

Stay involved and reduce the cost of young drivers on New Zealand roads

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Abstract

Introduction: New Zealand's road safety strategy *Safer Journeys* identifies young people driving on a restricted licence as having a high crash rate when driving solo for the first 6–12 months. **Method:** A campaign was developed to reduce the incidence of crashes amongst restricted solo drivers. Parents were identified as key influencers. An advertising and public relations campaign was used to increase parents' awareness of the risk that teens face on their restricted licence, and to encourage parents of restricted drivers to 'stay involved' at a time when the majority of parents would rather let go. The campaign directed parents to a website that provided advice and tools about how parents can stay involved. **Results:** The advertising delivered high prompted recall, high takeout of intended key messages amongst the target audience and motivated them to visit the website www.safeteedriver.co.nz. **Conclusions:** Restricted drivers will continue to be a high crash risk group. Parental connectedness has been established as a protective factor against a range of health outcomes. Parents/caregivers/whanau will need to continue to monitor their restricted driver to reduce crash risk. Parents of adolescents are able to be targeted, as a means of influencing adolescent health risks, despite the majority of adolescent health campaigns excluding parental influence.

Introduction

Learners Licence

Gaining a driving licence is usually considered one of the first legal norms in our society that signifies a move towards independence. New Zealand has one of the lowest ages at which a person can begin the licensing process. Until 2010, drivers in New Zealand were able to obtain their Learner licence from 15 years of age, and were able to drive solo six months later. The New Zealand government proposed a range of initiatives in the ten year road safety strategy *Safer Journeys 2010–2020* (Ministry of Transport, 2010) which repackage the young driver driving licensing experience, with an aim to reduce risks associated with young drivers. These included raising the driving age to 16 years, making the restricted test more difficult, introducing a zero limit for alcohol for young drivers, and investigating vehicle power restrictions.

Practice, a learner driver education programme, is promoted to all learner drivers via a direct marketing campaign, and captures about 27% of teenage learner drivers (Practice, 2011). *Practice* encourages parents and their teenage learner driver to practice a diverse range of driving skills in a range of conditions. Thus the majority of teenage learner drivers learn to drive from their parents (Begg, Brookland & McDowell, 2009). Without a programme such as *Practice*, learner drivers are likely to learn to drive based on what their parents consider to be important. Parents have been found to focus on essential low level skills for operating a car, such as steering, changing gears, looking in mirrors, parallel parking and U turns (UMR, 2010), and most often do not include higher order skills such as hazard perception, trip planning and self assessment (Hatakka, Keskinen, Gregersen, Glad, Hernetkoski, 2002). Many learner drivers utilise driving instructors, often for correcting bad habits, and as a final check before sitting the restricted licence (UMR, 2010; Begg et al., 2009).

Parent-teen relationship

Mid-adolescence can be characterised by increased levels of conflict between parent and teenagers which coincides with the learner and restricted licence phase. During adolescence, the relationship between parents and their teenager changes. Parents are no longer the primary influencer, on their teenager. This role is now taken by the teenager's peers. The parental role becomes more about imposing boundaries on their adolescent, which are overtly resented (Cited in Seiffge-Krenke, 2006).

In Western culture gaining independence from the family is considered an important cultural norm. Adolescence is where this separation between family identity and self identity begins to take place. Adolescents place a great deal of importance on asserting their individuality, and establishing a separate identity from their parents, on the path to adulthood. Adulthood for adolescents is about achieving specific role and biological transitions, including gaining a driving licence, smoking or having sex. Parents consider obeying social norms, such as not drinking and driving and thinking of others, to be important behaviours in adulthood. This gap in perception between parents and adolescents, of what it means to be an adult, is where many conflicts arise (Nelson, Padila-Walker, Madsen, Barry & Badger, 2007).

It can be very difficult for parents and teenagers to retain a good relationship during this phase. It largely depends on the parents' ability to demonstrate respect for their child's autonomy, provide warmth and support, and exercise the appropriate amount of control (Cited in Seiffge-Krenke, 2006). Despite family conflicts, driving lessons continue to occur within the family (UMR, 2011). *Safer Journeys* (Ministry of Transport, 2010) recommends 120 hours of supervised driving in a range of driving conditions that learner drivers should aim to achieve before they drive solo. Previous research has shown that if a learner driver completed this many hours they could reduce their crash risk by 40 percent when they drive solo, compared to another group of young drivers who undertook around 48 hours of supervised driving

practice (Gregersen, Berg, Engstrom, Nolen, Nyberg & Rimmo, 2000). Learner drivers in New Zealand are estimated to do about 50 hours of supervised practice (Ministry of Transport, 2010). The majority of this driving occurs on urban roads, on short trips to the shops, during the day or when the weather is good (Begg, Brookland & McDowell, 2009). The relationship that exists between parent and teen might be part of the reason that such a small number of supervised driving hours are completed, alternatively parental apathy, and belief that a small number of hours are sufficient to pass the restricted licence test, may be another explanation of why such low supervised driver hours are reported.

