

Impaired Driving Partner Update

Jennifer Davidson NHTSA, Highway Safety Specialist, Impaired Driving Division

May 24, 2023

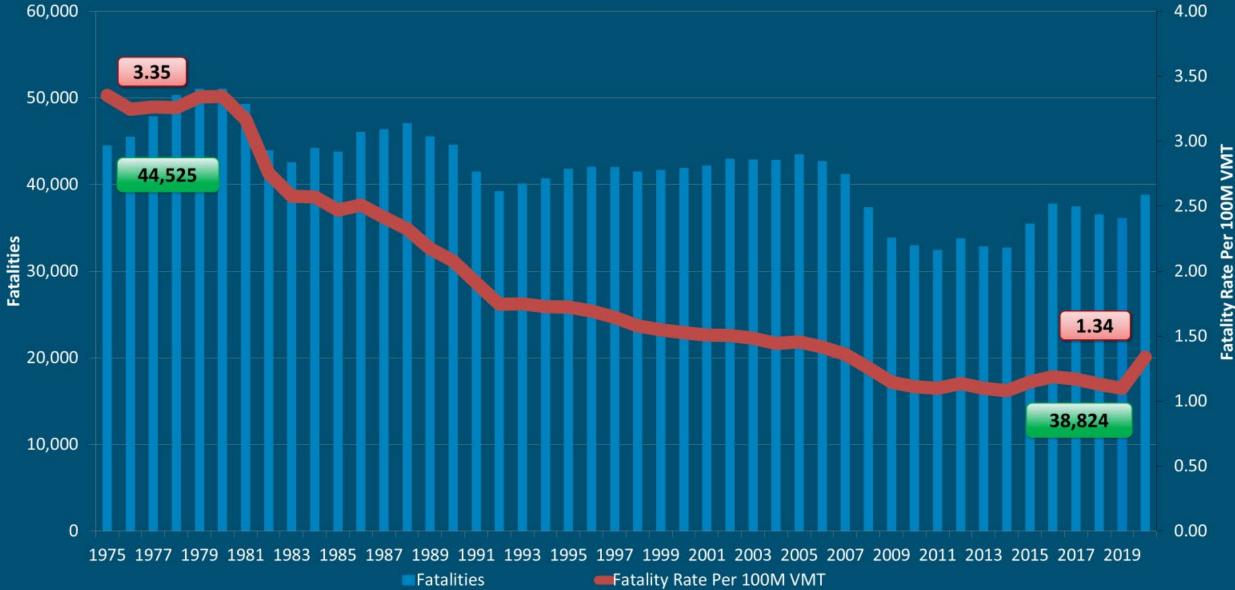
Save lives, prevent injuries, and reduce economic costs due to road traffic crashes through education, research, safety standards and enforcement activity.

NHTSA's Mission

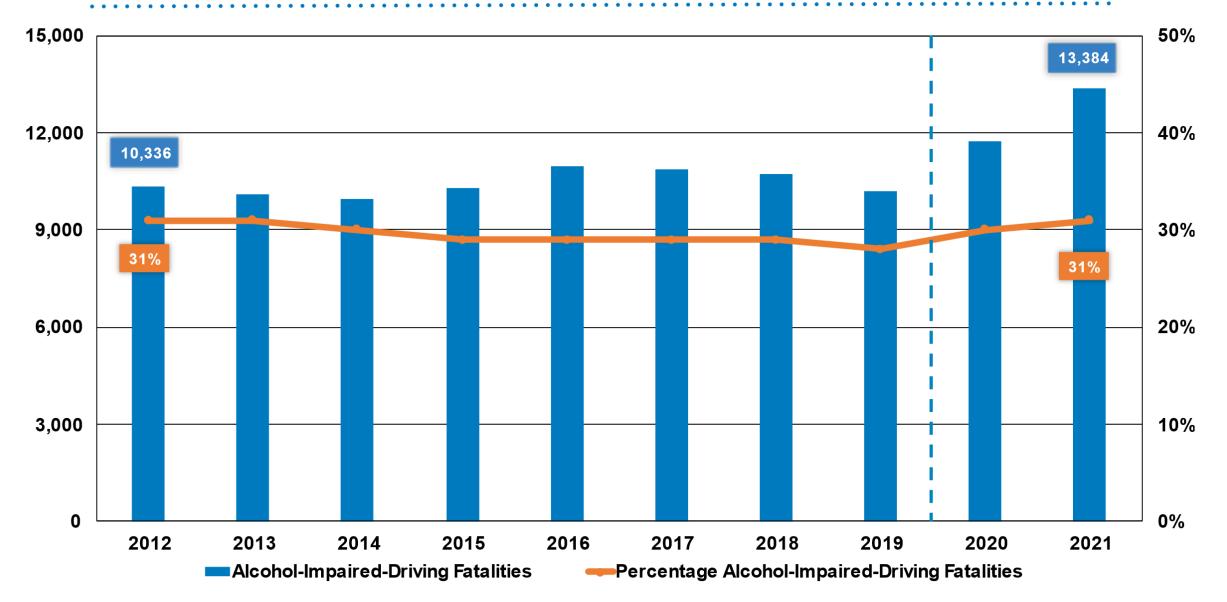
Fatal Motor Vehicle Crash Update Fatality Analysis Reporting System (FARS)

