

Drugs and Driving:Detection and Deterrence

Advisory Group on Drugs in Traffic

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Key Messages

- Drugs are as serious a problem on the roads as alcohol.
- Drug driving is a different problem than drink driving.
- There is a great deal we have yet to learn.
- The drug-driving problem is of a magnitude deserving a societal response comparable to that afforded the drink-driving problem over the past 30 years.



Overview

- Background
- The Evidence
- Experimental
- Epidemiological Evidence
- Legislation
- Enforcement
- Prevention
- Where do we go from here?



Background

- Over the past 50 years, concern about impaired driving dominated by a focus on alcohol
- A great deal has been learned about alcohol and driving
- Evidence-informed practices have reduced the toll from alcohol-related crashes



What's all the fuss about drugs?

- Very little was known about drugs in traffic
- Research was difficult, fraught with technical and methodological challenges
- Growing recognition of the extent of problem associated with drugs in traffic



The Evidence

 Experimental – the effects of drugs on skills necessary for the safe operation of vehicles

 Epidemiological – the prevalence of drug use by drivers and the impact on crash risk



Experimental Evidence

- Research shows a wide variety of substances can adversely effect the ability to operate a vehicle safely
 - ✓ Illegal drugs (e.g., cannabis, cocaine, opiates)
 - Psychoactive pharmaceuticals (e.g., benzodiazepines, narcotic analgesics)
 - ✓ Over-the-counter remedies (e.g., antihistamines)



Experimental Evidence: Drug Effects

- Decreased alertness
- Sedation
- Impaired coordination
- Increased risk-taking
- Poor decision-making
- Deficits in divided attention
- Impaired cognitive function

Drug effects are not necessarily similar to those of alcohol



Epidemiology (Descriptive)

 Roadside Surveys attempt to determine the prevalence of drug use among drivers on the road

 Random sample of drivers asked to provide bodily fluid sample for analysis of drug content



Roadside Surveys



Many approaches

- ✓Voluntary/mandatory
- √Nighttime/Day & night
- ✓ Police/civilians
- ✓Breath/Blood/Urine/
 Oral fluid



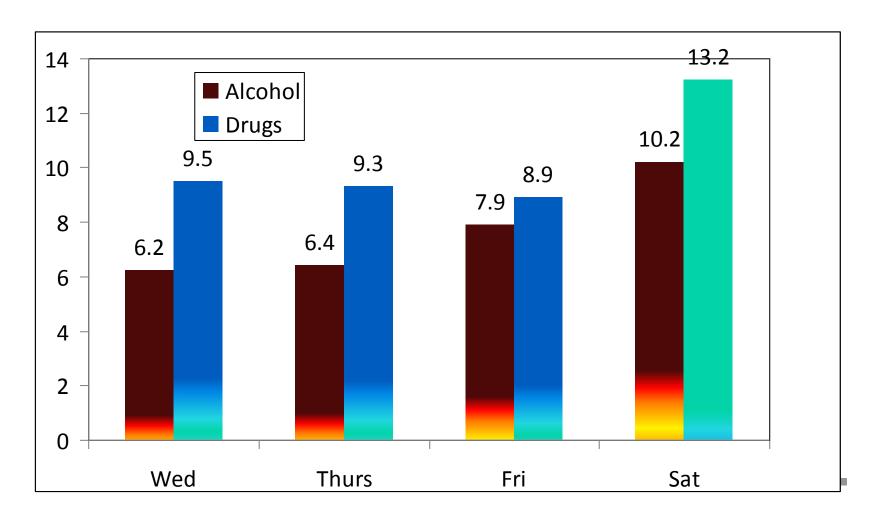
British Columbia Roadside Survey 2008

- 9 pm to 3 am
- Move every 90 min
- Wed thru Sat
- Voluntary
- Parking lot
- Breath and oral fluid
- BAC > 50 mg/dL given safe ride



