

Enhancing Drugged Driving Data: State-Level Recommendations

INTRODUCTION

Many drugs, beyond alcohol, impair driving. Recent studies show drugged driving is a growing problem in the United States. The issue is complex, and our understanding of how drugs correlate to crashes, injuries and fatalities remains limited due to data constraints. More data on the prevalence of drugged driving, at both the state and national levels, is needed to understand the extent of the drugged driving problem and how it is changing over time so health and safety officials can communicate the risks to the general public. This information will also help measure the effectiveness of efforts to reduce drugged driving.

During Phase I of this work in 2016, the AAA Foundation for Traffic Safety disseminated a report, called “Advancing Drugged Driving Data at the State Level: Synthesis of Barriers and Expert Panel Recommendations,” which included a series of expert panel recommendations aimed at improving data and records concerning drugged driving. In 2018, the Foundation published the Phase II report, “Advancing Drugged Driving: Data at the State Level: State-by-State Assessment,” documenting state policies and practices and their alignment with the recommendations aimed at improving drugged driving data.

This study — Phase III — advances this work by identifying the state barriers to implementing these recommendations and proposes solutions to change current laws and policies. Phase III highlights seven of the 12 Phase I expert panel state-level recommendations. Of the seven recommendations, three were designated as high priority by the expert panel from Phase I, three were categorized as medium priority, and one low-priority. These seven recommendations were selected with the following goals in mind:

- Encourage more drug testing on suspected drugged drivers and encourage more reporting of the drug test results to a central state database(s).
- Give stakeholders a reason to improve state data on drugged driving.
- Use information that could be best derived from state-level contacts.

This Phase III report focuses on these seven recommendations, providing a state-by-state analysis identifying the specific legislative, regulatory and/or resource changes required for states to align with the recommended policies and practices. It can be used as a reference tool to assess state-level drugged driving data needs and potential steps to improve information gathering. It can also illustrate experiences described in various states. The report features individual state charts and summarizes findings from the 45 jurisdictions (44 states and the District of Columbia) that participated in this project.

ABOUT

Established in 1947 by AAA, the AAA Foundation for Traffic Safety is a nonprofit, publicly funded, 501(c)(3) charitable research and educational organization. The AAA Foundation’s mission is to prevent traffic deaths and injuries by conducting research into their causes and by educating the public about strategies to prevent crashes and reduce injuries when they do occur. This research is used to develop educational materials for drivers, pedestrians, bicyclists and other road users.

SUGGESTED CITATION

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KEY FINDINGS

The Overall Summary-Major Trends section of this report summarizes the alignment with the seven recommendations across the responding states. Recommendations where the most states aligned were:

- Implied consent laws should: (a) extend to drugs and support the collection of blood and/or oral fluid for drug testing; (b) include the collection of a specimen or specimens for multiple tests; and (c) should not permit suspects to choose the type of test(s).
- Authorize and encourage law enforcement officers (LEOs) to collect and test specimens for drugs on all DUI/DUID arrestees (with probable cause and a warrant for a blood test).
- Authorize and encourage drug testing for all surviving drivers in fatal and serious injury crashes when there is probable cause that impairment was a factor.¹
- At a minimum, the administrative penalty (license suspension) for a refusal to provide a specimen for drug testing should be at least as severe as for a first DUI/DUID offense.

Recommendations where the least number of states aligned were:

- Enact laws and/or implement policies mandating drug testing and reporting of the test results for all fatally injured drivers.
- Update data collection and reporting systems to distinguish among impaired driving offenses (DUI, DUID, and both) in all relevant data (particularly citation data).
- Electronic warrants should be used to reduce delays in collecting specimens when a warrant is necessary.

As might be expected, the most frequent barriers to alignment across recommendations include: lack of funding; needed changes to laws and policies; training and/or protocol needs; no mandate to test for drugs and/or report the results; and lack of stakeholder buy-in. Additionally, an overarching barrier relates to law enforcement agencies being discouraged to drug test once a BAC of .08 is established.

METHODOLOGY

Researchers reviewed state statutes and surveyed state-based contacts to:

- Determine whether and how each state complies with seven recommendations related to drugged driving data.
- Determine the specific changes (e.g., legislative, regulatory, resource, etc.) needed in state policies and practices to attain compliance with recommendations.

See report for more information.

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¹ However, only nine states were aligned or partially aligned with the recommendation to report the drug test results for all surviving drivers in fatal and serious injury crashes when there is probable cause that impairment was a factor.