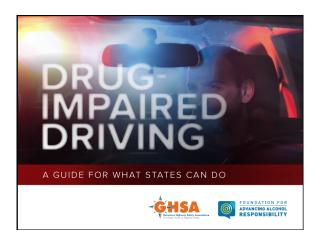


Drug-Impaired Driving: What States Can Do

Jim Hedlund Highway Safety North

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Drug-Impaired Driving: A Guide for What States Can Do

GHSA report released Sept. 30

- ▶ Written by Jim Hedlund, Highway Safety North
- Advised by a panel of experts
 Glenn Davis, CO OTS

Darren Grondel, WTSC Jacqueline Hackett, ONDCP Barbara Harsha, BLH Consulting Erin Holmes, Responsibility.org Duane Kokesch, NTLC Jeff Michael, NHTSA Brandy Nannini, Responsibility.org Stephen Talpins, IBH Joanne Thomka, NTLC Brian Ursino, AAMVA

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Why This Report?

States asked for it:

- "State Highway Safety Offices are increasingly being asked to focus more attention and funding on drug impaired drivers."
- "The legalization of marijuana in Colorado and Washington has added urgency to the need to address drugged driving."
- Studies with key words "drugs" and "driving" in the title as of April 2016 1990 and later: 581 2000 and later: 440
- 2010 and later: 170

 States don't know what to do ...

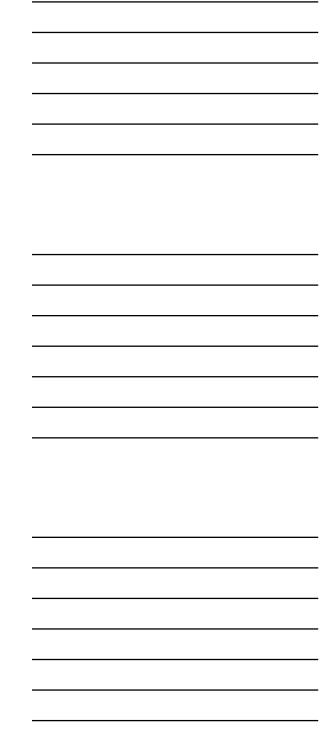
What's in the Report

- > Definition: what drugs can impair
- ▶ Data: problem size and characteristics
- ▶ Science: drug levels, impairment, and crash risk
- Laws: different types, what states have in place now
- ▶ Enforcement: SFST, DEC, oral fluid, blood testing
- Prosecution and adjudication: challenges and strategies
- Training: what's available and useful
- > Sanctions and treatment: what's effective
- Education: what are states doing now
- Recommendations for states

Very Brief Background

Four drug types

- Illegal, legal non-medicinal, prescription meds, OTC
- > Hundreds of drugs, more created daily
 - FARS has codes for 430 specific drugs or metabolites
- FARS 2014, dead drivers, known test results
- 41% with drugs; almost 1/3 of these were marijuana
- 39% with alcohol (any BAC)
- NHTSA roadside survey 2013-14
 - $^{\circ}~$ 22.5% with drugs, both weekday days and weekend nights
 - 13% with marijuana on weekend nights
- $^{\circ}~$ 8% with alcohol on weekend nights; 1.5% with BAC .08 or above



Very Brief Background

- ▶ Any drug can impair experimental studies
 - Impairment can increase if drugs are used in combination or with alcohol
- Drug presence ≠ impairment
- Some drugs dissipate rapidly while impairment remains; other drugs remain in the body long after impairment has dissipated
- Wide ranges of drug concentrations in different individuals produce similar levels of impairment in experimental situations
- > Any drug can increase crash risk
 - $^{\circ}\,$ Good crash risk studies are difficult; lots of not-so-good studies
 - No equivalent of .08 BAC for any drug

Recommendations for States

- 1. Planning
- 2. Education
- 3. Laws and sanctions
- 4. Training
- 5. Testing
- 6. Prosecution and adjudication
- 7. Data

1. Planning Recommendations

- ▶ Assess your state's drugged driving issues know where you stand
- Data, laws, enforcement, education, public knowledge and beliefs
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- ▶ **Build broad partnerships** it's not just law enforcement
 - Impaired driving task force
- ▶ Create a drugged driving strategic plan sooner rather than later
- Plan for the next stage of legal marijuana
- As of April 2016:
 - 19 states: considering marijuana legalization
 - 13 states: considering marijuana decriminalization

Education Challenge: Public Knowledge

- There are many common misperceptions about drugged driving, specifically marijuana-impaired driving. Some people think that:
 - Drugged driving is not a serious problem.
 - Drug use does not adversely affect driving and may improve it (due to compensation strategies).
 - There are no laws prohibiting drugged driving (i.e., it is not illegal).
- The likelihood of detection and apprehension for drugged driving is low.