Parental Influence

Parental-family connectedness with adolescents is essential for their health and wellbeing. Parental connectedness is a protective factor against a range of health risk behaviours, such as adolescent sexual activity (Ream & Savin-Williams, 2005), smoking progression (Simons-Morton, Abroms, Haynie & Chen, 2004), and every health risk behaviour except history of pregnancy (Resnick, Bearman, Robert, Blum, Bauman, Harris, Jones, Tabor, Beuhring, Sieving, Shew, Ireland, Bearinger & Udry, 1997). Encouraging parents to take a more active role in their adolescent's life is complex. Parents have a natural optimism bias that can lead them to ignore material about potential risks that their children face. This is problematic as parents may not make a correct connection between their beliefs about the potential risk, and their child's actual risk. This gap may result from a perception that the risk, although present, is not high enough to justify the effort to reduce the risk. Parents are also influenced by external cues, such as where a person lives, what school they go to and what their friends are like (Harrison, 2010). Even 'good kids' can be at risk, even though they may not participate in risky behaviours.

Restricted Licence

After six months on a Learner Licence, learner drivers are eligible to sit the Restricted Licence test – a practical test that assesses their driving competency. Some parents push their adolescent to gain their restricted licence so they can escape being their 'taxi,' and get 'their life back.' Many parents believe that once on a restricted licence their teenage driver is a fully competent driver (NZTA, 2010).

Gaining a restricted licence can be a double edged sword. While it frees parents from the responsibility of transporting their child, it also increases their concern around their child. As adolescents become more mobile, parents worry about their child's access to sex, drugs and peer pressure (NZTA, 2010). Their levels of fears may be misplaced, as parents are unaware that once driving solo, young restricted drivers, especially males, are most at risk of being involved in a crash resulting in a fatality or serious injury, than at any other time in their life (Lewis-Evans, 2010).

Young drivers are over-represented in all crash statistics. 15-19 year olds are 6 percent of all licensed car drivers, and make up 14 percent of minor injury crashes,

14 percent serious injury crashes and 13 percent of fatal crashes (Ministry of Transport, 2011). Males 15–19 years are ten times more likely to crash than males 55–59, while females 15–19 years are seven times more likely to crash than their older counterparts. Further, of all fatal crashes for people 15–19 years of age, 30% of drivers are on their Full and Restricted licence, while 21% are on their Learners licence. The annual social cost is \$1.05 billion for crashes of drivers aged 15–24 years of age, this is 30 percent of the social cost associated with all injury crashes (Ministry of Transport, 2011).

Crashes occur during the restricted phase for young drivers, as they are exposed to new driving conditions such as night time driving, weather, long distance, and on-road and in-car distractions. Young restricted licence drivers underestimate the complexities of driving, and often push the boundaries. Steinberg (2007), has stated that poor decision during adolescence can be attributed to the underdeveloped part of the brain responsible for attention, planning, impulse, and self control. This part of the brain continues to mature into young adulthood.

Parents underestimate the risk that their teen faces every time they drive solo, as parents do not understand the risk factors, and they may not be aware of the protective influence that their involvement in their teen's driving life can have. To address this risk, parents firstly need to understand that there is a risk, and secondly to ensure that they make good decisions on behalf of their teen, and continue to monitor their teen's driving when on their restricted licence.

Previous Social Marketing Campaigns

A stocktake of behavioural change campaigns utilising parents as influencers in New Zealand took place. Despite the positive effect of parental influence, and connectedness being well established (Ream, et al., 2005; Simons–Morton, et al., 2004; Resnick, et al., 1997) few campaigns utilised parental influence as a strategy in campaigns targeting adolescent behaviour. Twenty four social marketing campaigns were identified in the report '*Social marketing to parents: An Overview of New Zealand Initiatives and Research*,' (2009), and only one campaign (Ministry of Health, 2009) engaged parents when their children were in the adolescent phase. Although the key messages were targeted at young women of 17 and 18 years of age directly, Maori and Pacific young women expected their parents and family to influence their decisions related to health matters. Parents also had the expectation that they would make these sorts of decisions for their daughters, regardless of age (Ministry of Health, 2009). The remaining twenty three campaigns utilised parents as influencers up until the age of 12 years.

