

Victoria's Alcohol and Other Drugs Legislation



WELCOME T2010

YOUNG SCIENTISTS

Networks – links Opportunities

(Philip Swann

*** VicRoads Manager Alcohol – Drugs – Fatigue**

*** Brain Science Unit - Adjunct Professor Swinburne University**

*** Department of Medicine Melbourne -Associate Fellow**

Email: swannp@bigpond.com)

AOD – Alcohol and Other Drugs

- Is Drug Driving a Road Safety problem?
(Deaths? Injuries? Minor accidents?)
- Does Alcohol and other Drug Legislation Work?

Huge range of Solutions in Road Safety

Road environment solutions

Driver behaviour solutions

Vehicle technology solutions

System solutions

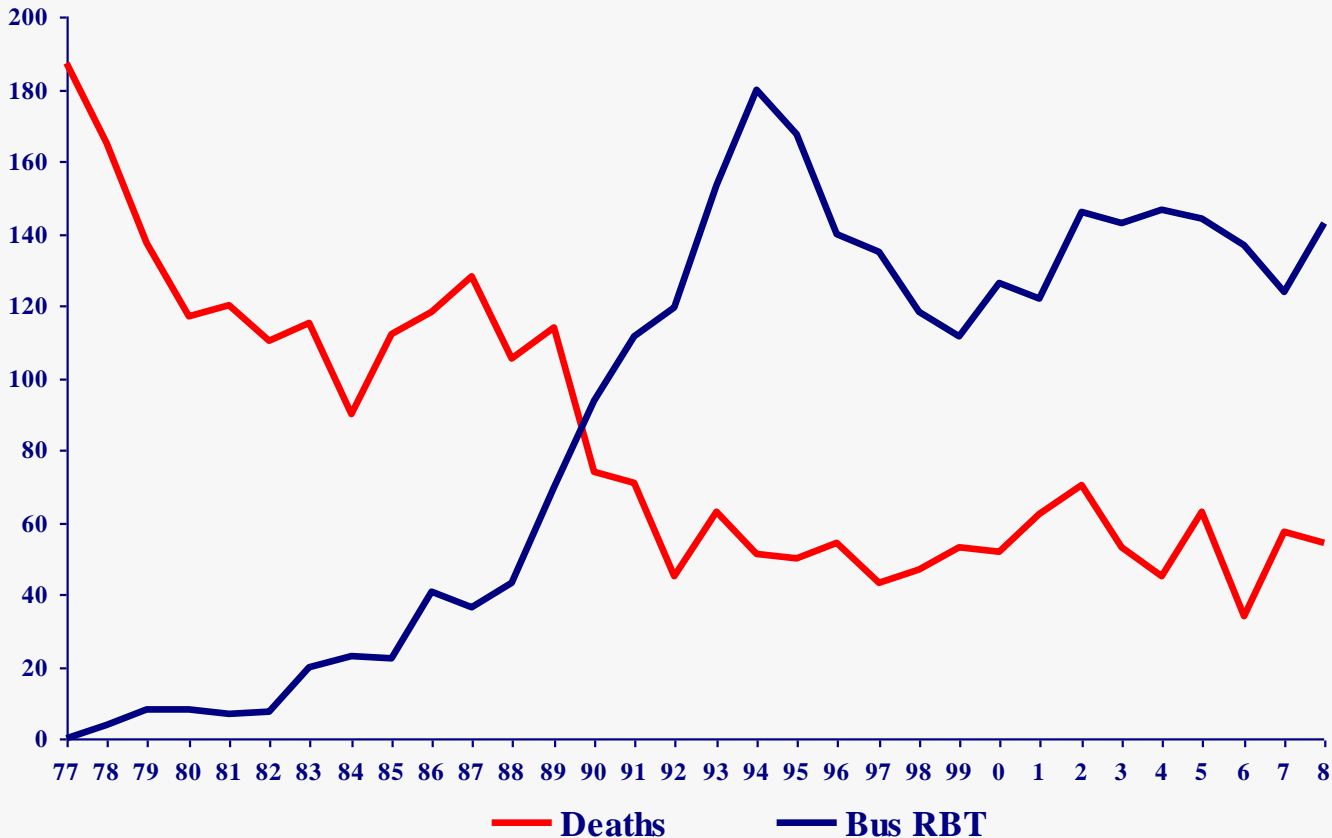
Which can be divided into prevention, collision and rehabilitation/treatment sections