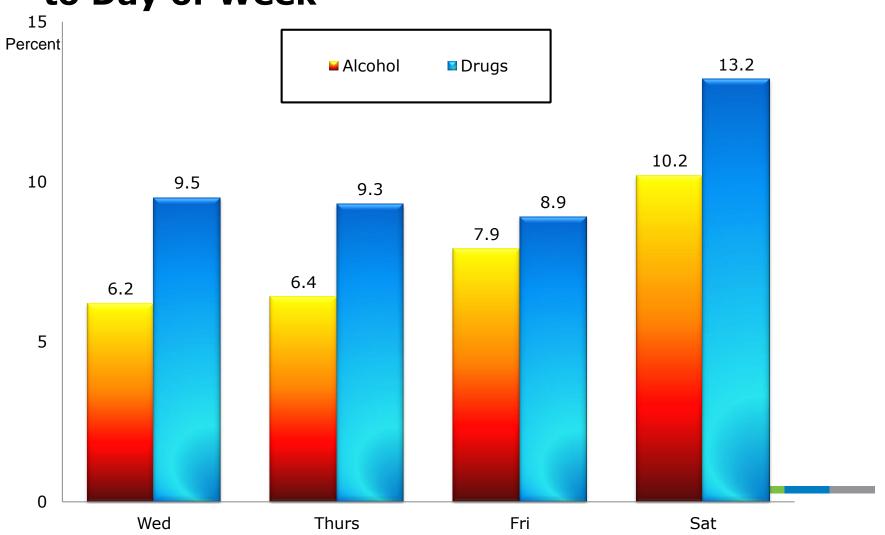


Percent Alcohol and Drug Positive Cases by Day of Week



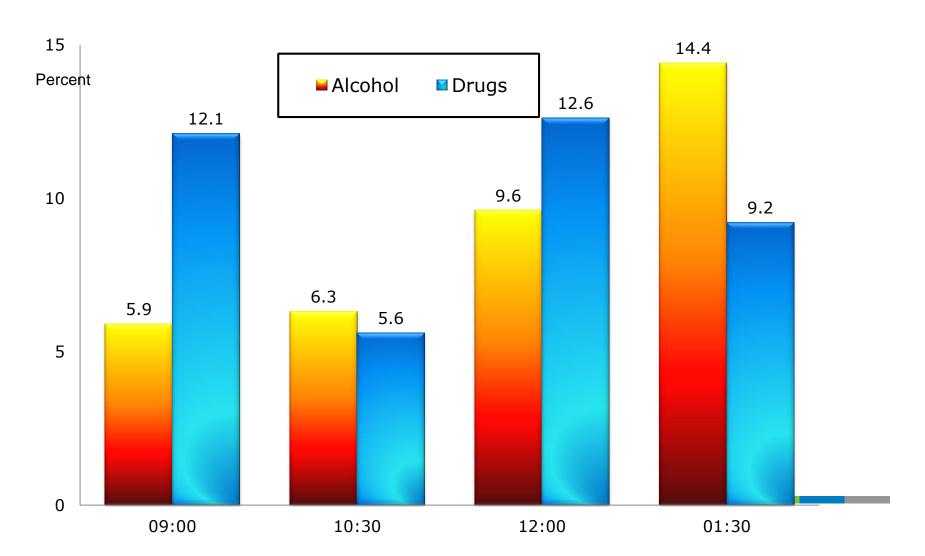


Alcohol and Drug Positive Cases According to Day of Week



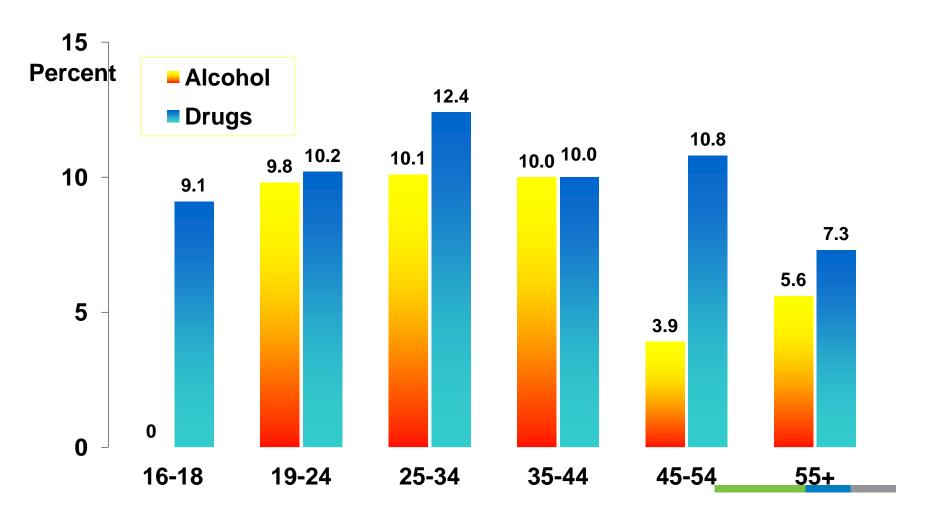


Percent Alcohol and Drug Positive Cases According to Time of Night





Percent Alcohol and Drug Positive Cases According to Driver Age Group