Thornley & Marsh (2010) conducted a review of *What works in social marketing to young people*, and reported that parental influence has a powerful influence on pre-adolescents. The review recommends a range of strategies when marketing to youth, but did not explicitly recommend the involvement of parental influence in the

adolescent years. The authors stated that for ethnic groups such as Maori, whanau (family) wellbeing is an important motivator, and may be relevant to Maori youth. It appears that when young people reach adolescence they are targeted by behavioural change campaigns as a separate entity from their family unit, negating the potential positive influence that parental involvement could have on the desired outcome.

Method

An advertising and public relations campaign was developed to address the high crash risk for restricted drivers. The campaign comprised advertising (television, radio, online, billboards, print), in-programme product placement, public relations, utilising key road safety partners and commercial partners. An education website www.safeteedriver.co.nz was developed to help parents work with their restricted driver to reduce the risk that young drivers face.

Target audience identified

The primary target audience is parents or caregivers, 35–60 years, of restricted drivers who currently live at home with them. This age range was identified as being the most likely to have adolescents between the ages of 16 and 19 years of age. This is based on an analysis of the 2006 New Zealand census, with a projection for 2011 and beyond (Statistics New Zealand).

Identified key influencers and appeals for target audience

It was important to empower parents, and to recognise and empathise with them that the teenage years are difficult. We needed to motivate and encourage them to do more. It was very important to not undermine what parents were already doing, nor to present them with situations too far from reality for them, such as their teen crashing or dying.

Advertising Objectives

- a. Increase the awareness of the risks that young drivers on their restricted licence face on the road due to inexperience.
- b. Increase parents' understanding that when their teenager drives solo they have a very high risk of being involved in a serious or fatal crash especially during the first 6–12 months.
- c. Help parents to realise that their job is not over when their teen gets their restricted licence.
- d. Believe my child is at risk, but there is something I can do about it.

Concept and post production testing

The campaign and post production concepts were tested by means of in-depth interviews with a sample of the target audience. In concept testing, 30 participants independently listened to a recorded narrative of the television advertisement and

were shown other campaign concepts. In post-production testing, 20 participants viewed the television advertisement. Following exposure to the advertising campaign material, the participants in each sample were interviewed face-to-face, using a mixture of 5-point scales and verbatim commentary, to determine among other measures the likeability, relevance, perceived target, key messages and level of agreement with a set of attitudinal statements. Only some of these results are reported in this paper.

Tracking of road safety campaigns

Audience reaction to all NZTA's road safety campaigns is measured continuously by means of telephone and on-line surveys, conducted by an independent market research agency. Approximately 55 interviews are conducted each week, or approximately 230 per month, and the results are combined to provide monthly, quarterly and annual assessments of advertising performance. A set of standard key questions enables us to monitor *free recall, free and prompted recall, likeability, relevance, main message and likelihood to change attitude*. Each quarter approximately 715 people are interviewed.

Results

Development of the advertising campaign

The concept and post-production testing results indicated that the concept resonated with the target audience and delivered key measures. *Total likeability* increased from 60% to 95% from testing to post production phase. *Total relevance* increased from 83% to 100% from testing to post production. An increase of 38% was achieved for *I find this ad compelling* to 95%, and a further increase of 23% for *I will discuss this advertisement with others*, to 80%. The attitudinal statement *The ad directly tackles road safety issues*, dropped from 47% to 30%.

Tracking and monitoring the campaign

Tracking results show on-going health of the campaign. They indicate how successful the campaign is at engaging with the target audience through a range of measures. 'Recall' measures whether people remember the campaign, 'relevance' measures whether it is relevant to people like them and 'likeability' measures the audience's interest. 'Main message' is the reported key messages the target audience believes the campaign is communicating. These measures provide ongoing data which enables a thorough understanding of how the campaign is resonating with the target audience, and whether any changes are necessary.

Table 1 shows who the test group believe the concept is targeted at. In post production testing, the respondents identified more strongly who the intended target audience was – parents with kids learning to drive (50%) than in concept testing (10%). This is due to the original concept being refined after the initial testing phase.