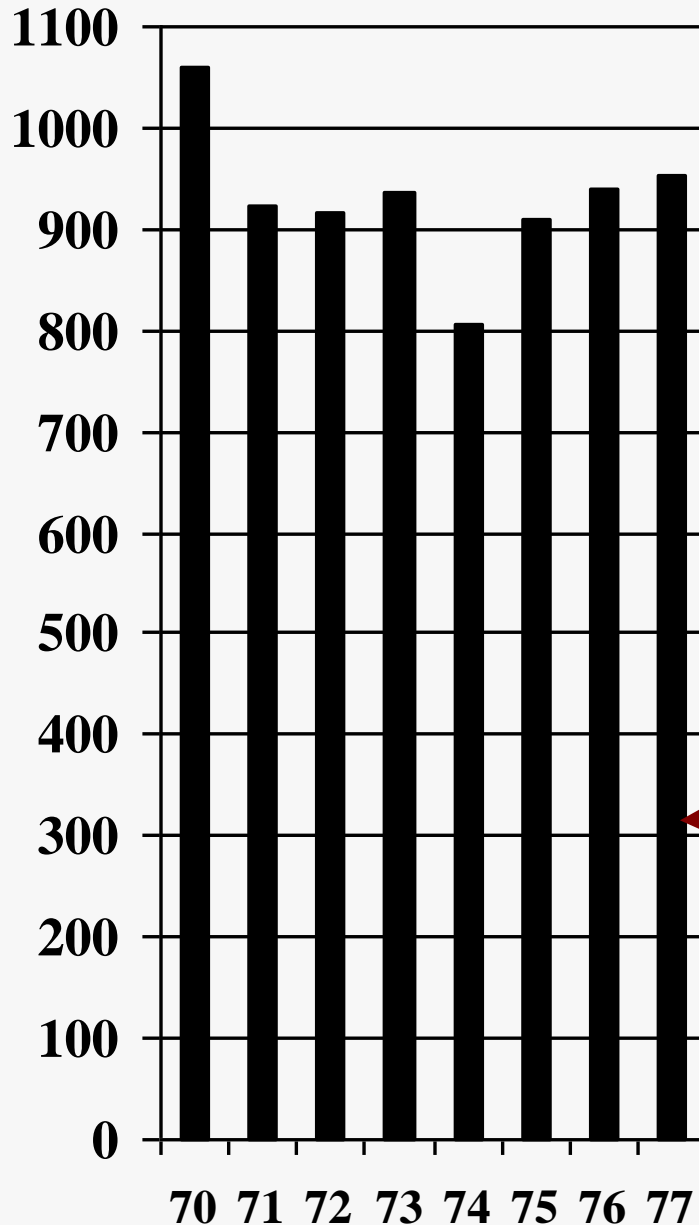
But

What works? In Australia the appropriate solutions should be **Cost Beneficial** (including \$ economic costs social/political/cultural costs and environmental costs and benefits) and within **current public policy**

Drivers killed testing positive to Alcohol 0.05BAC+ 1977 - 2008

Road Deaths Over .05 v. RBT Bus Activity - 1977 to 2008





1977 Road Toll = 940
Police RBT tests = 19,006

2008 Road Toll = 304
RBT Tests = 3.5million

Legislation Needs Appropriate Levels of Enforcement

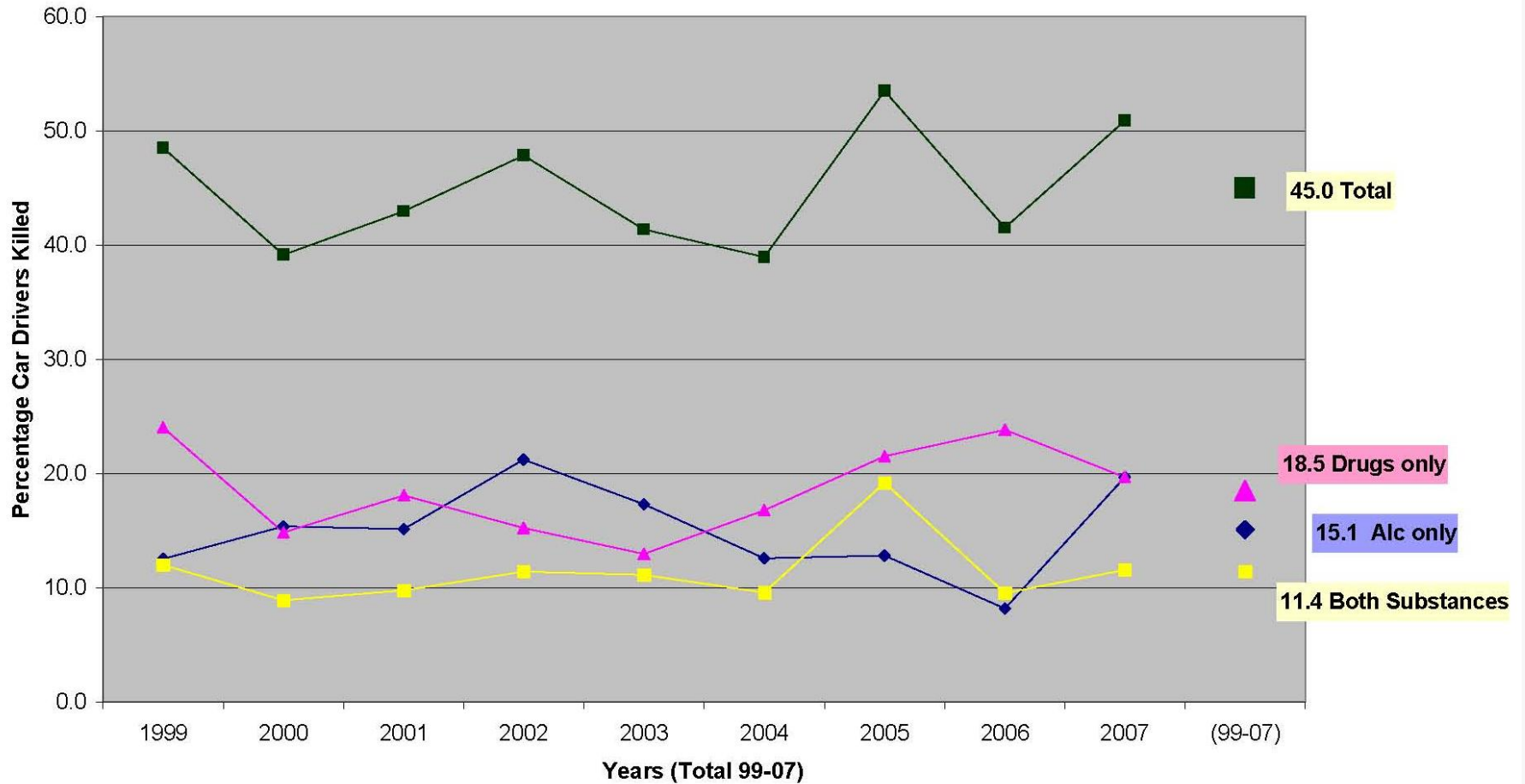
AOD Driving Victoria - Is it a Road Safety problem?