- 42,939 Traffic Fatalities in 2021
- 10% Increase in fatalities from 2020
- 13,384 Alcohol-impaired fatalities (14% increase)

FATALITIES & FATALITY RATE (PER 100M VMT) 1975-2020



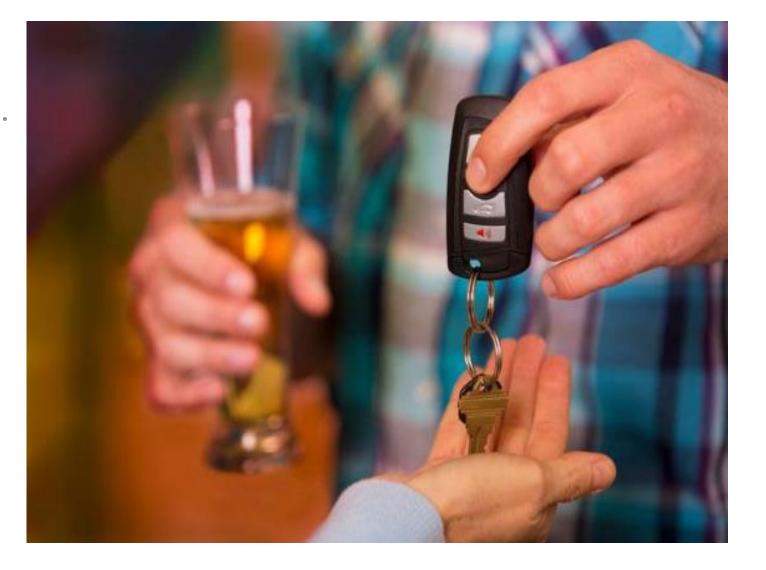
Alcohol-Impaired-Driving Fatalities



Impaired Driving

A public health crisis

Nearly 1 in 3 fatal crashes involves an impaired driver





Examination of the **Traffic Safety Environment During the Second Quarter of 2020**

Special Report

Although the second sec Update to Special Reports on Traffic Safety During the COVID-19 Public Health Emergency: Third Quarter Data

Authors: Office of Behavioral Safety Research

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The National Highway Traffic Safety Adm

The National Highway Trathic Salety Administration (NHTSA) is continuing its exploration of traffic salety during the COVID-19 public health emergency is used to even at a furthering our undergoarding of during the COVID-19 public health emergency. This work is crucial to furthering our understanding of changes in potentially dangerous driving behaviors, and allower to soverand or evolves controlormations. countermeasures to expand or evolve countermeasures to irrent needs in States and across the country.

In October 2020, NHTSA released two reports related In OCMID-19. The first was a synthesis of data on traf-to COVID-19. The first was a synthesis of data on trafto COVID-12: the tirst was a symmetry of using on using on using fic safety during the second quarter (Q2) of the year, Its satety during the second quarter (Q2) of the year, covering the monits of April to June, providing concest to understand changes in motor vehicle factories in 2020, While traffic craft heat had increased. The second date in 2020, the faality rate had increased. The second was an interim record on research examining when we Back Durin emergi signiko use in axis, the thanky fate had provided. The second was an interim report on research examining the preswas an innermin report on research examining the pres-ence of drugs and alcohol in road users who were seriior, inch ence or drugs and accritic in road users into were serv-ously and fatally injured in crashes; in noted increased prevalence of alcohol and some other drugs among shows instructural. These constraints around a context of the service shows instructural. Traffic da prevatence or accorso and some other sharp annual these individuals. These reports provided context to day form ALTERAS Matcord Context to Context of the secon these individuals. These reports provided connext in data from NHTSA's National Center for Statistics and structure operations of the structure of the NTCA report commor data from NHTSAS National Center for Statistics and Analysis (NCSA) released at the same time, NCSA proin crasho Ananyasa Uwary nasasana ar tre same muse rwary pro-vided initial data on motor vehicle fatality numbers The study visual initial data on motor vehicle nating numbers in 2020. In the first half of 2020, NCSA estimated that five particip in 2020, in the rise nair or 2020, NCSA estimated that the fatality rate per 100 million vehicle miles traveled the analysy rate per RM million vehicle miles traveled (VMT) had risen year-over-year, from a rate of 100 km 200 for postered rate of L25 in 2020 (NCSA, 2020), in that report, NCSA also reported a reduction in VMT of 20.4 yielding endow a KAW, deerover-on in the first 20.4 yielding endow a KAW, deerover-on in the first found that, two-thirds active drug The proports nan report, ivelor and reported a remaining it vit of 2642 billion miles – about a 16.6% decrease – in the first Consult – Const olds nearly de the previous increased by a

ance of the findings across these NHTSA immediately convened a series of eporta, 1911 204 intraconatory convenient a series or workshops with national partners, State highway safety als, and researchers. In these meetings, the

agency began the conversa Th 0 dur

FRAFFIC TECH U.S. Department of Transportation Traffic Safety Technology Transfer Series

and alcohol positivity among road users in the United States.