Table 1. Target audience, as rated by test groups over two testing phases

Who is this ad aimed at?	Concept	Post Production
Parents with kids learning to drive	10%	50%
All parents	83%	35%
Learner drivers		25%
Teen drivers	17%	
Male	10%	

Table 2 shows that the intended main messages reported by the test group all increased in post production testing due to the changes that were made from the concept stage. However, the message “*restricted drivers are statistically most likely to be involved in an accident*” is not strongly reported in the post production phase.

Table 2. Main message reported by target audience in two testing phases

Main Message (<i>intended messages italicised</i>)	Concept	Post Production
<i>Parents need to stay supportive/to keep teaching/be involved</i>	<i>33%</i>	<i>55%</i>
Driving restricted is a crucial point in teen's learning to become great drivers		25%
<i>Don't be so eager to let go/cut the string/bail out</i>	<i>10%</i>	<i>20%</i>
Passing a restricted test does not mean teen's suddenly become great drivers	13%	20%
Might be good to take them to a professional instructor		20%
<i>Restricted drivers are statistically most likely to be involved in an accident</i>		<i>15%</i>
Restricted drivers still need your help	10%	10%
<i>Website is available for more information/tips</i>		<i>10%</i>
Control / look after / monitor your children	10%	
Reminding teens on what they have been taught	10%	

Table 3 shows the top five key messages reported by the target audience in the 2011–2012 financial year. The key message indicated in italics shows that this message has grown to 59%. This indicates that the target audience successfully understands that they need to stay involved in with their children once they have their restricted licence. The message “*most of their accidents happen when they are*

on their restricted licence” has not cut through, and has remains a consistently low 12%.

Table 3 Key messages reported by target audience July 2011 – June 2012, by quarter

AGE: 35 – 54 yo	Q311	Q411	Q112	Q212
Main message reported by parents				
Number of respondents who recalled the advertisement	227	248	208	234
<i>Keep supervising your kids after they get their restricted licence/the job isn't over</i>	45%	51%	50%	59%
Kids still need your guidance/teaching support after they pass	23%	15%	22%	15%
Most of their accidents happen when they are on their restricted licence	9%	11%	11%	12%
Passing their restricted does not mean they are should be driving alone	5%	4%	5%	2%
Getting their restricted is not the end, it is the beginning	7%	2%	1%	1%

Table 4 shows the general audience and target audience response to key measures and messages for quarter two 2012. Free recall of the campaign is low at 2% for the target audience, whereas prompted recall is at 90%. It is thought that the current campaign is not considered a traditional road safety campaign, as its aims are not to change behaviour, rather the campaign’s aim is to raise awareness and this could be why the free recall is so low. ‘Likeability’ and ‘relevance’ scores are similar between the general and target audience, which suggest that the campaign appeals to the general public as well as the target audience, as learning to drive is familiar to the majority of the population.

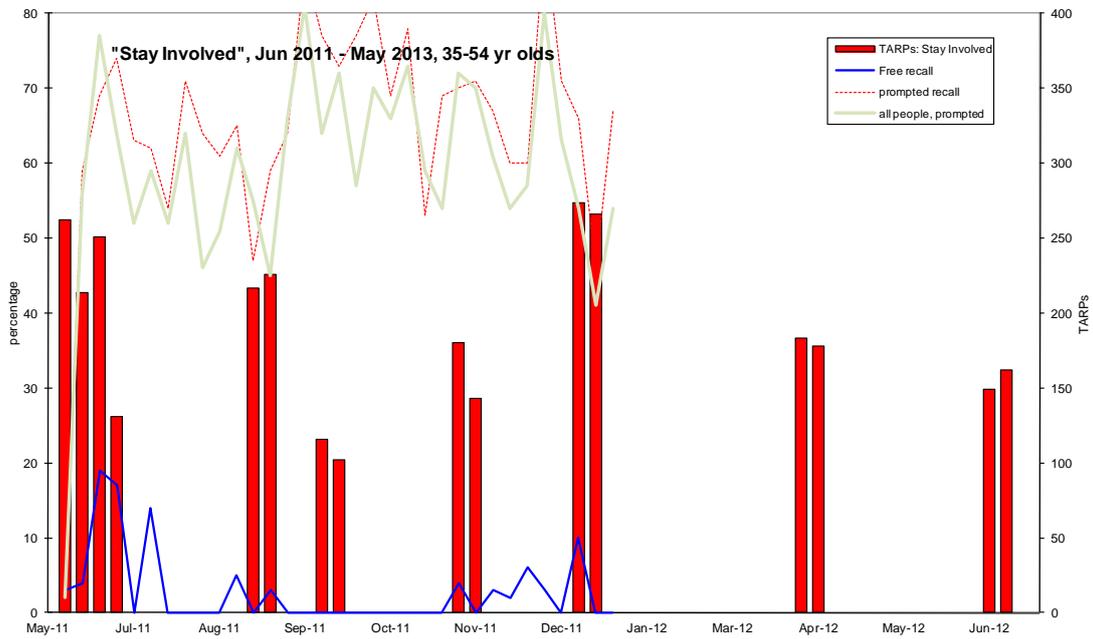
Table 4 showing key measures against key audience and general audience for quarter two 2012

