



STRAIGHT TALK ABOUT THE DRUNK DRIVING PROBLEM
by Charles F. Livingston

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BEVERAGE **R**ETAILERS **A**GAINST **D**RIVING **D**RUNK

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INTRODUCTION

The seventh and eighth decades of the 20th Century will be recorded as the point at which society in the United States, after twenty years of inadequate attention, finally moved forcefully to eliminate the scourge of drunk driving.

Impetus for the action which is taking many forms--some well-advised and some ill-advised--came mostly from citizens spurred to action by highway fatalities related to drunk driving in which sons, daughters or other relatives were the victims.

Congress first reacted in 1966 when it passed the Highway Safety Act requiring the Secretary of Transportation to submit to Congress a comprehensive report on the role of alcohol in highway accidents.

Subsequently, in 1968 and again in 1978, the Department of Transportation completed an exhaustive review of the problem. In 1982 President Reagan appointed the President's Commission on Drunk Driving. This resulted in the establishment of the National Commission Against Drunk Driving in 1983.

Earlier, in 1970, the Office of Alcohol Countermeasures had been established in the U.S. Department of Transportation to oversee the implementation of the first comprehensive efforts to reduce alcohol-related crashes--the Alcohol Safety Action Program (ASAP).

At the citizen level, a series of activist groups--Remove Intoxicated Drivers (RID), Mothers Against Drunk Driving (MADD), Students Against Driving Drunk (SADD) and others--were organized between 1980 and 1982.

Responding to the concerns of citizens, a number of states enacted minimum drinking age laws. And, in 1984, Congress passed the Danforth-Lautenberg Bill (Public Law 98-363), which amended the Surface Transportation Assistance Act of 1982 and provided for a partial withholding of Highway Trust Fund grants to states which do not adopt 21 years as the minimum drinking age.

The wisdom of this approach was questioned by many in and out of Congress, by the 3 million-member United States Student Association, and by a number of major newspapers.

When Virginia bowed to Danforth-Lautenberg in February 1985, the Washington Post commented editorially: "If this approach (21 year minimum drinking standard) holds, maybe states

will try raising the drinking age to, say, 26 for even better results. Need we go on?"

The collateral problem, of course, is how to attack life-threatening misuse of the product without being co-opted by neo-prohibitionists who would take advantage of the national effort to solve misuse by creeping back to the failed experiment of the Volstead Act.

DOCUMENTATION

The August 1968 report to Congress by the Secretary of Transportation, submitted in compliance with the Highway Safety Act of 1966, officially documented the role of alcohol as a major contributing factor in highway fatalities, injuries and crashes, and highlighted two significant facts regarding the effect of alcohol on the highway crash problem:

1. Alcohol is involved in approximately 50 percent of highway fatalities.
2. Two-thirds of these fatalities involve alcoholics and other problem drinkers who can be identified and who comprise a small minority (less than 10 percent) of the driving population.

The findings of the 1968 report have been substantiated by subsequent research studies and a state-of-the-art review undertaken in 1978 for the U.S. Department of Transportation. (1)

Crucial to an objective determination of the relationship between alcohol and fatal crashes was the use of chemical tests to detect the concentration of alcohol in the blood. Through the use of chemical methods, objective criteria were established which permitted quantitative assessment of the role of alcohol in fatal crashes. The criterion of intoxication (to determine driving while intoxicated) recommended by the National Highway Traffic Safety Administration (NHTSA) as a national standard is one-tenth of one percent (0.10) of alcohol in the blood, because this level was determined to be the point at which all individuals' driving performance is impaired by alcohol. This criterion was based upon studies which indicate that, on the average, there is no increase in crash risk below a blood alcohol concentration (BAC) of 0.05 percent. Beyond this level, the risk curve rises much more rapidly until it becomes 20 to 50 times the normal level above a BAC of 0.15 percent.

