



Drug-Impaired Driving: Marijuana and Opioids

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Drug-Impaired Driving

Marijuana and Opioids Raise Critical Issues for States



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What's in the Report

- ▶ **Data:** drugs and driving problem size, trends
- ▶ **Marijuana and opioids:** what they are, use by drivers, impairment, driver views, state laws
- ▶ **Enforcement:** SFST, ARIDE, DEC, oral fluid, breath, blood
- ▶ **Challenges and opportunities:** recommendations for states

LEGEND:

■ 2006 FARS Final File

■ 2015 FARS Annual Report

■ 2015 FARS Final File

■ 2016 FARS Annual Report

Source: NHTSA Fatality Analysis
Reporting Systems (FARS)

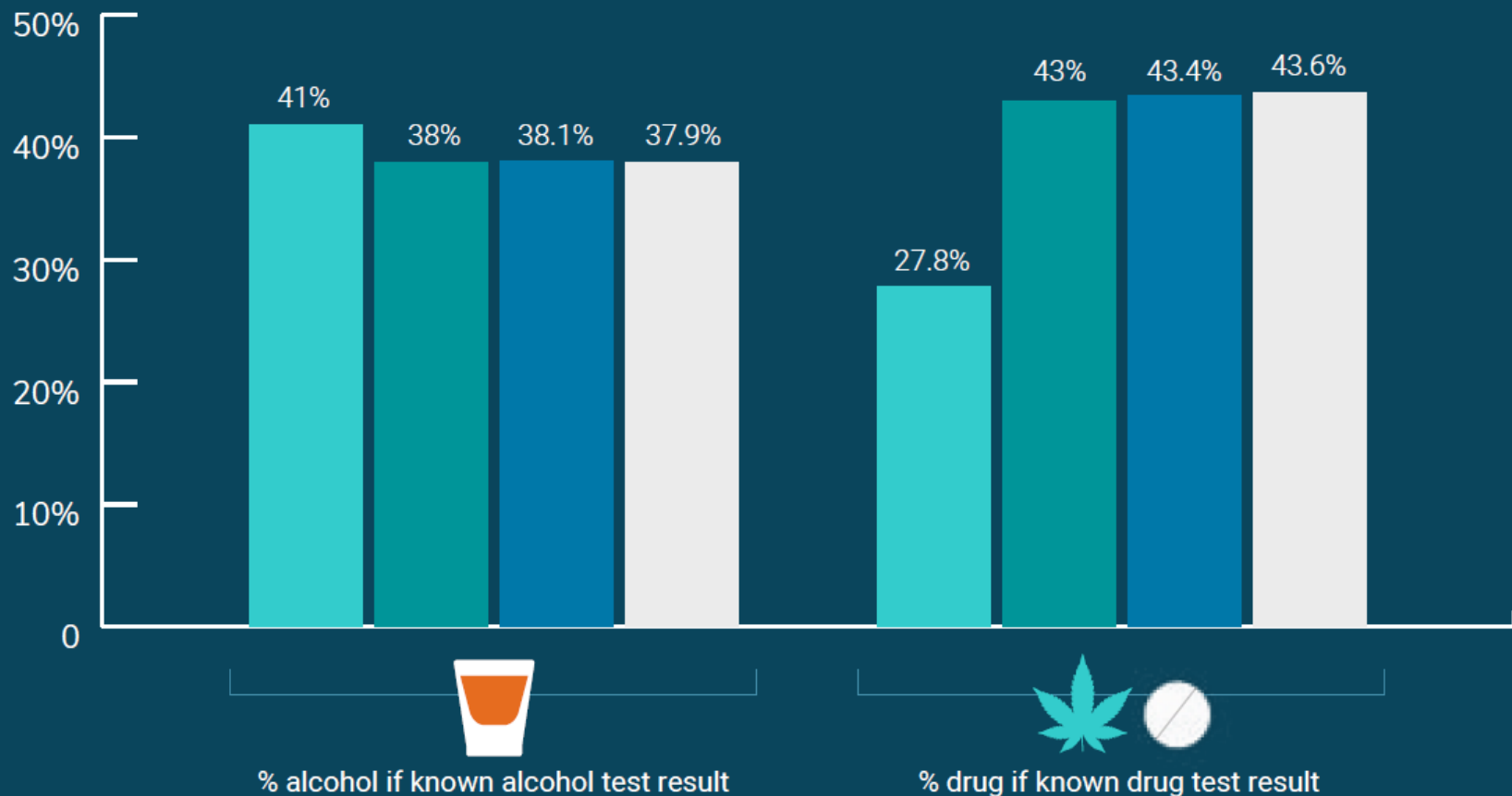
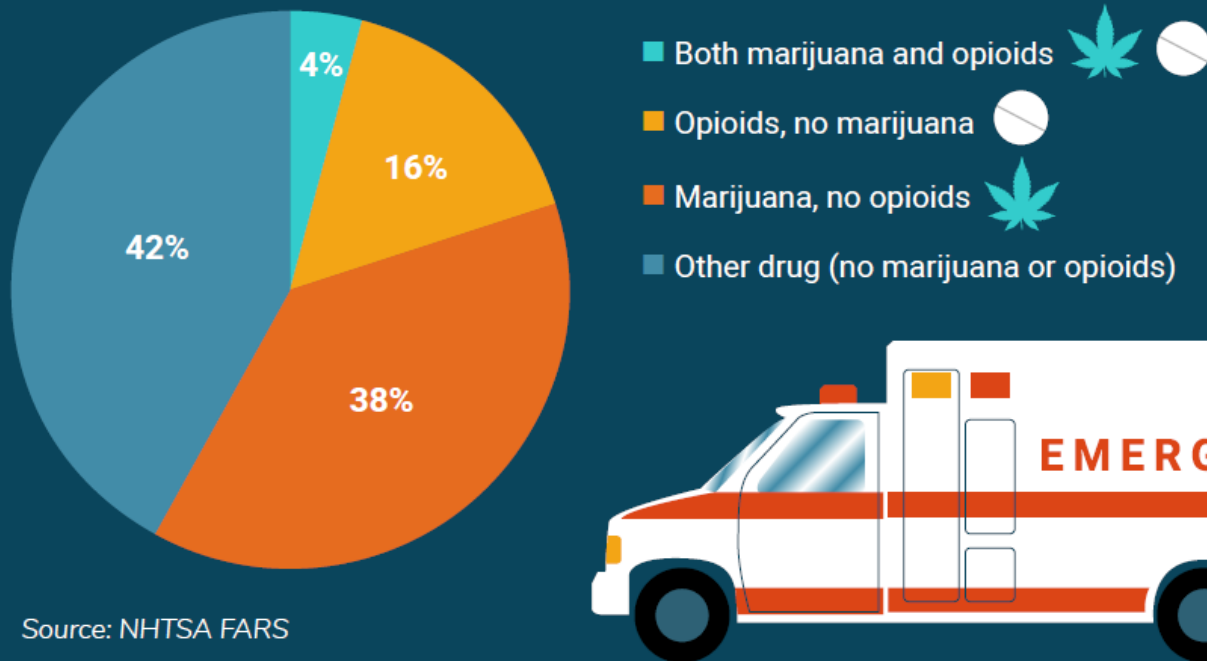
FIGURE 1**Drug and alcohol, percentage of fatally-injured drivers, known test results**