Those aware when prompted	Total General Audience	Total Target Audience
	(n=625)	(n=234)
Free Recall	1% (2%)	2% (3%)

Free and Prompted Recall	87% (69%)	90% (76%)
Likeability	57% (59%)	63% (63%)
Compelling story	45% (49%)	47% (48%)
Will discuss with others	30% (31%)	35% (31%)
Relevance	51% (46%)	54% (43%)
Situation familiar to me	48% (49%)	44% (47%)
People similar to those I know	49% (48%)	49% (50%)
Issues are important to me	44% (41%)	51% (41%)

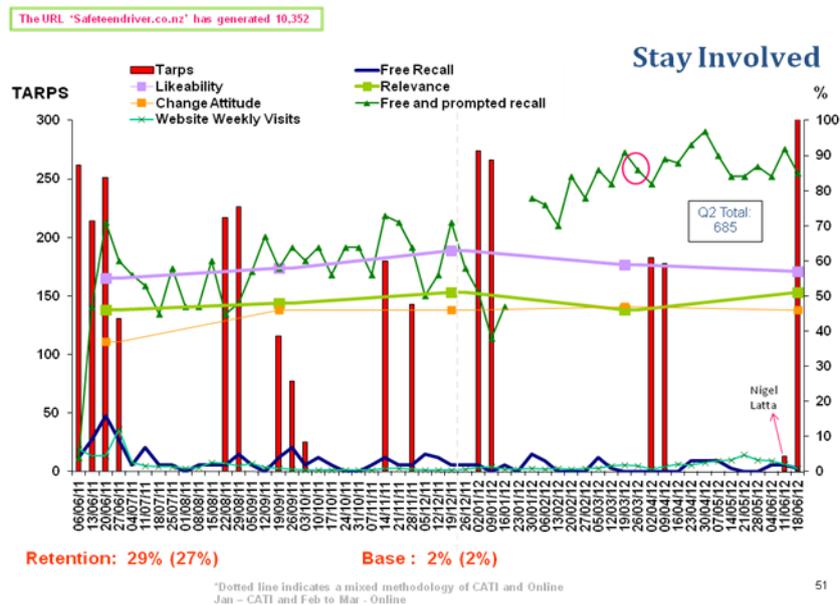
Graph 1 shows the flights of television activity, and shows that the prompted recall for the target audience is slightly higher than the prompted recall for the general audience.

Graph 1 Target and general audience recall against television tarps, May 2011 to December 2011.



The graph 2 outlines the first six flights of the television, with advertising measures shown for a general audience. Free recall is extremely low, however free and prompted recall remains high and holds between flights. Likeability, relevance and change attitude remain consistent over time.

Graph 2 Key advertising measures, from June 2011

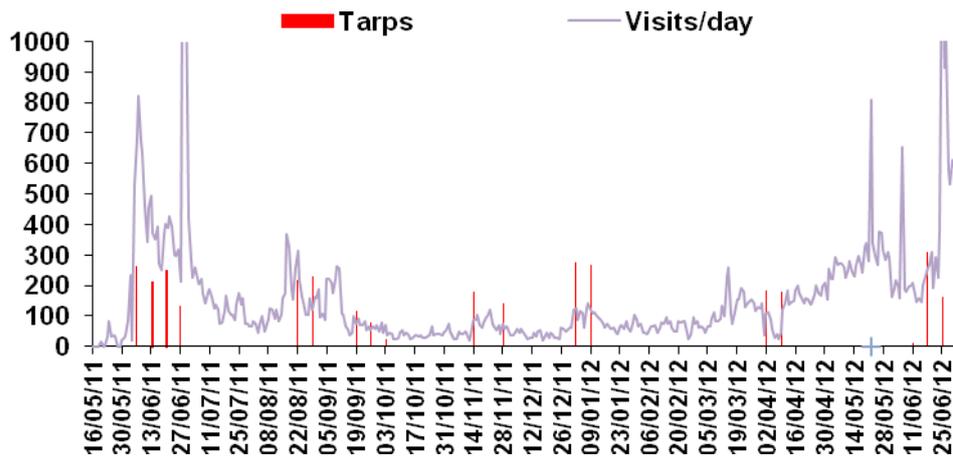


Graph 3 shows visits to safeteendriver website in response to advertising and public relations