In Victoria last decade approx

**26.5% of drivers killed test positive to alcohol
and**

29.9% of drivers killed test positive to drugs

AOD Victoria - Intervention Target Groups



—◆— Alcohol =;>0.05 only —▲— Drugs only —■— Both Substances —■— Total

What Interventions work ?

**Type of Intervention depends on
motivation for drug use**

ie: Recreational – Medicinal – addictive/dependent – Occupational

Socially irresponsible – Sanctions (fines penalties etc)

Dependent users – Rehabilitation and Treatment

Victorian Drug legislation – Road Safety Act Offences (not Crimes Act offences)

Drug legislation should

1. Be able to be enforced

2. Be fully resourced

Police resources (equipment, time etc)

Court System

Public information supporting the legislation (TV radio mass media)

3. Reduce the crashes caused by drug drivers

need both prevalence and culpability measures

In the area of Alcohol and other drugs history shows that legislative initiatives fall into two general categories –

1. behaviour based that is impairment laws

– traditional DUI offences that is Driving under the influence of drugs which is the act of operating a motor vehicle after having consumed drugs , to the degree that mental and motor skills are impaired (incapable of having proper control of vehicle)

2. “per se” or average risk based laws

- which specify that drivers are considered to be impaired if the concentration of a specific drug in their blood is found to be above a certain level.

Victorian Drug legislation

All such legislative sanctions can be considered in terms of

- a) Punishment** - of the individual driver. to discourage the driver from future similar acts
- b) Deterrence** – of both the driver who experiences the punishment and other drivers who do not wish to be punished.
- c) Rehabilitation** - sanctions can initiate an opportunity for addressing the underlying reasons why the person is committing the offence
- d) Incapacitation** - by restricting or completely removing the person's capacity to drive.
- e) Effectiveness** – reduction in crashes both absolute numbers and exposure rates

In each of the 5 key areas in the previous slide, clear strategies and objective measures are needed - for example with “Deterrence”

Strategies can involve

- a) Incident Testing – crash involved drivers
- b) Target group testing – young drivers / heavy vehicle drivers
- c) Random Testing – 24/7 or selected alcohol/drug times

Victorian Drug legislation

Victoria

1. 1949 - **one type of traditional Behavioural impairment legislation**
2. 2000 – **one Hybrid mixture of Behavioural impairment/”per se” risk based drug legislation**
 - general definition of a drug and approx 250 impairment drugs listed for certificate offence and offence for refusal of test
3. **2003 - one type of “per se” risk based drug legislation**
 - 3 illicit drugs and refusal offence

Victorian Drug legislation

Victoria has had

1. 1949 - one type of traditional Behavioural impairment legislation in drugs and

