Agency's traffic safety program over the next several years. It defines the federal strategy for reaching the Secretary's alcohol and belt use goals. Campaign activities will be supplemented by outreach programs involving public and private sector organizations.

Generally, however, Campaign Safe &

Sober has three components:

 Public information and education to increase public awareness of the risks and costs of traffic crashes and to support enforcement efforts through highly visible media

Improved legislation to provide

enforceable traffic laws

· Enhanced enforcement to reduce alcohol-impaired driving and increase compliance with belt use laws through special Traffic Enforcement Programs (STEPS)

To further the overall goals of Campaign Safe & Sober, NHTSA is seeking increased participation of the injury control communities, including medical, nursing and public health organizations. The Agency has a long history of working with health and medical professionals, civic groups, and private sector organizations who can motivate people, through their interpersonal contacts, to exhibit safe driving behaviors. One of the most effective means of educating the public about various highway safety issues has been through these organizations. Many organizations have been committed to occupant protection and impaired driving issues over the years and have, individually, made contributions of time, materials, resources and effort to promote the cause.

In efforts to achieve the Secretary's goals, NHTSA proposes to initiate cooperative efforts with two national, nonprofit medical organizations. Each of the two organizations will develop a motor vehicle injury prevention program specific to the respective organization for implementation in mutually selected states and communities across the country. The program will focus on alcohol and occupant protection issues, but may be expanded to include activities in pedestrian, bicycle and motorcycle safety. Program efforts will be concentrated on working with the organization's members to effectively communicate with their legislators, colleagues, patients, the community and law enforcement officials in an effort to increase safety belt use.

The medicăl community plays a key role in influencing local and state decision makers and elected officials to promote programs and policies that discourage unhealthy behaviors (smoking, alcohol or other drug abuse,

etc.) and encourage healthy behaviors (wearing seat belts, bicycle and motorcycle helmets, use of child safety seats, etc.). However, the potential for medical leadership in the public policy arena often goes unrealized. Capacitybuilding in the medical community needs to be encouraged to augment existing advocacy, legislative and media skills.

Objectives

Under this cooperative agreement, the concepts of injury control, through the promotion of safe traffic safety behaviors, will be advanced. Specific objectives for this cooperative agreement program are as follows:

1. To promote effective traffic safety legislation, with special emphasis on primary safety belt use law upgrades and on broader child safety seat legislation.

2. To work effectively with the media to support the efforts of police to enforce occupant protection (and alcohol-impaired driving) laws.

3. To motivate members of these two national medical organizations and members of the public they serve to adopt traffic-related behaviors that promote safety and health.

Anticipated activities of this cooperative agreement for each of the two medical organizations are:

1. An assessment of existing motor vehicle/injury control prevention activity currently being conducted by the organization.

2. The development, pilot testing and evaluation of a capacity-building workshop for the organization's membership to enhance the media and advocacy skills necessary to support targeted legislative and enforcement activities; and other Campaign Safe & Sober initiatives.

3. Development of policy statements for the organization in support of traffic safety legislation and enforcement.

4. Development and implementation of a focused, mutually-agreed upon strategy (or strategies) targeting high potential States to support legislative and enforcement efforts. Possible approaches include: identification and development of "resource members" to provide technical assistance (on-site, by telephone or by mail) to individual State/local organizations to prepare letter-writing campaigns, to prepare and deliver testimony at legislative hearings, to make personal appearances at key meetings/events and in media interviews, etc.

Anticipated outcomes include:

1. An increase in the number and quality of motor prevention activities conducted by the organizations'

members (ie., civic and professional presentations; media appearances; placement of editorials and articles in organizational publications and in the print media).

2. An observable increase in support for local and statewide (alcohol and safety belt) law enforcement efforts in

selected sites.

3. An increase in the number of medical professionals who are involved in traffic safety legislative advocacy activities (ie. preparation and delivery of testimony, engaging in dialogue with legislators, taking leadership roles in traffic safety advocacy coalitions.)

Specific Tasks

1. The contractor shall meet with the COTR within one week after the award of the contract to review details of the contractor's proposed work plan and schedules for this project.

2. The contractor shall work with NHTSA to mutually identify high potential States that are likely to contribute to reaching a national safety belt use rate of 75 percent by 1997.

3. The contractor shall adapt or develop materials to be used to educate members in high potential States.

4. The contractor shall develop a "capacity-building" strategy for member to work with the media in high potential States to provide support for legislative, enforcement and other ongoing prevention efforts (including media efforts, letter-writing capacity, presenting testimony, etc.)

5. The contractor shall identify and train members in high potential States to deliver support for legislative and

enforcement activities.

6. The contractor or affiliates shall pilot test the capacity-building strategies and resulting traffic safety advocacy using members selected by the medical organization.

7. A description of pilot activities will be required by the COTR before the pilot testing commences. Contingent with the submission of the test plan, the contractor shall present the COTR a detailed method of evaluating the effectiveness of the strategies.

8. The contractor shall implement these support activities.

9. It is imperative that the contractor make provisions in his/her organization to continue the implementation of the strategies developed after the termination of this cooperative agreement within each of the target areas for at least two years. Emphasis should be placed on making this an ongoing program that is self-sufficient. NHTSA will be prepared to offer suggestions that may assist the contractor to achieve this goal.