Using this objective definition of impairment (0.10 percent), studies have been made on the relationship between alcohol

concentration and highway fatalities. (2) These studies indicate that:

1. Out of 50 drivers not involved in accidents, only one had been drinking excessively.
2. Six out of 50 drivers killed in crashes, but found not at fault, had been drinking excessively.
3. Twenty-five out of every 50 at fault drivers killed in crashes had been drinking excessively.

Clearly, intoxication plays a major role in the cause of fatal traffic crashes. The data above relate only to the drivers themselves. While most of these crashes are single vehicle crashes in which the intoxicated driver was killed, others involve multiple vehicle crashes in which a passenger, pedestrian, or another driver was also injured or killed.

Today, after nearly twenty years of activity to reduce drunk driving, the data remains much the same. As noted above, the 1968 Report to Congress concluded that two-thirds of the alcohol-related highway fatalities involved alcoholics and other problem drinker-drivers who represent a small minority (less than 10 percent) of the driving population.

The President's Commission on Drunk Driving in its final report in 1983 found the same thing. It stated:

"In single fatal crashes, for which fault can be more easily ascertained than in multiple vehicle crashes, upwards of 65 percent of those drivers who died were legally under the influence, i.e., their alcohol level was above 0.10. Furthermore, more than half of the drunk drivers who were involved in fatal crashes had blood alcohol concentrations (BACs) twice that of the legal limit. The average BAC of these drunk drivers was 0.20. These figures suggest that the majority of alcohol-related fatal crashes is caused by heavy (problem) drinkers. This is not to say that less heavy, less chronic, 'social' drinkers are not involved--they are--but it is the individual who regularly abuses alcohol who appears to be most often involved in alcohol-related fatal crashes."

The presence of a high BAC (0.15) indicates that the individual has consumed an excessive quantity of alcohol that suggests a drinking problem. A 180-pound man would have to drink 11 ounces of 86-proof whiskey within two hours to reach a BAC of 0.15 percent. Obviously, an individual who drinks to this excess is not the normal social drinker in the United States. Studies of BACs at cocktail parties indicate that the great majority of

individuals who attend these parties do not reach a blood alcohol concentration above 0.07 percent.

The hypothesis that individuals who reach very high BAC levels (above 0.15 percent) represent a deviant population is supported by examination of the records of convicted drunk drivers (most of whom are above these levels when arrested).

Evidence from an Oregon study of drinking drivers indicated that abnormal or problem drinker-drivers have other problems which tend to make them identifiable:

- 35 percent of those arrested for DWI (driving while intoxicated) charges had previous arrests on the same charge.
- 58 percent had either a previous DWI arrest or some other alcohol-related arrest.
- 35 percent or more had prior criminal records.
- Some had been in mental hospitals.
- Many received welfare assistance for themselves and their families or had other financial problems which could be related to excessive drinking.

This study concluded that an individual with a drinking/driving problem would probably have a number of social, legal, and financial problems as well. Statistics from a similar study in California were even higher:

- 80 percent of the individuals arrested for DWI had some previous contact with police or social agencies.
- 70 percent of those involved in fatal accidents or hit-and-run crashes had previous contacts with the law and social agencies.

The problem drinker-driver has been identified in a number of studies. He has been characterized as an individual who has a complex of other problems--legal, financial, social--as well as a drinking problem. What sets him apart from the usual social drinker is that his BAC indicates that his drinking is far beyond that associated with usual social drinking patterns.

On the basis of related studies and available data, the National Highway Traffic Safety Administration has stated that problem drinkers can be identified by any one of the following: (3)

- Diagnosis as an alcoholic by a competent medical or treatment facility; or
- Self admission of alcoholism or problem drinking; or
- Two or more of the following:
 1. A BAC of 0.15 percent or more at the time of arrest.
 2. A record of one or more prior alcohol-related arrests.
 3. A record of previous alcohol-related contacts with medical, social, or community agencies.
 4. Reports of marital, employment, or social problems related to alcohol.
 5. Diagnosis of problem drinking on the basis of approved structured written diagnostic interview instruments, e.g., Michigan Alcoholism Screening Test (MAST), Mortimer-Filkens Test, National Council on Alcoholism (NCA), and Johns Hopkins diagnostic tests.