FIGURE 4

Marijuana and opioids in drug-positive fatally-injured drivers, FARS 2016



Source: NHTSA FARS

Conclusions

- ▶ **From 2015 to 2016:**
 - Drug presence in fatal drivers probably increased slightly
 - Alcohol presence about the same
- ▶ **From 2006 to 2016:**
 - Drug presence in fatal drivers increased substantially
 - Alcohol presence decreased somewhat
- ▶ **More fatal drivers drug-positive than alcohol-positive, 2015 and 2016**

Data limitations don't allow more precise conclusions

Marijuana

▶ **Impairment**

- In experiments: affects reaction time, coordination, vigilance, etc.
- Crash risk: probably increases by 25-35%
- Marijuana presence does not imply impairment

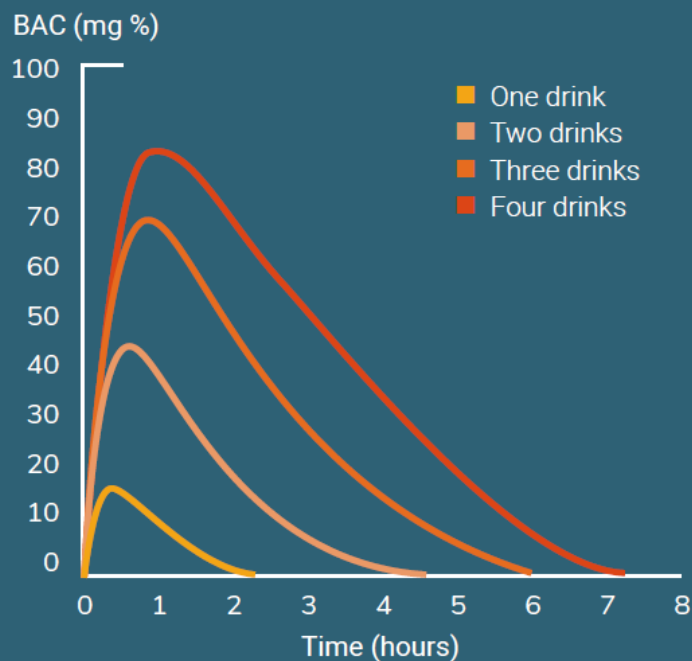
▶ **Driver views**

- Regular users do not believe marijuana impairs driving

Marijuana Differs from Alcohol

FIGURE 3A

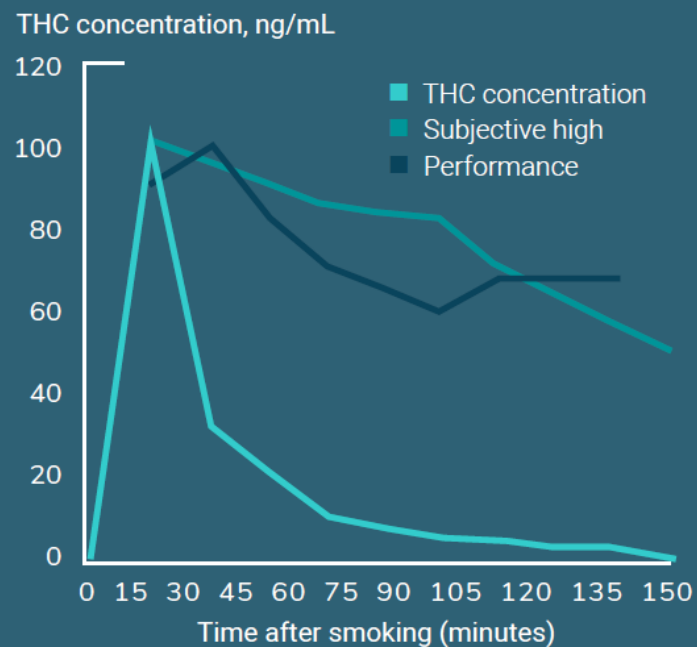
Blood Alcohol Concentration (BAC) Over Time After Drinking



Source: Adapted from NIAAA (1997)