This study collected blood samples across several Level-1

trauma centers and morgues from those admitted after motor

vehicle crashes. The results of this research increase our

knowledge of substance use and traffic safety. The National

Roadside Surveys were designed to provide information on

the prevalence of alcohol and drugs in drivers, at the time of driving. NHTSA's "Virginia Beach study" on crash risk exam-

ined the prevalence of alcohol and drugs in crash-involved

drivers and control (non-crash) drivers. That study increased

our knowledge considerably regarding crash risk associated

with alcohol and drug use; however, most crashes resulted in

property damage only or minor injuries, limiting information

on serious crashes. In this current study, NHTSA advanced the

research on two significant fronts. First, the focus was on the most serious of crashes - those that involved someone either admitted to a Level-1 trauma center, or who had died at the scene of the crash and been transported to a medical examiner's office. Second, the study obtained data across types of road users besides drivers, such as pedestrians and bicyclists. NHTSA released interim results of this study in October 2020

(DOT HS 813 013) that included an analysis of alcohol and other drug prevalence before and during the COVID-19 public health emergency from the data collection in our initial five

sites. Additional interim data were included in the Office of

Behavioral Safety Research series, Research Notes on COVID

and Traffic Safety (DOT HS 813 011, DOT HS 813 069, DOT HS

813 135). Since then, data were obtained from two more sites,

DOT HS 813 400

Alcohol and Drug Prevalence Among Seriously or **Fatally Injured Road Users**

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National Highw Traffic Safety

DOT H6 813 210

By Amy Berning

Background NHTSA is interested in learning about the prevalence of drug

This Research N NHTSA studies the third quarte limitations ident the data reported 1200 New Jer Methods Participants Drivers, including motorcyclists 4798 1.031 Passengers Bicyclists 255 Pedestrians 983 Other 129 Unknown 83

TRAFFIC SAFETY FACTS

Behavioral Safety Research Continuation of Research on Traffic Safety

During the COVID-19 Public Health Emergency:

The National Highway Traffic Safety Administration in riskier behavior, including speeding, failure to wear

continues to explore traffic safety during the COVID-19 seat belts, and driving under the influence of alcohol or

⊗ <u>t</u> **a** <u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u>

December 2022

NHTSA

Research Note

January - June 2021

The study included seven Level 1 trauma centers with large catchment areas. Medical examiner (ME) offices participated at four sites. Due to staggered on-boarding, researchers conducted data collection in the periods shown.

Jacksonville, FL: September 10, 2019, to July 31, 2021	Worcester, MA: January 27, 2020, to July 31, 2021
Charlotte, NC: September 16, 2019, to July 31, 2021	Iowa City, IA: August 24, 2020, b July 31, 2021
Miami, FL: October 17, 2019, to July 31, 2021	Sacramento, CA: November 13, 2020, to July 31, 2021
Baltimore, MD: December 11, 2019, to July 31, 2021	

Level-1 trauma centers routinely obtain blood samples from all patients; from each of these samples approximately 6 ml of blood was collected to test for the presence of alcohol and other drugs. Blood samples were de-identified and sent to a forensic toxicology lab for screening and confirmatory analyses. Samples were tested for a variety of drugs known to have potentially impairing effects on driving-related behaviors. The drugs included "parent" drugs and their active metabolites.

Results

Table 1 provides summary information on the 7,279 road users in the study. See the full report for detail on drug and alcohol prevalence across road user types (e.g., passengers, pedestrians) and drug categories.

and thousands more road users.

Research Objective This study examined prevalence of alcohol and over-thecounter, prescription, and illegal drugs in the blood of a large sample of seriously or fatally injured drivers and other road user crash victims

walso reported the propertion of for opioids nearly doubled after pared to the previous 6 months, lence increased by about 50%. ludes analyses from the Bureau of s (BTS) and the Federal Highway HWA) National Performance h Dataset (NPMRDS). These

data that captures large volumes s not permit analysis of individdress this limitation, researchers ces through traditional literature ure" such as blog posts to ideng behavioral safety trends that public health emergency. They

NHTSA

October 2021

cited in those reports showed

during the last three quarters

eds, those 20 miles per hour (or

ed speed limit, became more

were supported by analyses

s that show an estimated 11%

ated fatalities (NCSA, 2021b

er people in crashes used their

ch reports showed changes in

ol and other drugs during the

sly or fatally injured road users

he pandemic (Thomas et al., 2020,

dety Research, 2021a, 2021b), For

group found that almost two-

or fatally injured drivers in their

e at least one active drug, includ-

or opioids between mid-March

other risky driving behaviors,

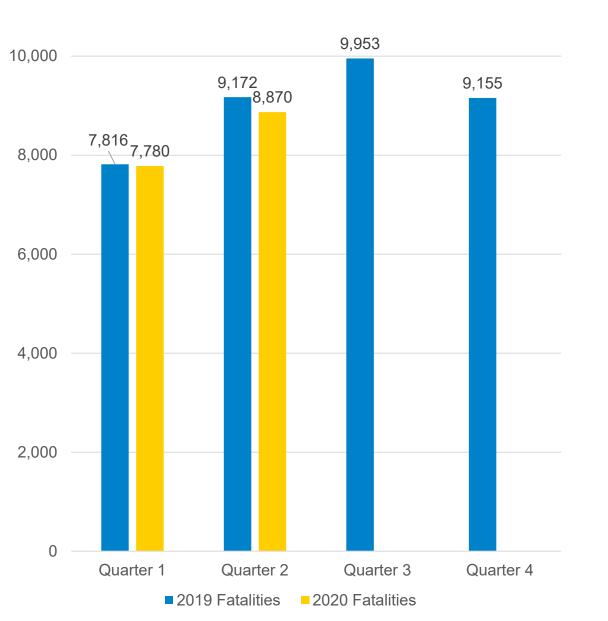
ports documenting changes in Avenue SE, Washington, DC 20590

U.S.	Dep	artment	of Tra	nspo	rtation
Natio	nal	Highway	Traffic	Safet	Administration

1200 New Jersey Avenue SE, Washington, DC 20590

Fatalities by Quarter, 2019 & 2020

12,000



Foundation in Data

The number of fatalities in Q1 and Q2 was lower in 2020 than in the previous year. This is unequivocally good.