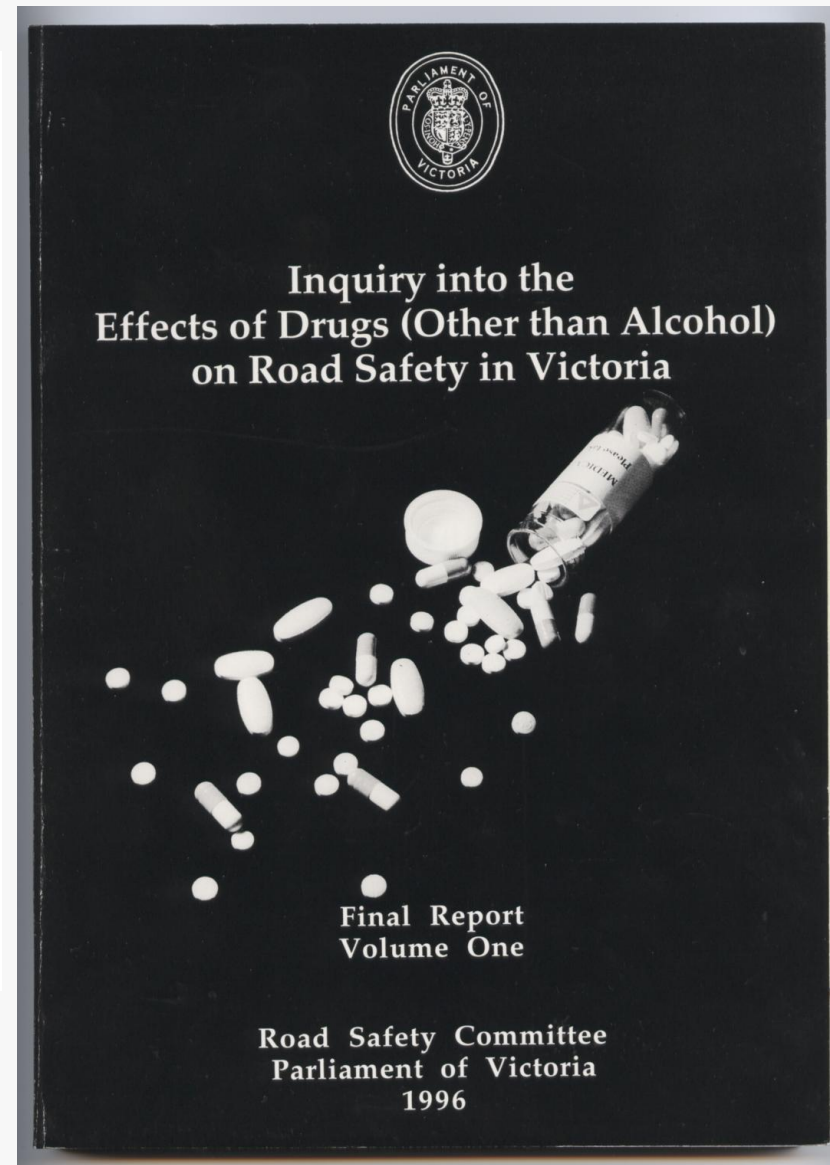
“Driving under the influence of drugs” which is the act of operating a motor vehicle after having consumed drugs , to the degree that mental and motor skills are impaired

1996 Parliamentary Inquiry found **legislation did not work.**

1996

“The Committee has rejected the restrictive and proscriptive guidelines of the concept of “driving under the influence of drugs” in the current Road Safety Act in favour of “driving whilst impaired”

The Committee recommends that the Act be changed



Ref - Parliament of Victoria Final Report Road Safety Committee “Effects of Drugs (Other than Alcohol) on Road Safety in Victoria” No 28 Session 1996

1949 - DUI drugs Not Workable because

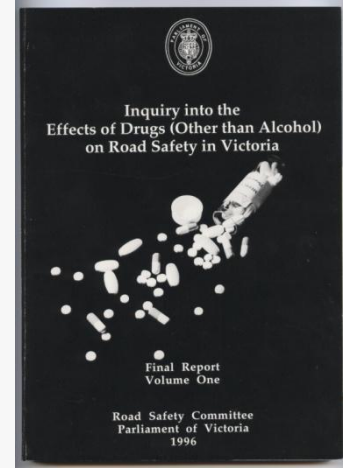
Police had to prove

a) that a drug was present.

(key issue - the police did not have the legislative authority to require a body sample for Drug analysis)

b) impairment by the drug existed and the level of impairment prevents proper control of the motor vehicle

(key issue – science could not establish “safe” or “unsafe” levels for drugs other than alcohol)



1. **New law of “driving while impaired by a Drug”**
With Impairment testing by Police to decide on whether to take blood
2. and if positive drug result, then
3. the positive drug’s impairment characteristics are to be consistent with the actual observed impairment