FIGURE 3B

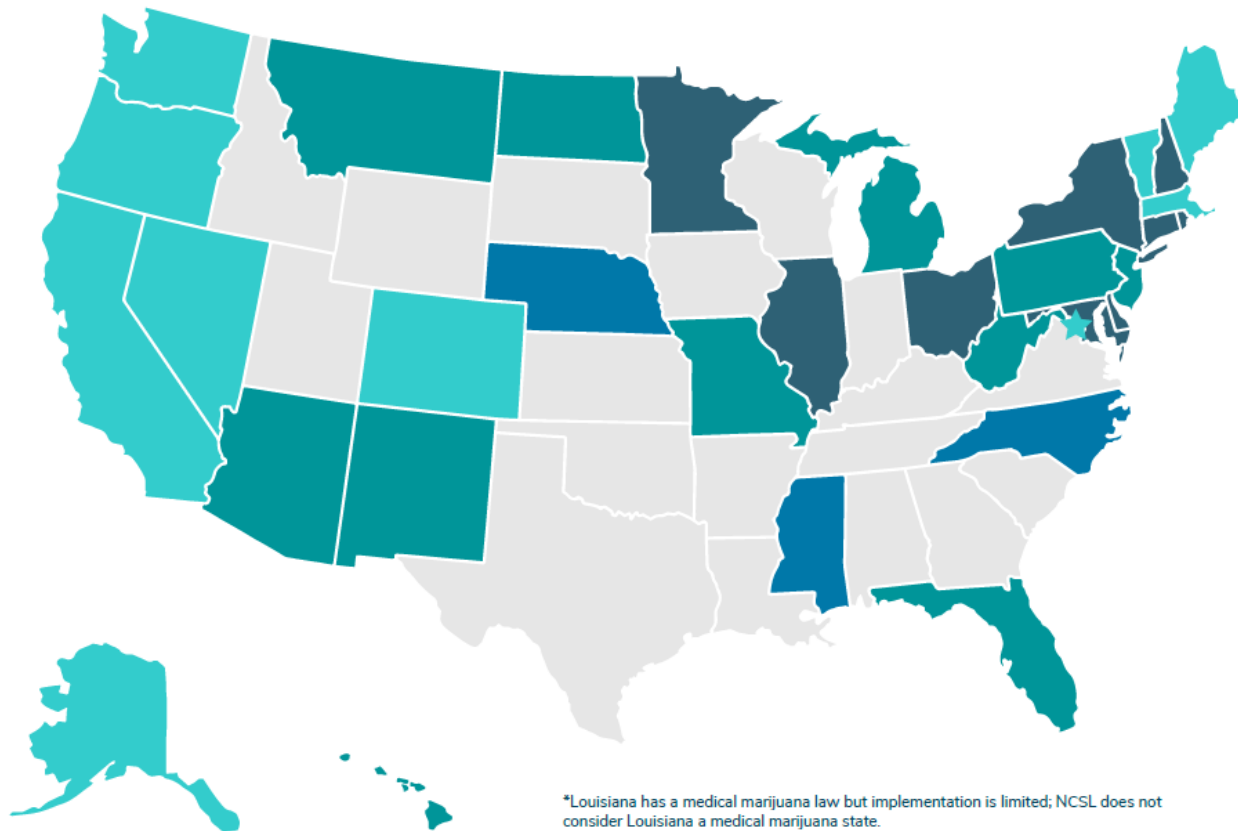
Marijuana (THC) Concentration, Subjective High, and Impairment Over Time After Smoking



Source: Adapted from Compton (2017), Figure 4.

FIGURE 5

State marijuana possession and use laws



Click to highlight states in applicable category

SHOW ALL	Legal Use	Medical Only	Decriminalized	Medical/Decrim.
	Legalized for adult use	Legalized for medical use only	Decriminalized	Legal for medical use / decriminalized

Source: Adapted from NCSL, 2018a.

[illegible]

[SHOW ALL](#)
[ZT THC / Metabs](#)
[ZT THC only](#)
[Per se THC](#)
[Permissible Inf.](#)

Permissible Inf.

Permissible Inference

10

Opioids

▶ **Impairment**

- In experiments: affect drowsiness, cognitive function
- Crash risk: probably increases by no more than 100%
- Opioid presence does not imply impairment