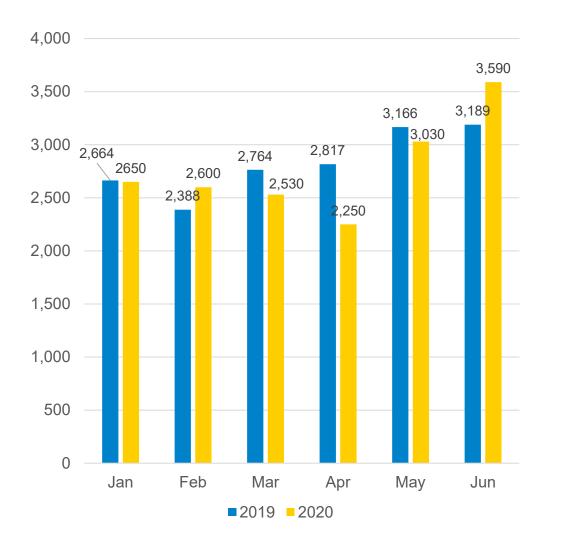
However, the fatality rate per 100 million vehicle miles traveled (VMT) increased substantially.

	Q1	Q2
2019	1.05	1.08
2020	1.10	1.42

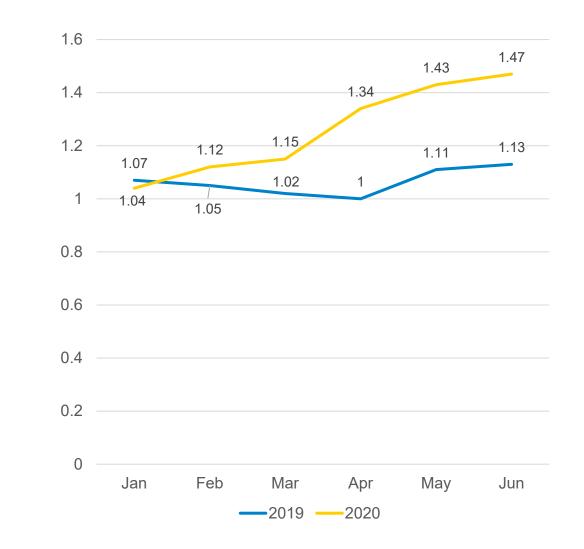
We need to understand why.

Source: Early Estimate of Motor Vehicle Traffic Fatalities for the First Half (Jan–Jun) of 2020

Fatalities by Month (Jan-Jun), 2019 & 2020



Fatality Rate Per 100M VMT by Month (Jan-Jun), 2019 & 2020



Source: Early Estimate of Motor Vehicle Traffic Fatalities for the First Half (Jan–Jun) of 2020

Enforcement Changed

- More than 900 first responders have died from COVID-19 through October 21, 2021
 - Law Enforcement comprise two-thirds of first responder fatalities
- Through at least May, many law enforcement agencies had policies limiting interactions with the public and arrests
 - Reductions in stops, DWI arrests, speeding citations, belt citations
 - Deterrence through highly visible enforcement was not there

 In conversations with our Regions, States described reductions in traffic safety enforcement activity

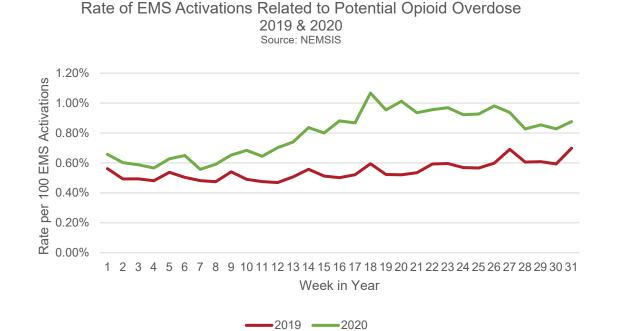
Risky Behavior – Known and Seen

Speed – driving speeds increased

Seatbelts – ejection rates increased

Drugs and Alcohol -

- Increase in opioid-related EMS calls and Naloxone administration more pronounced in urban areas
- Increase in marijuana sales (taxes), alcohol sales, reported self-medication
- Increase in prevalence of drugs and alcohol among critically injured road users at five trauma centers



Documented Increases in Drug and Alcohol Use

- Wholesale and retail sales of alcohol were at record levels in May and June
- States that reported their marijuana sales revenues showed dramatic increases throughout the quarter
- Significant increases in EMS calls related to opioid overdoses
- Surveys showed self-reported increases in drug and alcohol use

Alcohol & Other Drugs Seen in Trauma Patients Increased

 Proportion of drivers who were Motor Vehicle Crash trauma patients with alcohol, marijuana and opiates on board compared to pre-March 16 is up