Graph 3 shows visits on the safeteendriver.co.nz as monitored by Google Analytics. Google analytics generates detailed information about visitors to websites. A visit to the site is defined as when an individual has found their way to the site and loaded a page. The graph show that visits to the site respond to television advertising. The initial four week launch of the television advertisement drove over 3,250 visits to the site. This pattern is repeated in the subsequent flight. However, the next three flights did not drive such high numbers. Public relations and online, print, radio advertising were scattered throughout the year, and kept a consistent level of promotion of the campaign. Other high visit times were in early May. Online advertising was scheduled during this time, and a particular peak on the 9th of June with a popular television show that focused on the issue young drivers, motivated people to visit the site.

During the period between 16th May 2011 to 25th July 2012 there have been 77,594 visits to the site, and 62,596 were unique visitors. 15,124 were returning visitors.

Graph 3 Visits to safeteendriver website May - July 2012



Discussion

The Young Driver campaign has resonated with parents of restricted drivers. The campaign has delivered high prompted recall, and tracking of two of the intended key messages *“Keep supervising your kids after they get their restricted licence/the job isn't over”*, and *“Kids still need your guidance after they pass”* shows these have been strongly absorbed by the target audience. The third message *“most accidents happen when they are on their restricted licence”* has not cut through with the target audience. Of interest the television advertisement has very low ‘free recall’ when participants in the advertising tracking survey are asked to remember *any road safety advertisements*. This may be a result of the creative approach which focuses on the relationship between the parent and teen.

Promoting the underperforming key message in a new creative approach may increase the number of visits to the safeteendrivers website. As a clear pattern exists between television activity and visits to the website.

Parents of teenagers are a difficult market to target and deliver the correct message to, especially as this was new ground for behaviour change campaigns. It was imperative that the creative approach be relevant and liked by the target audience, as shown in the concept testing and tracking of the campaign. An important element of creating relevance and likeability was to acknowledge the tense relationship between parent and teenager, while showing that parental bond remained strong. Equally important was addressing parental optimism bias, to reduce parental buy out. Optimism bias prevented presenting the real risks that adolescents on their restricted licence face every time they drive solo, such as being involved in a serious crash or fatality. Parents of restricted drivers could possibly ignore information about these risks. They may not be able to, or want to make the connection between the threats to their teenager’s life. Other more influential external cues such as not

smoking, not doing drugs or not having sex, confirm to the parent that their teenager is a good teenager, and that these driving risks would not apply to them. It was important that the campaign engaged parents in a realistic and relevant way, so they could recognise that a problem exists, and address it as opposed to feeling overwhelmed.

The message for parents – that they still have a responsibility for their teen, when they would rather let go – was a difficult message to deliver. This may be the reason that all but one of the previous behavioural change campaigns utilising parents as influencers, chose not to engage parents when confronting issues regarding adolescent health. However, it may be that gaining a licence is the only adolescent health issue that has legal requirements, such as being required to pass a test, where parents and teens must work together to achieve a positive outcome. Other issues such as sex, smoking and drinking occur out of sight and are often hidden, making it a difficult topic to talk about and deal with together.

A growing body of notes that adolescents do not make good decisions in part due to biological immaturity and external influence from peers (Steinberg, 2007), and they require support to help them navigate the challenges of adolescence. Adolescents in Pacific communities (Ministry of Health, 2009), and potentially Maori communities (Thornley & Marsh, 2010), expect their family to influence their health decisions regardless of age. Parental connectedness has found to be a protective factor for a range of adolescent health outcomes (Ream, et al., 2005; Simons–Morton, et al., 2004; Resnick, et al., 1997). Future research could investigate whether a Western cultural model of encouraging individuality, and campaigns that target youth directly during adolescence, without the involvement of the family, is an appropriate model to achieve best health outcomes for adolescents.

Conclusions

The Young Driver campaign has bucked the trend of adolescent focused behaviour change campaigns, and has shown that parents are able to be targeted, as a means of influencing adolescent health risks. The campaign is still very young and in the initial stages of creating impact. It is anticipated, with changes to the wider package of the learner and restricted driver licence stages that a reduction in death and serious injuries of young drivers will occur over time.

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