**First Step is
Alcohol Breath Test**



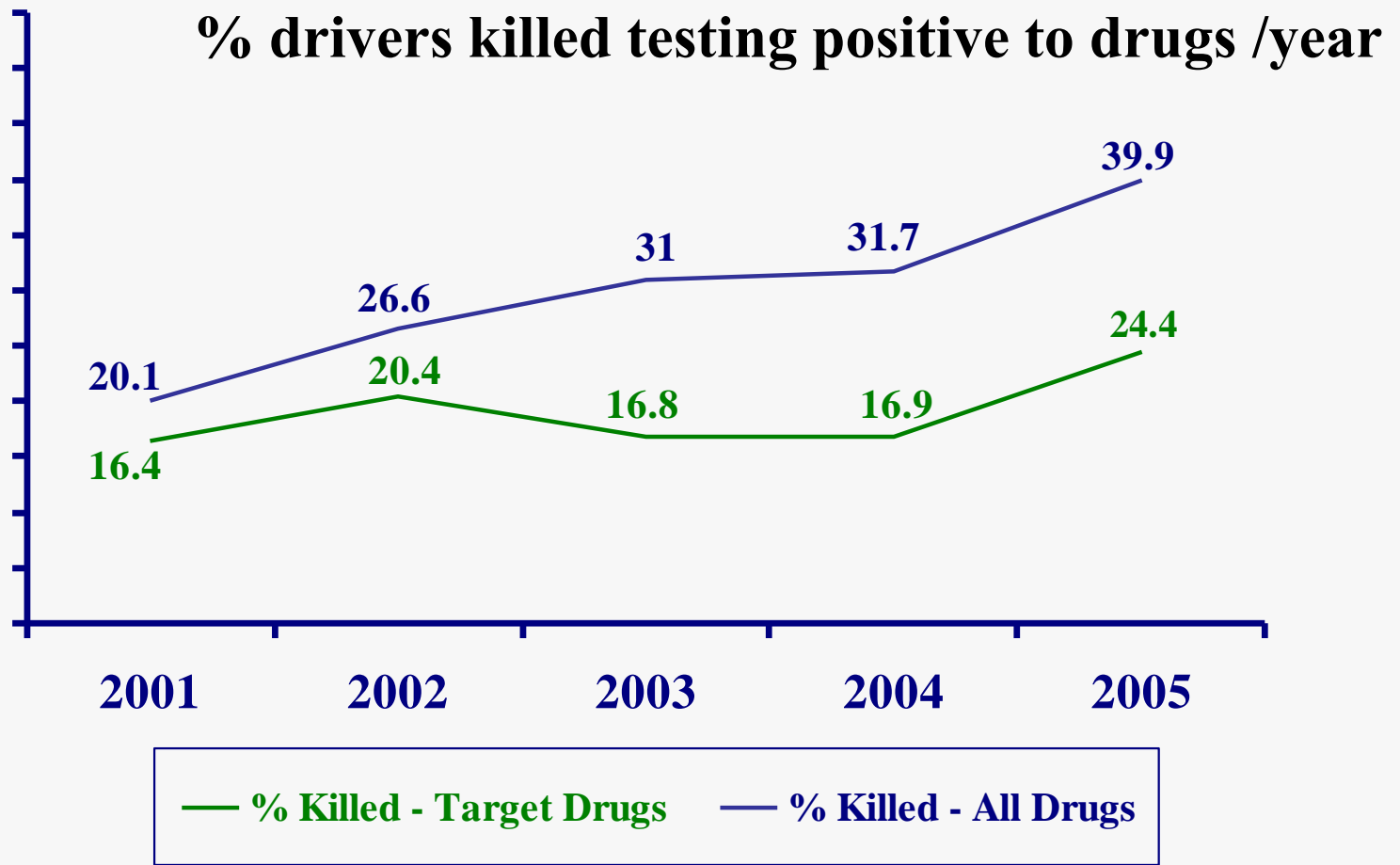
Impairment Detection Procedure

- **Roadside Opinion by Police (RIA)**
- **Standard Impairment Assessment (SIA) by trained assessor (Videotaped)** (1) Horizontal Gaze Nystagmus Test, (2) Walk and Turn Test and (3) One Leg Stand Test
- **Blood sample for Confirmation** – General defn of Drug and more than 250 drugs listed
- **Expert evaluation of behavioural and toxicological evidence**

Drug Impaired Drivers

DWI Drug found	% of sample
CNS Depressants	48.60
Opioids	19.82
THC	13.10
Amphetamines	9.51
Antidepressants	3.25
MDMA	1.79
Alcohol	0.34
Poly Drug	82

2000 = Implementation of “new impairment/zero per se law”



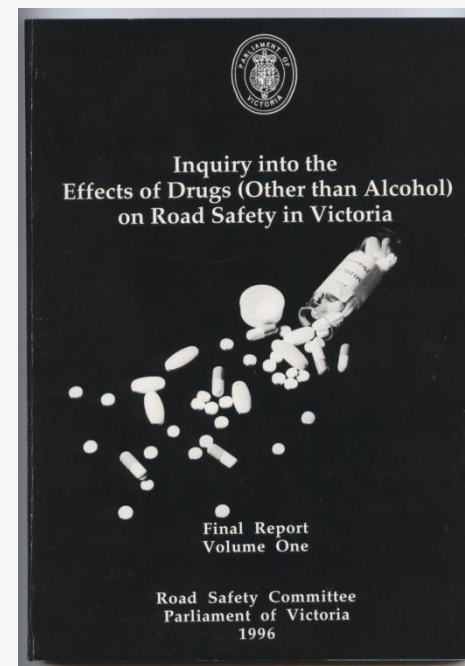
Road Safety (Amendment) Act 2000
Act No. 14/2000 Parliament of Victoria Melbourne
Australia

**Summary - This legislation can be enforced,
it is comprehensive (covers many drugs),
and detects highly impaired and very high risk
drivers
but relatively time consuming
Since 2000 approx 1000 tests (100/yr).**

The 1996 Parliamentary Inquiry had also supported
“**development in Australia of random
urine drug testing programs
both at the place of employment
and at the roadside**”

However random roadside urine testing
had not been supported by the key stakeholders

but the Parliamentary Inquiries summary that
“In Victoria drugs of most concern are amphetamines and other
stimulants, benzodiazepines and cannabis”
was supported by other evidence from the Victorian Institute of
Forensic Medicine on both prevalence and **risk criteria**