Drug	Before March 16 (dating to Sept 2019)	After March 16	Medical Examine Data
Alcohol	21.8%	28.3%	35.8%
Cannabinoids (THC)	20.8%	32.7%	28.0%
Opioids	7.5%	13.9%	
			15.3%

- Highest BAC ranges showed biggest increases
- Antidepressants down

Note: All data presented on this slide is significant at the .05 level

Drugs and Driving: Prevalence

Table 1. Drug Category Prevalence by Case Source for All Road Users

		Trauma Cei (<i>n</i> =6,382		'	Nedical Exan (<i>n</i> -897)	niner	Totai (N-7,279)						
Drug Category	п	%	95% CI	n	%	95% CI	N	%	95% CI				
Alcohol	1,364	21.4	[20.4, 22.4]	321	35.8	[32.7, 39.0]	1,685	23.1	[22.2, 24.1]				
Cannabinoids ^A	1,579	24.7	[23.7, 25.8]	251	28.0	[25.1, 31.0]	1,830	25.1	[24.2, 26.1]				
Stimulants	675	10.6	[9.8, 11.3]	112	12.5	[10.4, 14.8]	787	10.8	[10.1, 11.5]				
Sedatives	475	7.4	[6.8, 8.1]	73	8.1	[6.5, 10.1]	548	7.5	[6.9, 8.2]				
Opioids	541	8.5	[7.8, 9.2]	137	15.3	[13.0, 17.7]	678	9.3	[8.7, 10.0]				
Antidepressants	64	1.0	[0.8, 1.3]	10	1.1	[0.6, 2.0]	74	1.0	[0.8, 1.3]				
Over-the-Counter	106	1.7	[1.4, 2.0]	39	4.3	[3.2, 5.8]	145	2.0	[1.7, 2.3]				
Other Drugs	97	1.5	[1.2, 1.8]	36	4.0	[2.9, 5.4]	133	1.8	[1.5, 2.2]				
Positive for Any Drug	3,456	54.2	[52.9, 55.4]	607	67.7	[64.6, 70.7]	4,063	55.8	[54.7, 57.0]				
Drug Negative	2,926	45.8	[44.6, 47.1]	290	32.3	[29.3, 35.4]	3,216	44.2	[43.0, 45.3]				
Positive for 2 or More Drug Categories	1,163	18.2	[17.3, 19.2]	286	31.9	[28.9, 35.0]	1,449	19.9	[19.0, 20.8]				

Active THC (Δ-9-THC or 11-OH-THC).

Notes: "Drug" refers to alcohol and all other drugs included on this study's toxicology panel. This table combines data from all road users (drivers, pedestrians, bioyolists) included in the study.



Alcohol and Drug Prevalence Among Seriously or Fatally Injured Road Users

Methods

By Amy Berning

Background

NHTSA is interested in learning about the prevalence of drug and alcohol positivity among road users in the United States. This study collected blood samples across several Level-1 trauma centers and moreues from those admitted after motor vehicle crashes. The results of this research increase our knowledge of substance use and traffic safety. The National Roadside Surveys were designed to provide information on the prevalence of alcohol and drugs in drivers, at the time of driving. NHTSA's "Virginia Beach study" on crash risk examined the prevalence of alcohol and drugs in crash-involved drivers and control (non-crash) drivers. That study increased our knowledge considerably regarding crash risk associated with alcohol and drug use: however, most crashes resulted in property damage only or minor injuries, limiting information on serious crashes. In this current study, NHTSA advanced the research on two significant fronts. First, the focus was on the most serious of crashes - those that involved someone either admitted to a Level-1 trauma center, or who had died at the scene of the crash and been transported to a medical examiner's office. Second, the study obtained data across types of road users besides drivers, such as pedestrians and bicyclists.

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Research Objective

This study examined prevalence of alcohol and over-thecounter, prescription, and illegal drugs in the blood of a large sample of seriously or fatally injured drivers and other road user crash victims.

inclivus							
Participants							
Drivers, including motorcyclists	4,798						
Passengers	1,031						
Bicyclists	255						
Pedestrians	983						
Other	129						
Unknown	83						

The study included seven Level 1 trauma centers with large catchment areas. Medical examiner (ME) offices participated at four sites. Due to staggered on-boarding, researchers conducted data collection in the periods shown.

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Results

Table 1 provides summary information on the 7,279 road users in the study. See the full report for detail on drug and alcohol prevalence across road user types (e.g., passengers, pedestrians) and drug categories.

U.S. Department of Transportation National Highway Traffic Safety Administration 1200 New Jersey Avenue SE, Washington, DC 20590

Other Drugs and Driving: Complex & Multifaceted

- Effects of alcohol on driving performance fairly well-known
- 50 years of research and programmatic efforts on drugs, but there are 100s
- The impact of polysubstance use on driving is understudied
- Specific drug concentration levels cannot be reliably equated with effects on driver performance

	Alcohol	Other Drugs
Size of Effort	One type of drug	Many (illegal, OTCs, prescription)
Research Efforts	Well-studied	Many, disparate
Metabolism	Processes understood	Variable; many possibilities
Effect on Driving Behavior	Strong correlation to poor performance	Uncertain Correlation
Effect of High Doses	Greater decrements in performance	Unpredictable



NHTSA

In this fact sheet for 2020 the information is presented as follows.