These results continue to be reaffirmed by states as they classify their drunk driving arrestees according to their problem with alcohol--up to 70 percent are classified as problem drinkers or alcoholics.

PAST EFFORTS

These findings were the foundation of the Alcohol Countermeasures Program initiated by the U.S. Department of Transportation in 1970. That program included a general deterrence element--increased enforcement and related publicity--as well as programs designed to identify problem drinkers and refer them to prevention abuse programs. The Alcohol Countermeasures Program also recognized the importance of driver license suspension or revocation as a deterrent and the value of education programs to reduce the abusive use of alcohol. (4)

The efforts were aimed at getting the "drunk" from behind the wheel, or better yet, keeping the "drunk" from getting behind the wheel in the first place. The public education message which were received and understood by the American public were:

- "Get the Problem Drinker off the Road for His Sake and Yours"
- "Friends Don't Let Friends Drive Drunk"

The basis for these messages was that, for the most part, drunk drivers were killing themselves. Based upon some current public statements and pronouncements, one would conclude that those facts have changed. Such is not the case.

In 1983, according to data from the U.S. Department of Transportation's Fatal Accident Reporting System (FARS), 52 percent of the 23,500 alcohol-related fatalities were drunk drivers. Another 20 percent were passengers in the car with the drunk driver, and 11 percent were drunk pedestrians who were at fault by walking into the path of oncoming cars. In other words, 83 percent of alcohol-related fatalities in 1983 were either involved with the drunk driver, impaired or drunk themselves, or were intoxicated pedestrians. The vast majority of these individuals had BAC levels far in excess of the 0.10 BAC. Sixty percent of the dead drivers tested for blood alcohol were above 0.16 BAC. (5)

Data indicates that it is the heavy (problem) drinker who is involved in the largest proportion of alcohol-related crashes and arrests, and that this population is also the most likely to end up killing themselves. It is necessary to determine what approaches are most likely to have significant impact on the problem drinker without overly restricting the social drinker and, thus, diminish their support for drunk driving programs.

The Final Report of the President's Commission on Drunk Driving listed 39 recommendations in ten major areas:

- Public Awareness
- Public Education
- Private Sector
- Alcoholic Beverage Regulation
- System Support
- Enforcement
- Prosecution
- Adjudication
- Licensing Administration
- Education and Treatment

Many have said the recommendations in the report were too punitive in nature and did not really address the issue of the alcohol abuser who is at the crux of the drunk driving problem. Others have said the recommendations were not tough enough. Obviously, there was little empirical data on the effectiveness of most of the recommendations as they pertain to long-term implementation in this country. There could have been more attention paid to alternative transportation for those who overdrink. There could have also been more emphasis on the role that each citizen must play to reduce or prevent overconsumption by those who intend to drive. But, on the whole, the recommendations were reasonable and practical.

However, many groups have focused attention on one or two of the recommendations for political or philosophical reasons and have disregarded the word of caution contained in the Final Report of the President's Commission. It states:

"A word of caution. The Commission believes that, to achieve a lasting impact, no one element of this program can be enacted by itself; a coordinated, decade-long commitment to a multi-facted approach must be taken by every state and community. No one suggestion or recommendation and no single aspect of the system can produce the results the nation desires. The Commission realizes that the long-term impact which we all desire can be achieved only through a long process, culminating in the only guarantee of permanent change: Changes in individual attitude and behavior."

MISSING THE MARK

It is noteworthy that none of the recommendations by the President's Commission dealt with the availability of alcohol or its advertising or marketing practices. Yet these areas are receiving much attention by organized groups who obviously are disregarding the Commission's word of caution to further their own agenda. No one has shown that such restrictions have any impact on the heavy (problem) drinker who must be the focus of effective programs. The only recommendation that dealt with restricting drinking was on the 21-year-old drinking age, and it has created more controversy than any other. No one knows for sure what the long-term social impact of the 21-year-old drinking age law will be, and there is less certainty about its short-range impact on highway safety.

