marilyn Lee
Representative Mark Nakashima
Representative Karl Rhoads
Representative Scott Saiki
Representative Roy Takumi
Representative Kyle Yamashita
Representative Kymberly Pine

Testimony Against HB1169

Members of the Transportation Committee:

Normally Street Bikers United would not involve themselves with the consideration of legislation dealing with mopeds and bicycles. However, HB1169 proposes that moped and motor scooter riders wear a safety helmet with a chin strap. SBU would like to remind the committee of HRS291-195, which already mandates a safety helmet fastened with a chin strap for moped riders under 18.

So who would be affected by HB1169 if passed? Primarily the young college students and eighteen to twenty five year olds whose income is usually low, and their moped their only means of transportation. The cost of a helmet for many would be equivalent to a months worth of groceries. In these times of gridlock and overburdened roads and parking facilities, legislators should be encouraging the use of bicycles and mopeds under the current rules and regulations, and not put up road blocks. Further, in discussions with local moped dealers, there is a genuine concern that a helmet law will cause a clear and dramatic decrease in alternative vehicle sales. We should not be placing further governmental regulations on a means of transportation that is efficient, reduces congestion on our already taxed roadways, reduces pollution, and saves our natural resources.

Under the Statutes, the use of the word moped and bicycle is almost interchangeable. Certainly, as a small example, mopeds have the right of use of the bicycle lane. Yet there is no proposal to mandate helmets for bicyclists over sixteen. There is an intrinsic unfairness to HB1169.

Street Bikers United has always held the tenant that allows those adults who ride to decide whether to wear a helmet. This basic belief should extend to the laws governing the riders of mopeds and bicycles, and we urge the removal of HB1169 from further consideration.

Thank you for your attention.

Brian Grayling
State Director, SBU

awana3-Elenoa

From: Carolyn Fujioka [carolyn.fujioka.atxn@statefarm.com]
Sent: Thursday, February 12, 2009 4:31 PM
To: TRNtestimony
Subject: Testimony HB1169 Feb. 14

Testimony to the House Committee on Transportation
Saturday, Feb. 14, 2009 9:00 a.m.
Conference Room 309, State Capitol

Re: House Bill 1169 Relating to Highway Safety

Chair Souki, Vice-Chair Awana, and committee members:

I am Carolyn Fujioka on behalf of State Farm Mutual Automobile Insurance Company, a mutual company owned by its policyholders. **State Farm supports HB 1169.**

State Farm is vitally concerned with reducing motorized vehicle injuries and deaths on and off roadways. In the interests of our policyholders who ride mopeds, all-terrain vehicles, motorcycles, and other motorized vehicles, and for all of us who pay for the medical and societal costs incurred from the fatalities and severe head injuries of non-helmeted riders, State Farm supports a helmet law and appropriate fines for violations.

Programs that promote voluntary use of helmets do not achieve the high levels of helmet use found in helmet law states. We urge your favorable consideration of HB 1169.

Thank you for the opportunity to testify.

**STATE HOUSE OF REPRESENTATIVES
COMMITTEE ON TRANSPORTATION
HEARING**

**FEBRUARY 14, 2009, 9:00 am
STATE CAPITOL, CONF. RM. 309**

**Testimony in support of
HB 1169, Relating to Highway Safety**

CHAIR JOSEPH SOUKI, VICE CHAIR KAREN LEINANI AWANA, AND MEMBERS OF THE COMMITTEE:

Thank you for the opportunity to provide testimony in support of HB 1169, which makes it mandatory that persons operating a moped or motor scooter or riding as a passenger on a motor scooter on any highway shall wear a safety helmet with a chin strap.

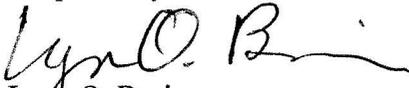
My name is Lyna Burian. I am a member of the Brain Injury Association of Hawaii (BIA-HI). My son, Albert, sustained a brain injury sixteen years ago, and since then I have been involved with the BIA-HI, where I have met a number of people with brain injuries from traffic accidents involving mopeds, motor scooters and other two-wheeled vehicles. They were not wearing helmets at the time of their accidents.

Brain injury changes not only the life of the individual completely, but the lives of his/her family members as well. Depending on what part of the brain gets injured, the individual may suffer physical, cognitive or behavioral problems, and what is so sad about it is that very few rehabilitative services are available and affordable in Hawaii for the survivors after the initial acute care phase.

The best cure for brain injury is PREVENTION. According to statistics gathered by the Brain Injury Association of America (see attached information sheets), 1.4 million people sustain a brain injury in the United States each year. Direct medical costs and indirect costs, such as lost productivity from TBI, totaled an estimated \$60 billion in the U.S. in 2000. Wearing a helmet can make a big difference. A recent study showed that the use of helmets reduces the risk of brain injuries by 88%.