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Education: Examples from the States

- Prescription medications
 - Arkansas: Arkansas Take Back (disposed of unused meds)
 - New York: Drugged Driving is Impaired Driving
 - Oklahoma: incorporated into End DUI campaign
- Marijuana
 - Colorado and Washington: Drive High, Get a DUI
- Young drivers
 - Ohio: Drugged Driving = Done Driving



*Links to programs and campaigns in report



2. Education Recommendations

- > Develop and implement a campaign
- Define target audiences, message points, and delivery mechanisms
- Include drugged driving in driver ed, high school, and employer programs
- Educate physicians and pharmacists on prescription medication risks

Laws: Types, Current Status

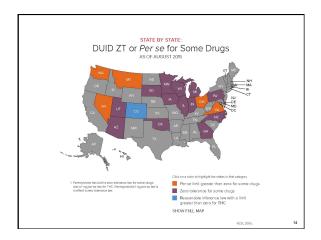
- Impairment laws (driving under the influence of drugs-DUID)
- Illegal to drive while abilities impaired
- All states
- To enforce: observe behavior, link to evidence of a drug

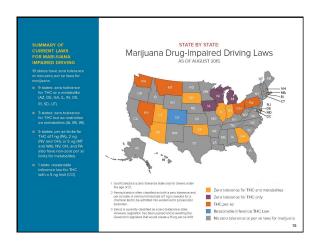
Per se laws

- Illegal to drive with amounts over the per se limit
- 6 states, for some drugs
- To enforce: chemical evidence of drug

> Zero tolerance laws

- $^{\circ}\,$ Illegal to drive with any measureable amount (could include metabolites)
- 15 states, for some drugs
- To enforce: chemical evidence of drug







3. Law Recommendations

- > Zero tolerance for illegal drugs
- > Zero tolerance for drivers under 21 for all drugs
- > Per se law for marijuana if recreational use is legal
- > Examine your DUID laws and revise as needed
- Screening tests, implied consent, separate DUI and DUID charges, etc.

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Enforcement: SFST, DEC, Blood, Oral Fluid

At the roadside

- Stop driver for traffic violation, observe impairment
- Screening: SFSTs can screen for some drugs
- Oral fluid screening kits: 5 minutes, \$20

At the station

- DEC: need trained DRE, exam takes 90 minutes
- Chemical evidence, usually blood: must draw quickly

At the lab

- Drug analysis can cost \$150-300; labs often backed up
- Training
- Advanced Roadside Impaired Driving Enforcement (ARIDE)
- Drug Evaluation and Classification (DEC) Program

Prosecution and Adjudication

Prosecutors and judges

- Often not familiar with DUID cases; different from DUI
- If both alcohol and drug charges, often drop drug charge
 Alcohol is simpler, easier to convict

Training

National:

- National Traffic Law Center (NTLC)
- National Center for DWI Courts (NCDC)
- National Judicial College (NJC)

State:

- Traffic Safety Resource Prosecutors (TSRP)
- Judicial Outreach Liaisons (JOL)



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Sanctions and Treatment

- > Drug and alcohol screening
- **Drug treatment:** used in most states
- ▶ Intensive supervision: used in many states
- DWI and Drug Courts
- 448 combined DWI/drug (hybrid) courts concentrating on DUID offenders
- · 2,800 drug courts

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4. Training Recommendations

- ▶ Law enforcement: ARIDE and DEC
- ▶ **Prosecutors and judges**: through NTLC, TSRPs, NJC, JOLs

5. Testing Recommendations	
Test all fatally-injured drivers for drugs	
 Test all DUID arrestees for drugs Ensure that labs provide timely drug test results 	
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6. Prosecution and Adjudication Recommendations	
 Screen and assess all DUID and DUI offenders Use drug courts, intensive supervision, and drug treatment 	
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7. Data Recommendations	
 Track DUID and DUI separately in crash, arrest, court data Use surveys to track public knowledge and attitudes 	

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Jim Hedlund • jhedlund@sprynet.com
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