It would seem that there is a major effort underway to separate social drinkers from their cocktails, rather than to prevent intoxication or drunkenness and to separate the intoxicated or drunken person from his or her car. Even the media, possibly inadvertently, are taking the former approach by running public service ads that state "Don't Drink and Drive." What does that mean to the American public? Does it mean you can't go to dinner and have a cocktail or two? Does it mean you can't have a couple of beers in the afternoon with friends?

The message "Don't Drink and Drive" was proven ineffective in the 1960's.⁽⁶⁾ Are we in danger of making everyone feel guilty about their social behavior? Will we turn them off regarding positive solutions which they must seek to discourage drunkenness?

A "Working Paper" of the Education and Prevention Committee of the President's Commission on Drunk Driving examined this issue and concluded:

"No one is in favor of drunk driving. And yet programs to reduce the incidence of drunk driving have come and gone while the problem itself remains. Leaders of grassroots movements against drunk driving say that the general public has become angry enough about the issue to tell its public servants, 'Do something!' This outcry has resulted in the formation of a President's Commission. But if the Commission is to be more successful than other previous attempts to counter drunk driving, Commission members must ask themselves why the public has not become more heavily involved before now in this issue.

Perhaps a part of the answer is that the general public has yet to be mobilized as a constituency against drunk driving. In many ways, in fact, past attempts to enlist the general public have unwittingly closed them out of the solution process. The average person is aware of the drunk driving problem: national surveys from 1973 consistently have shown that more than 80 percent of the American public believes that drunk driving is a serious problem in the U.S. and knows that it is against the law. However, the average person is hesitant to do anything about the problem in his or her own social circles for any of the following reasons:

(1) Guilt and Confusion About the Issue

Most Americans who both drink and drive occasionally drive after drinking. Most people, however, do not sharply perceive the difference between 'driving after social drinking' and 'driving after excessive drinking.' Hence, they may feel resistant for one of the following reasons:

- (a) They are afraid that increased law enforcement efforts will 'catch' them driving after social drinking.
- (b) They believe that they will have to change their patterns of socializing in order to avoid driving after social drinking.
- (c) They are afraid that if they were to stop an intoxicated friend or acquaintance from driving, they will open up their own behavior to embarrassing scrutiny.

- (d) They feel guilty when they hear about drunk driving tragedies, believing that because they have driven after social drinking, they could have been the cause of such an accident. ('There, but for the grace of God, go I.')
- (e) They unconsciously understate the likelihood that an intoxicated friend will cause a problem when he or she drives while intoxicated, because they themselves have driven after social drinking without difficulty, and hence do not intervene.
- (f) They fear aggressive, angry, and embarrassing reactions from friends whose ability to drive they question.
- (g) They do not sufficiently understand alcohol's pharmacological action and do not realize that the problem drinker's drinking behavior is out of control; hence, they fear that they are interfering in another person's free choice if they act on behalf of a friend or acquaintance.

(2) Reliance on Law Enforcement Programs

Attention to the legal and technological aspects of deterrence alone can sometimes lead people to believe that breathalyzers, mandatory sentencing, etc., will by themselves solve the problem.

(3) Reliance on 'Others' to 'Do Something'

Unless they have a deeply personal interest in the issue, most people are happy to accept the belief that the courts or the politicians will succeed in solving a problem that, while it concerns them, doesn't seem important to them in the press of daily life.

A successful program to bring about long-term prevention of drunk driving must employ a series of positive efforts intended specifically to counter those forces which stand between the average citizen and his or her sense of personal responsibility for the problem's solution."

Unfortunately, educational messages today are of a fear nature or misleading. Most people believe the majority of alcohol-related fatal crashes involve innocent victims. One innocent victim is one too many, but it is the drunk driver and his passengers and drunk pedestrians that constitute 83 percent of our annual alcohol-related fatalities.