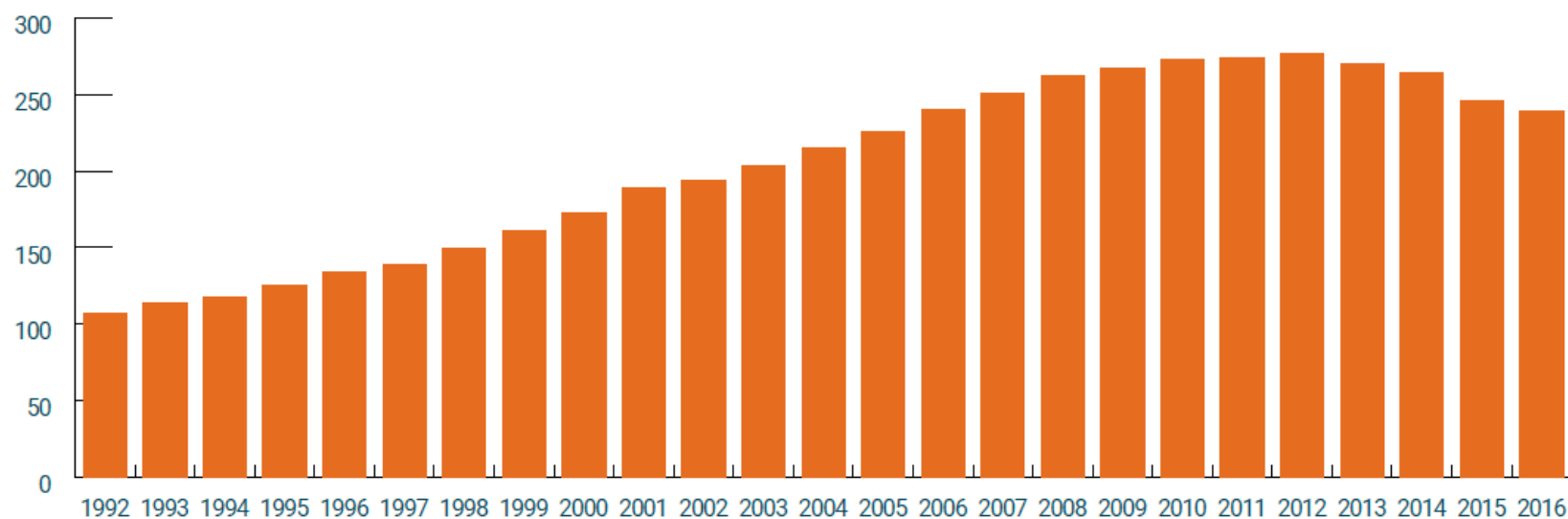
▶ **Driver views**

- Illegal use is dangerous

FIGURE 7

Opioid Prescriptions, 1992–2016

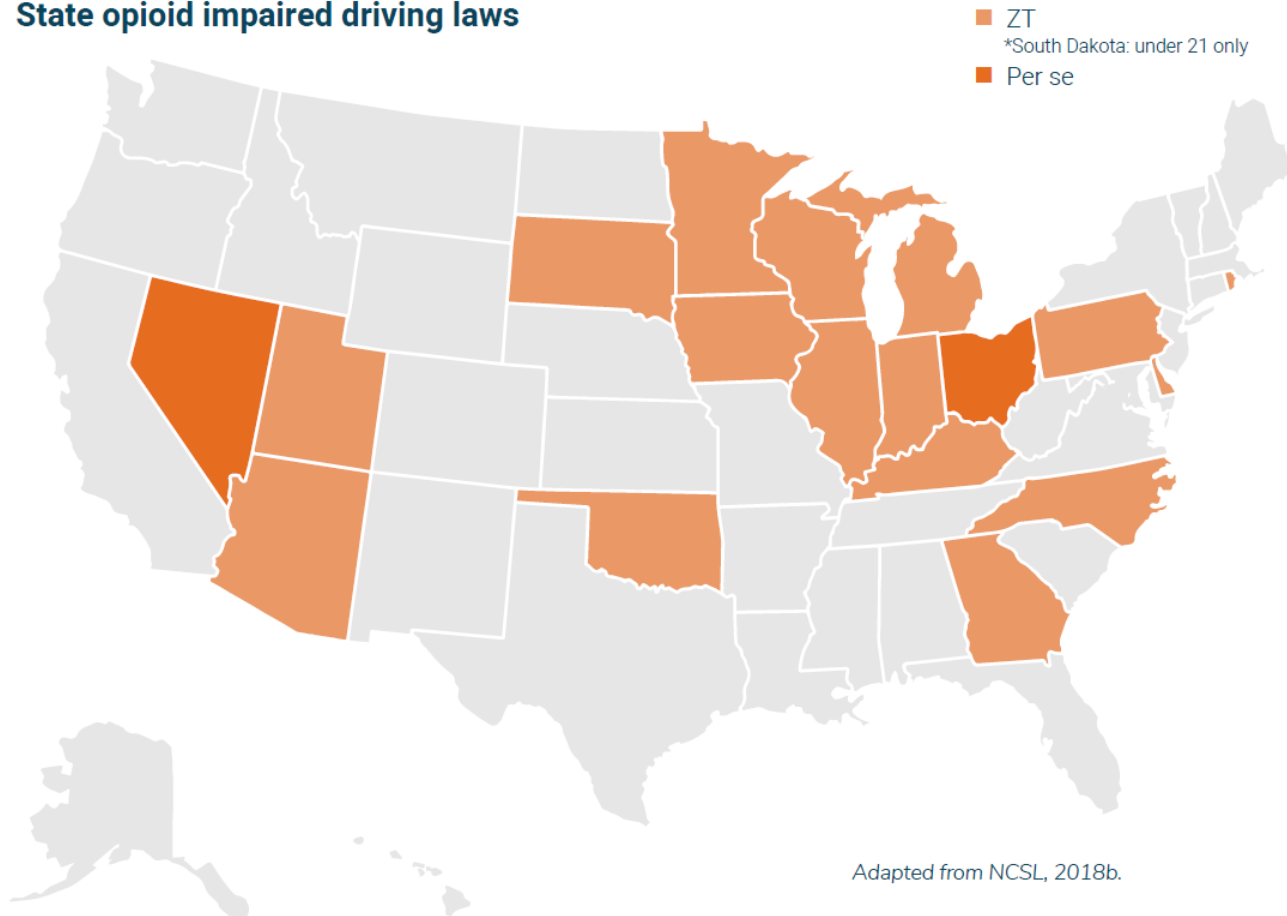
Opioid prescriptions, millions



Source: Pezalla, et. al. (2017)

FIGURE 8

State opioid impaired driving laws



At the Roadside: Detecting Drugs

▶ **SFSTs**

- Excellent for alcohol, reasonable for marijuana and opioids

▶ **ARIDE**

- Good initial screen for major drug categories
- About 8% of patrol officers nationwide are trained

▶ **Oral fluid**

- Several models now available
- Good initial screen; takes 5 minutes, costs about \$20 per test
- Pilot tests in several states

▶ **Marijuana breath test**

- At least 2 developers; perhaps pilot tests in 2018

▶ **Fingerprint**

- In development

At the Station: Confirming Drugs

▶ DEC

- Excellent but expensive: 3 or 4 weeks of training, 90 minutes for a test

▶ **Chemical evidence: blood or urine**

- Blood is preferred
- Search warrant required: e-warrants speed this up considerably
- Expensive and time-consuming: \$250-300, sometimes weeks or months

At the Courthouse: Prosecutors and Judges

- ▶ **Many not familiar with DUID (Driving Under Influence of Drugs)**
 - Not just like DUI Alcohol
 - Often won't pursue DUID if there's a clear DUI case

Challenges and Opportunities: Recommendations

▶ Education

- For the public: add drugs to impaired driving campaigns
- For physicians and pharmacists: prescription opioids in particular

FIGURE 12

Drug-impaired driving campaigns

Click to view states' driving campaigns