- Overview
- Drivers
- Children
- Crash Characteristics
- Time of Day and Day of Week
- <u>State</u>

 Economic Cost for All Traffic Crashes

Important Safety Reminders

U.S. Department of Transportation

National Highwa Trattic Salety Administration

1200 New Jessey Avenue SE Washington, DC 20560

Alcohol-Impaired Driving

Drivers are considered to be alcohol-impaired when their blood alcohol concentrations (BACs) are .08 grams per deciliter (g/dL) or higher. Thus, any fatal crash involving a driver with a BAC of .08 g/dL or higher is considered to be an alcohol-impaired-driving crash, and fatalities occurring in those crashes are considered to be alcohol-impaired driving training. The term "drunk driving" is used instead of alcohol-impaired driving in some other NHTSA communications and material. The term "drune" refers to the operator of any motor vehicle, including a motorcycle.

Estimates of alcohol-impaired driving are generated using BAC values reported to the Fatality Analysis Reporting System (FARS) and BAC values imputed when they are not reported. In this fact sheet NHTSA uses the term "alcohol-impaired" in evaluating the FARS statistics. In all cases throughout this fact sheet, use of the term does not indicate that a cmsh or a fatality was caused by alcohol impairment, only that an alcohol-impaired driver was involved in the crash. This report also includes BACs of .00 g/dL (no alcohol), .01+ g/dL, and .15+ g/dL solely for comparison purposes.

Key Findings

- In 2020 there were 11,654 fatalities in motor vehicle traffic crashes in which at least one driver was alcohol-impaired. This totaled 30 percent of all traffic fatalities in the United States for the year.
- Fatalities in alcohol-impaired-driving crashes increased by 14.3 percent (10,196 to 11,654 fatalities) from 2019 to 2020.
- One alcohol-impaired-driving fatality occurred every 45 minutes in 2020, on average.
- The 21- to 24-year-old age group and the 25- to 34-year-old age group had the highest percentages (26% each) of alcohol-impaired drivers involved in fatal crashes compared to other age groups in 2020.
- In 2020 there were 4 male alcoholimpaired drivers involved for every female alcohol-impaired driver involved. When compared to all drivers involved.

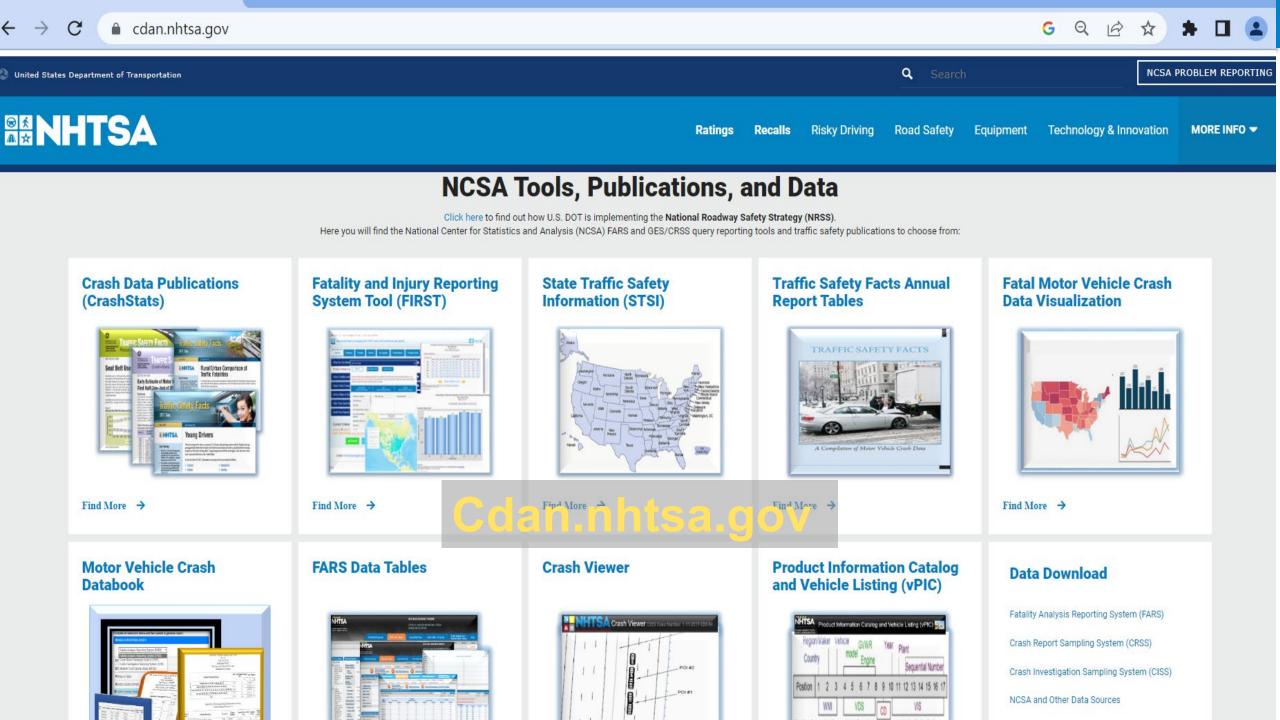
in fatal crashes, there were 3 male drivers for every female driver.