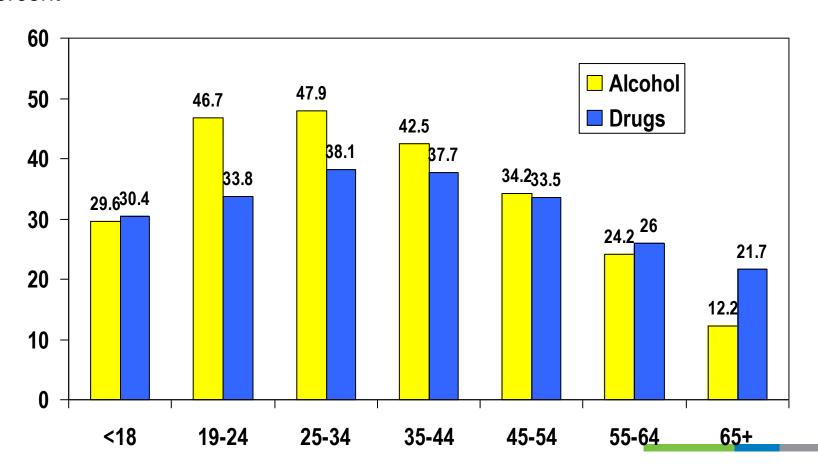
Drivers Involved in Crashes

- Numerous studies have examined drug use among driver involved in serious crashes
- Fatalities more likely to be tested
- Studies find a variety of substances



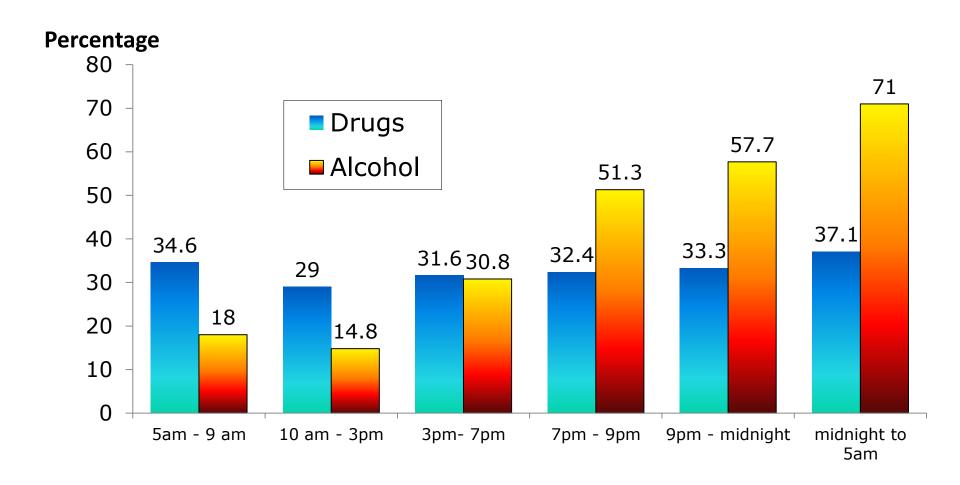
Drug Use Among Fatally Injured Drivers in Canada 2000 - 2007