I urge you to pass HB 1169. It will help save lives. It will help reduce the number of brain injuries related to crashes.

Respectfully Submitted,



Lyna O. Burian
1515 Nuuanu Avenue, #40
Honolulu, Hawaii 96817

Facts about Traumatic Brain Injury

What is a traumatic brain injury?

A traumatic brain injury (TBI) is defined as a blow or jolt to the head or a penetrating head injury that disrupts the function of the brain. Not all blows or jolts to the head result in a TBI. The severity of such an injury may range from "mild," i.e., a brief change in mental status or consciousness to "severe," i.e., an extended period of unconsciousness or amnesia after the injury. A TBI can result in short or long-term problems with independent function.

How many people have TBI?

Of the 1.4 million who sustain a TBI each year in the United States:

- ♦ 50,000 die;
- ♦ 235,000 are hospitalized; and
- ♦ 1.1 million are treated and released from an emergency department.¹

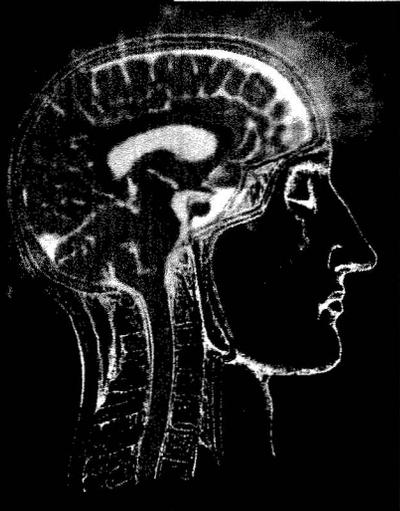
The number of people with TBI who are not seen in an emergency department or who receive no care is unknown.

What causes TBI?

The leading causes of TBI are:

- ♦ Falls (28%);
- ♦ Motor vehicle-traffic crashes (20%);
- ♦ Struck by/against events (19%); and
- ♦ Assaults (11%).¹

Blasts are a leading cause of TBI for active duty military personnel in war zones.²



Who is at highest risk for TBI?

- ♦ Males are about 1.5 times as likely as females to sustain a TBI.¹
- ♦ The two age groups at highest risk for TBI are 0 to 4 year olds and 15 to 19 year olds.¹
- ♦ Certain military duties (e.g., paratrooper) increase the risk of sustaining a TBI.³
- ♦ African Americans have the highest death rate from TBI.¹

What are the costs of TBI?

Direct medical costs and indirect costs such as lost productivity of TBI totaled an estimated \$60 billion in the United States in 2000.⁴

What are the long-term consequences of TBI?

The Centers for Disease Control and Prevention estimates that at least 5.3 million Americans currently have a long-term or lifelong need for help to perform activities of daily living as a result of a TBI.⁵

According to one study, about 40% of those hospitalized with a TBI had at least one unmet need for services one year after their injury. The most frequent unmet needs were:

- ♦ Improving memory and problem solving;
- ♦ Managing stress and emotional upsets;
- ♦ Controlling one's temper; and
- ♦ Improving one's job skills.⁶

TBI can cause a wide range of functional changes affecting thinking, language, learning, emotions, behavior, and/or sensation. It can also cause epilepsy and increase the risk for conditions such as Alzheimer's disease, Parkinson's disease, and other brain disorders that become more prevalent with age.^{7,8}

Collaborating Organizations

Brain Injury Association of America

www.biausa.org
800-444-6443

Centers for Disease Control and Prevention

www.cdc.gov
800-311-3435

Defense and Veterans Brain Injury Center

www.dvbic.org
800-870-9244

Health Resources and Services Administration

www.hrsa.gov
301-443-3376

National Association of State Head Injury Administrators

www.nashia.org
301-656-3500

National Brain Injury Research Treatment and Training Foundation

www.nbirtt.org
434-220-4824

National Center for Medical Rehabilitation Research, NICHD, NIH

www.nichd.nih.gov/about/ncmrr
800-370-2943

National Institute on Disability and Rehabilitation Research

www.ed.gov/about/offices/list/osers/nidrr
202-245-7640

National Institute of Neurological Disorders and Stroke, NIH

www.ninds.nih.gov
800-352-9424

North American Brain Injury Society

www.nabis.org
703-960-6500

Social Security Administration

www.ssa.gov
800-772-1213

References

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2. Defense and Veterans Brain Injury Center (DVBIC). [unpublished]. Washington (DC): U.S. Department of Defense; 2005.
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6. Corrigan JD, Whiteneck G, Mellick D. Perceived needs following traumatic brain injury. *Journal of Head Trauma Rehabilitation* 2004;19(3):205-16.
7. National Institute of Neurological Disorders and Stroke. *Traumatic brain injury: hope through research*. Bethesda (MD): National Institutes of Health; 2002 Feb. NIH Publication No. 02-158. Available from: www.ninds.nih.gov/disorders/tbi/detail_tbi.htm.
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