ACCIDENT ANALYSIS & PREVENTION

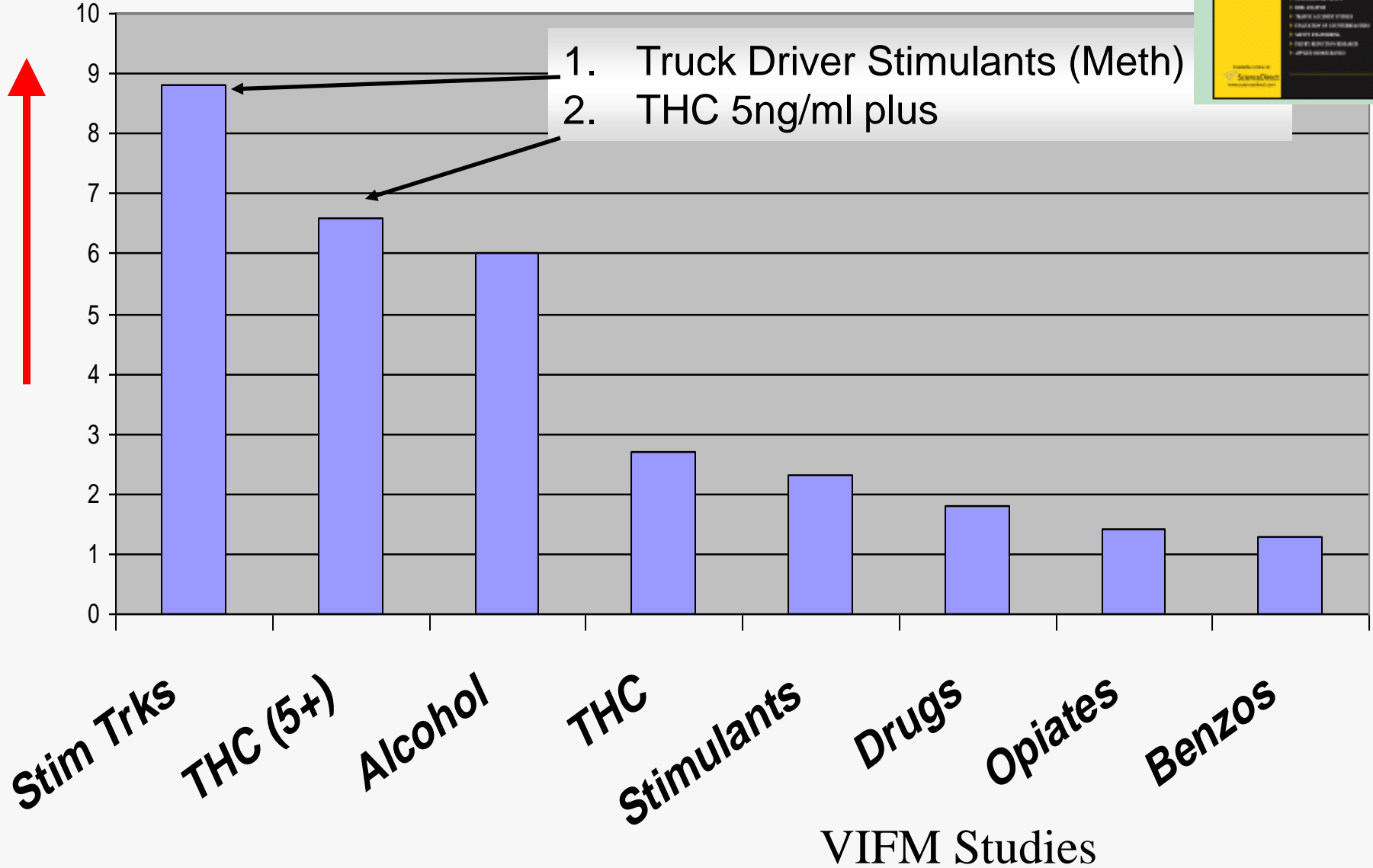
Volume 36, Issue 2, March 2004, Pages 239-248

Olaf H. **Drummer**, Jim Gerostamoulos, Helen Batziris, Mark Chu, John Caplehorn, Michael D. Robertson, Philip Swann

A multi-center case-control study was conducted on 3398 fatally-injured drivers to assess the effect of alcohol and drug use on the likelihood of them being culpable. Crashes investigated were from three Australian states (Victoria, New South Wales and Western Australia). Strong associations were also seen for stimulants, particularly in truck drivers

Risk

Accident Risk- (Odds Ratios Dead Drivers)



Also

Oral fluid handheld screening devices and instrumental desktop oral fluid screening devices, make possible general deterrence enforcement programs based on “zero” “per se” legislation.

This approach used for illicit drugs that have a high prevalence in specific road user groups.