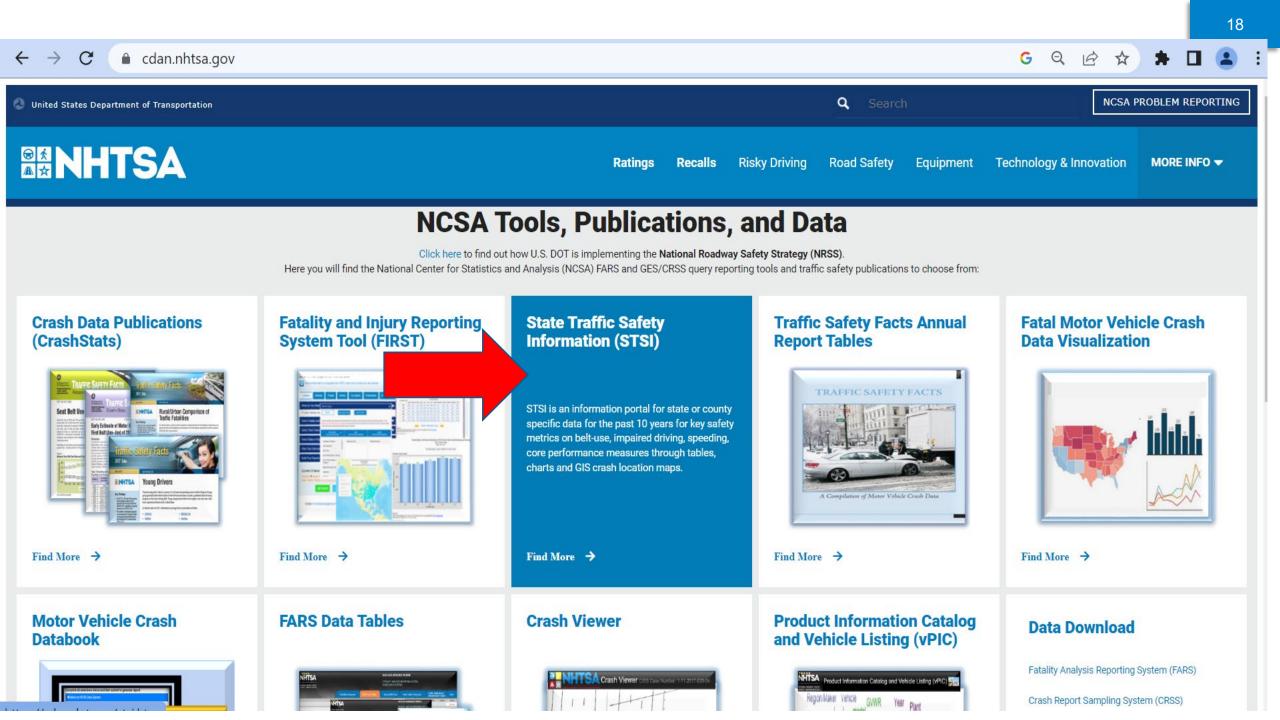
- The percentages of alcohol-impaired drivers involved in fatal crashes in 2020 was the highest for motorcycle riders (27%), compared to drivers of passenger cars (23%), light trucks (19%), and large trucks (3%).
- Of the 1,093 traffic fatalities in 2020 among children 14 and younger, 21 percent (229) occurred in alcohol-impaireddriving crashes.
- In 2020, among the 11,654 alcoholimpaired-driving fatalities, 67 percent (7,831) were to crashes to which at least one driver had a BAC of .15 g/dL or higher.
- The rate of alcohol impairment among drivers involved in fatal crashes in 2020 was 3.1 times higher at night than during the day.

Alcohol Impaired Driving NHTSA, FARS 2020 Data

 11,654 fatalities – at least one driver was alcohol-impaired

- One alcohol-impaired-driving fatality occurred every 45 minutes
- 67% (7,831) were in crashes where at least one driver had a BAC .15+







Select on the map below to view each State Traffic Safety Information Report or I View USA Crash Location Map



STSI Reports Contain Additional Information From The Following Sources

Federal Highway Administration: Highway Statistics Series

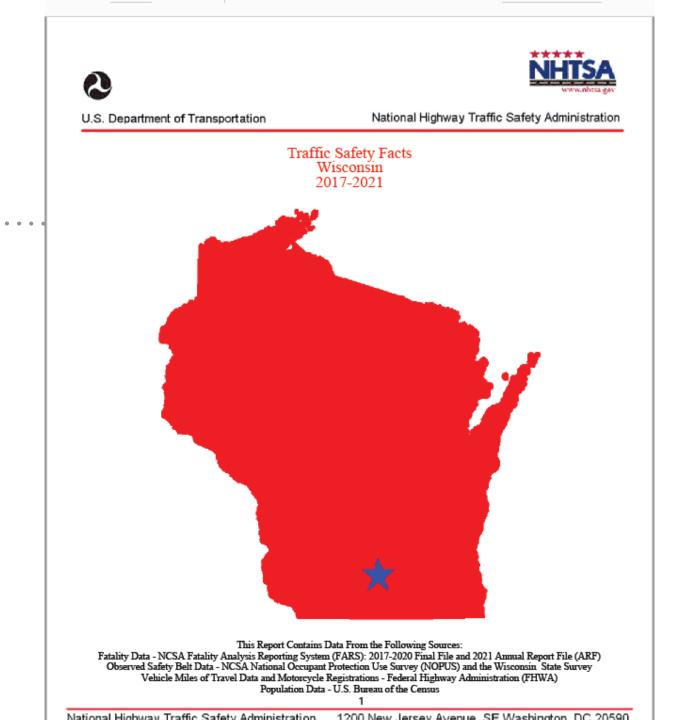
United States Census Bureau: Population Data

Contact NCSARequests@dot.gov for any questions or commentss.