**For Medical use Only by Qualified Patients within
the State of Michigan - Not Redistribution | Compliance
with Michigan Health & Safety Code 33.26424
May cause drowsiness- Alcohol may intensify this effect
Do not drive or operate heavy machinery
Keep out of the reach of Children**

Challenges and Opportunities: Recommendations

▶ **Training**

- Law enforcement: ARIDE for a majority of patrol officers, DEC for enough
- Judges and prosecutors: do your best

▶ **Technology**

- Test oral fluid screeners
- Follow developments in marijuana breath test screeners

▶ **Testing**

- Use blood, not urine
- Test all fatally-injured drivers and all surviving drivers who may be at fault
- Acquire enough laboratory capacity for drug testing

Challenges and Opportunities: Recommendations

▶ **Procedures**

- Investigate DUID even in DUI cases
- Authorize e-warrants for drug tests
- Provide appropriate penalties for drug test refusal
- Establish a separate DUID offense

▶ **Data**

- Record DUID in arrest and crash reports and data files

Research Recommendations

- ▶ **Develop a consistent marijuana message**
 - “Don’t drive within XX hours of using marijuana”
- ▶ **Complete and publish NHTSA’s evaluation of oral fluid devices**
- ▶ **Agree on national standards for laboratory drug tests**

Final Thoughts

- ▶ **It's not drugs or alcohol, it's impaired driving**
- ▶ **Just add drugs to state impaired driving programs**
- ▶ **Same basic strategies, a few different techniques**
 - Education messages
 - Screening methods
 - Prosecution and adjudication requirements

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