And

allows relatively low cost random screening of large numbers of drivers

VicRoads , Victoria Police, VIFM and Swinburne University - Accuracy/reliability Testing

1. **Laboratory testing** = spiked saliva samples (pooled saliva) Manufacturers claims - accuracy, sensitivity, specificity and cross reactivity's
2. **Workplace testing** using large numbers of volunteers who were presumed negative to the 2 target drugs, (specificity- false positives)
3. **Controlled dose human volunteer testing** Swinburne University – THC and Methylamphetamine (Specificity and sensitivity)
4. **Police Field testing** under operational conditions

In 2004, Victoria implemented random oral fluid based “per se” legislation for illicit drugs methyl amphetamine and THC the active substance in cannabis and 2 years later added MDMA (ecstasy) to this group and removed the sunset legislative clause.

“per se” legislation = drivers are considered to be at an unacceptable risk of a crash, if the concentration of a specific drug in their blood is found to be above a certain level.

And in the case of zero based illicit drug “per se” legislation, the certain level is any measurable quantity of the drug.

Police only have to prove a drug was present, at or more than, a specified level. .

Road Safety (Drug Driving) Act 2003

Act No. 111/2003 Parliament of Victoria Melbourne Australia

- Introduces random roadside drug screening using saliva drug wipe device
- Offence of driving with 'prescribed illicit drug' in blood or oral fluid
- Screening initially restricted to 2 substances (Delta-9-THC and Methamphetamine) but later legislation included "ecstasy" (MDMA);".
- Use of analysis results for non-road safety offences prevented (e.g. Samples cannot be screened for DNA)

ALCOHOL
AND DRUG
TESTING
PREPARE
TO
STOP





REDUCE
SPEED

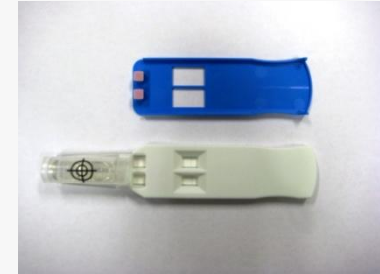
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Three Stage Process

- Roadside Screen



- Second Sample Screen



- Laboratory Confirmation



Roadside Handheld screening

- Preliminary **Handheld** drug testing
 - Securetec Drugwipe Twin or the Securetec Drugwipe II Twin





DRUG TESTING POLICE

DRUG TESTING

ALCOHOL AND DRUG TESTING PREPARE TO STOP







Drug Bus Tests

Drivers positive to Road side Drugwipe test
then do
Second Instrumental Desktop Drug Screening
Test in Drug Bus