Percent





Percentage of Drug and Alcohol Positive <u>Driver Fatalities</u> According to Time of Crash





Analytical Epidemiology

- To what extent do drugs increase the risk of road crashes?
- Three primary approaches:
 - Case-control studies
 - Responsibility analysis
 - Pharmacoepidemiological studies
- Many methodological issues



Analytical Epidemiology

- More recent, methodologically stronger studies show increased risk associated with psychoactive drug use
- Some studies show dose-related increase in risk for cannabis
- Magnitude of the risks are typically lower than those often associated with alcohol



Legislation

- Drink-driving legislation often used as a model for drug-driving laws
- Two basic categories:
 - Behaviour-based statutes
 - Per se laws
- Type of law determines enforcement practices and prevention messages



Behaviour-based Statutes

- Focus is on impaired driving behaviour as a result of drug use
- First used to control "drunk driving" or "driving while intoxicated"
- More recently, require objective measurement of impaired behaviour using standardized assessment protocols
- A bodily fluid sample often required to confirm presence of psychoactive substance



Per Se Laws

- First used to deal with drink-driving having a blood alcohol concentration (BAC) over specified limits was deemed an offence
- Legal "short cut" based on the established relationship between BAC and driver impairment and crash risk
- Scientific evidence establishing link between drug levels, impairment and crash risk are not well established
- Requires a separate limit for every substance



Zero Tolerance Laws

- Alternative is to set the per se limit at zero
- Any detectable amount of prohibited substance in a driver constitutes an offence
- Many countries have zero tolerance laws for illegal drugs
- Pharmaceuticals pose a difficult issue



Enforcement

- Type of legislation determines enforcement practices
- Two key components:
 - -Stopping the vehicle
 - Obtaining the evidence
- Legal criteria for stopping vehicles and obtaining evidence vary by country
- Some allow random stops and random tests; others require at least suspicion that an offence has occurred



Behaviour-based Enforcement

- Requires evidence of impaired behaviour
- Requires evidence that driver consumed substance capable of producing the observed behaviour
- Requires police officers to be trained to recognize the signs and symptoms associated with use of different types of drugs



Per Se Law Enforcement

- Some countries require officer to establish suspicion of drug use
- Others allow random testing without suspicions
- Enforcement requires officers be trained to collect a sample of bodily fluid for testing
- Victoria Australia has implemented random drug testing of drivers using oral fluid samples screened at roadside



Prevention

- Primary prevention efforts have been relatively superficial
- Complex issue many target groups, many substances, many circumstances
- A variety of carefully crafted approaches are required
- Opportunity to employ health professionals



Where do we go from here?

- Although many parallels with the drink-driving issue, there are many substantive differences that warrant a distinct and separate response
- The magnitude of the drug-driving problem is deserving of a societal response comparable to that afforded the drink-driving over the past 30 years



Where do we go from here?

- Encourage and facilitate research to enhance understanding of the problem
- Ensure research adheres to international guidelines to enhance validity and facilitate comparisons
- Develop and refine oral fluid test devices for use at roadside
- Establish evidence-informed policies and programmes
- Establish policies and programmes that address the risks posed by all types of impairing substances



Where do we go from here?

- Ensure that drug-driving legislation focuses on road safety and is not used to identify and prosecute drug users
- Establish training programmes for all enforcement personnel
- Engage health care professionals in prevention efforts



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Thank-you

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