HITTING THE MARK

There is a need to implement and sustain programs to reduce the DWI problem, but attention should be focused on those programs which will work and will be supported by the overall public. Support should be withdrawn from programs that are misdirected.

The need is for a public education program that truly tells the public the causes of most drunk driving crashes--problem drinking and alcoholism. Programs should inform the public of actions they can take to reduce drunkenness and make it socially unacceptable. Businesses, including those involved in the manufacture and sale of alcoholic beverages, should initiate and support educational programs that continuously emphasize moderation and depict overindulgence as sick, irresponsible behavior. Such an educational program should be developed and coordinated by an organization that is truly concerned about changing human behavior to make drunkenness and drunken driving socially unacceptable. (7)

Next, there must be programs to deter drunken driving. Specifically, we need police patrols and we need penalty programs that are effective. Even today, in most jurisdictions, the probability of arrest is very low; 1 in 300 to 1 in 2,000. This indicates a need to sustain police patrols over the long-term. Unfortunately that has not been the case in this country as priorities shift and demands upon existing police resources redirect their efforts. (8)

To maintain sustained efforts, police agencies need financial resources that are continuous. One method of assuring this is the adoption of a plan like the New York State STOP/DWI Program. This legislation mandates minimum fines of \$250-\$350 for each DWI conviction and those funds are returned to the counties where the arrests are made--if the county has a comprehensive plan. Last year \$13 million was returned to the counties to pay for increased enforcement, public education, prosecution, treatment, etc. Unless such funding mechanisms are implemented in every state, long-term continuous programs will be the exception; start and stop efforts will be the rule.

Next, we need consistently applied penalties that are effective. We need penalties that fit the crime. Fortunately, 80-85 percent of drunk driving arrests are victimless crimes, that is, there is no crash involved and there are no injuries. Also, 80-85 percent of drunk driving arrests involve first-time arrestees for drunk driving. As a result of these facts, the judicial system has resisted mandated jail sentences but has been responsive to mandated license suspension or revocation for reasonable periods--up to six months.

Automatic administrative license suspension for at least 90 days for a first offense appears to be effective as a deterrent to drunk driving; and, when frequently imposed and highly publicized, provides an effective complement to efforts to increase the perceived risk of arrest.

Currently, 23 states have laws which provide for administrative license suspension. All of the laws are not the same--some are much more effective than others. These laws are referred to as Administrative Per Se License Suspension. Basically, these laws provide that upon the arrest and testing of an individual above the illegal level or upon an individual refusing to take a blood alcohol test, the police officer acts as an agent for the Motor Vehicle Bureau, physically taking the license of the arrestee. Those states that have a good Administrative Per Se Suspension Law have recorded rewarding results and are convinced that it is a significant and workable deterrent to drunk driving. (9)

Finally, there is need for programs to educate or rehabilitate arrested drunk drivers and procedures in the court system to properly classify the individuals as to whether they are social or problem drinkers. After that determination, there should be adequate facilities to which to refer these individuals. Merely allowing an individual with a problem with alcohol to return to normal activities without treatment is setting the scene for another more tragic occurrence.

However, treatment and education programs should never be resorted to in lieu of minimum fines and license suspensions. (10) Also whenever feasible, the arrestee should pay for his treatment and be under the probationary authority of the court while sentenced to such programs.

CONCLUSION

The ultimate goal of a successful program to reduce alcohol-related highway crashes is to make drunk driving and intoxication itself socially unacceptable. The President's Commission on Drunk Driving wisely pointed out that:

"Over the long-term, the need to retain the social approval of one's peers may be a more powerful incentive to avoid intoxication and drunk driving than fear of arrest or involvement in a crash." (11)

This is the condition that must be created within our communities and in our social circles if we truly are to reduce drunk driving over the long-term. We must be factual with our information, and we must introduce meaningful, continuous educational efforts to achieve this goal.

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