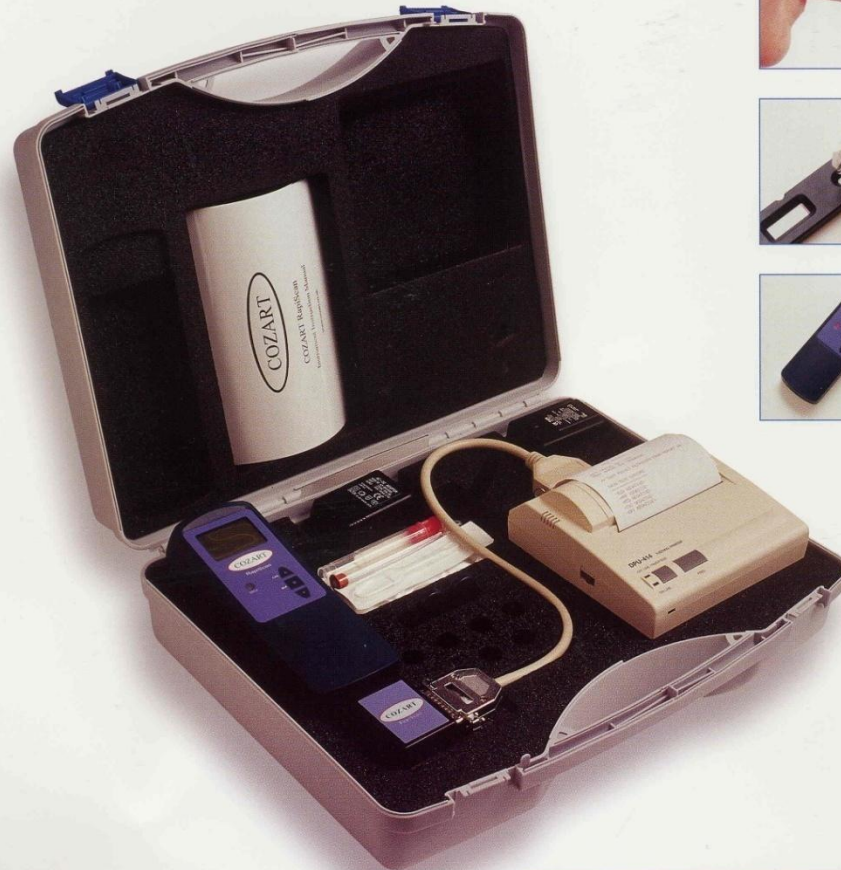


Second Screen Cozart RapiScan

Cozart
RapiScan

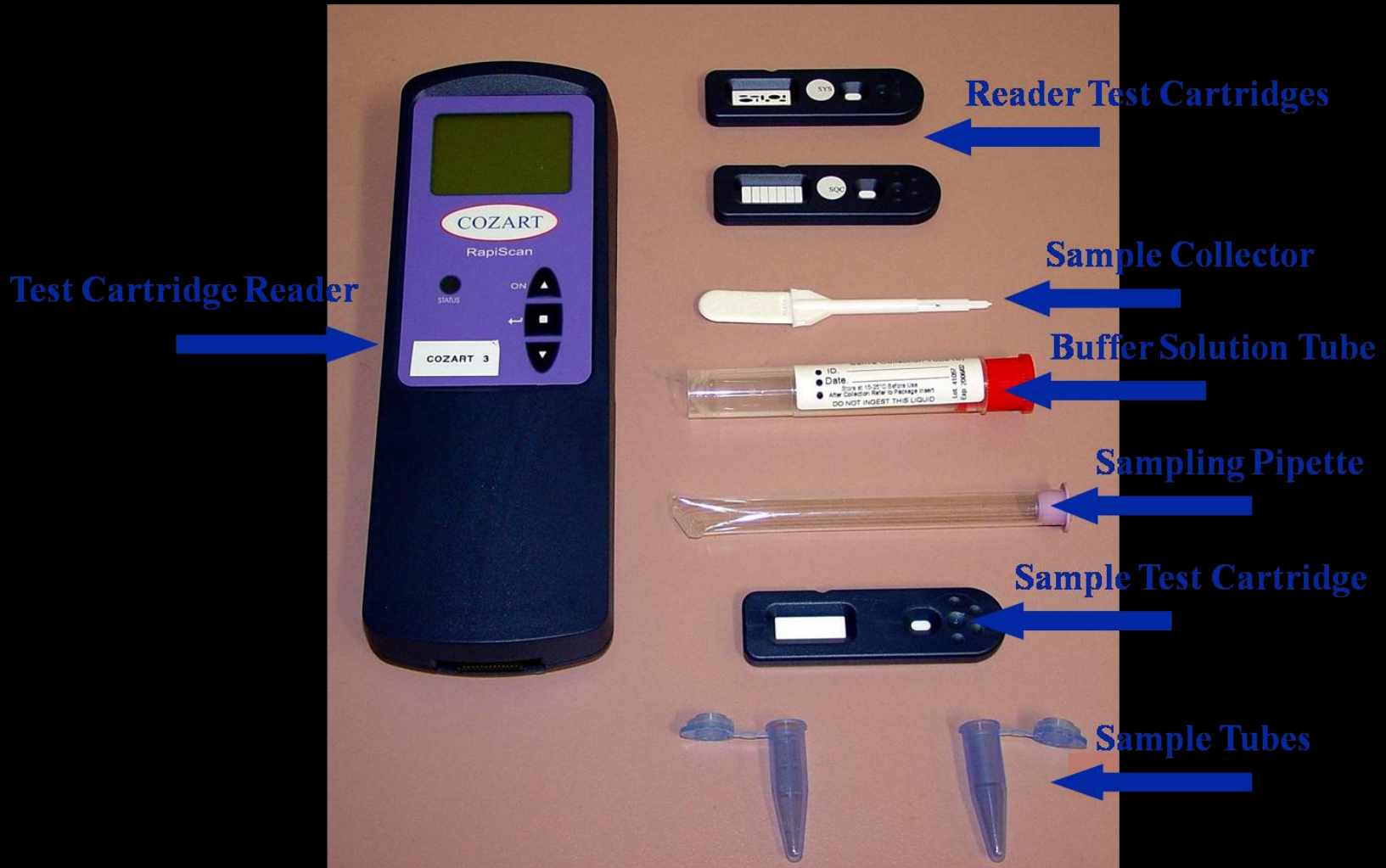
Oral fluid drugs of abuse testing system

COZART



The on-site testing system for
drugs of abuse in oral fluid

Second Sampling Device



**All Drug Bus blood and saliva samples
sent to Laboratory for GCMS analysis**

Penalties

- Infringements
- Demerit points
- Court Fines
- Imprisonment
- Licence suspension/cancellation

Enforcement Application

High Risk Groups:

- Rave/Dance/Club areas
- Transport industry routes

General Enforcement:

- High visibility Locations
- With RBT operations

Publicised Visible Activity



Driver Drug Screening

Year	Total				Cars				Trucks			
	Tests	Pos	Ratio	%	Tests	Pos	Ratio	%	Tests	Pos	Ratio	%
2005	13158	300	1:44	2.3	9216	241	1:38	2.6	3942	59	1:67	1.5
2006	11424	199	1:57	1.7	8110	149	1:54	1.8	3314	50	1:66	1.5
2007	21887	369	1:59	1.6	17764	218	1:81	1.2	4123	151	1:27	3.7
2008	25005	386	1:65	1.5	21394	321	1:67	1.5	3611	65	1:65	1.8
2009	27883	297	1:94	1.0	25539	248	1:103	0.9	2342	48	1:49	2.0
Total	100094	1554	1:64	1.5	82668	1181	1:70	1.4	17426	373	1:47	2.1

Drug Positive Drivers

Drug Types	% of sample
Methamphetamine	82.40
MDMA	49.19
THC	27.46
Poly Drug Use	23.69
Drug not Detected	1.79