													Traffic Safety Facts	
Performance Measures NHTSA Highway Safety Funding			~										Wisconsin 2017-2021	
NHTSA Highway Salety Funding													2017-2021	
Economic Impact of Motor Vehicle Crashes			M Da	liscor ta So	nsin urce:	FARS	2017	- 2(Se	elect a	a Cour a Cour	nty 🗸	21 A	٩RF	
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	Traffic Safety Performance	`	com	e) 1	Mea	asui		Co	olumb			n	1	
	Core Outcome Measures							ear Cr		rd				
		T -(-) (0, ()				2015			ane odge			021		
	Traffic Fatalities	Total (C-1)		543	506	566	607	~ .	oor			20 14		
		Rural	389 226	359	338	360 205	406 194	03	ougla	s		14 04		
		Urban Unknown	0	181 3	167	205	194	2	unn			04		
	Fatalities Per 100 Million Vehicle Miles Driven	Total (C-3)	-	~	1	0.91	7 0.95	Ea	au Cla	aire		.95		
	ratainties rei 100 million venicle miles Driven	Rural	1.04	1.17	1.09	-			orenc	:е				
		Urban			0.57	0.68	0.61	0.67		0.58				
	Passenger Vehicle Occupant Fatalities	Total	417	376	362	388	429	437				388		
	(All Seat Positions)	Restrained	177	158	159	176	204	210	203			154		
		Unrestrained (C-4)	201	186	161	167	183	180	154		178	164		
		Unknown	39	32	42	45	42	47	57			70		
	Alcohol-Impaired Driving Fatalities (BA	C=.08+)** (C-5)	202	177	165	188	199	185	206	186	207	199		
	Speeding-Related Fatalities (C-6)	209	178	168	167	212	180	186	173	214	212		
	Motorcyclist Fatalities	Total (C-7)	117	85	73	81	85	76	83	85	116	121		
		Helmeted	27	21	20	15	17	30	30	31		36		
		Unhelmeted (C-8)	87	62	51	65	65	42				83		
		Unknown	3	2	2	1	3	4	-	×	-	2		
	Drivers Involved in Fatal Crashes	Total	806	796	689	797	797	836	796	792	818	878		

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													Traffic Safety Facts		
Performance Measures			~										Wisconsin		
Performance Measures													2017-2021		
Fatality Rates			V	Wisconsin V Select a County V											
Alcohol-Related Fatalities (Old Definition)				Data Source: FARS 2017 - 2020 Final and FARS 2021 ARF											
Alcohol-Impaired Driving Fatalities (New Definition	on)														
Fatalities per 100 Million VMT															
Alcohol-Impaired Driving Fatalities per 100 Millio			H	ome	-	Printe	r Frien	dly							
BAC Reporting Rates For Drivers/Motorcycle Rivers/ Passenger Vehicle Occupant Fatalities by Restra		es													
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Motorcycle Occupant Fatalities by Helmet Use a															
Fatalities by Person Type			r	me) Measures* For Wisconsin											
Fatalities by Crash Type			-	Year											
Motorcyclist Fatalities by Age			10	2012	2014	2015	2016		2019	2010	2020	2021			
Motorcyclist Fatalities Per 100,000 Registered M			-	543	506				589			620			
Fatalities by Person Type and Race/Hispanic Or	rigin			359	338			397	387	369	375	414			
Top 10 Counties - Fatalities		-					214	387 199	192	<u> </u>					
Top to obundes a radiates real to real releant on anges			181 3	167	205	794	214	199	192	234	204				
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Fatalit	des Per 100 Million venicle Miles Driven	Total (C-3)	_				0.95 1.26								
	-	Rural	_						<u> </u>		<u> </u>				
Pa	ssenger Vehicle Occupant Fatalities	Urban Total	_	_	362		0.61 429		414			388			
Fa	ssenger venicle occupant ratalities	Iotai	417	510	302	300	423	407	414	510	331	000	L		



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NHTSA's Support for Ignition Interlock Programs

- Model Specifications
- Publications
- Ignition Interlock Education and Assistance



State of the Practice of Alcohol Ignition Interlock Programs

A breath alcohol ignition interlock device (BAIID) is a test Project Objective

device mounted near the dashboard that prevents the vehicle from being driven unless the driver provides a breath sample indicating a blood alcohol concentration (BAC) lower than a pre-set level, usually *DL* gold. BMIDs are an important type of sanction for driving while impaired (DWI) offenses. Initially used primarily for repeat DWI offenders, BAIIDs are now sanctions used for many types of DWI offenses, including first-time offenses. An offender assigned an interlock must first enroll in the State BAID program, which incurs enrollment foss and other requirements.

Proven Countermeasure

While installed, interlocks are effective at lowering residivium rates. A review of 15 studies conducted by the Centers for Disease Control and Prevention found among offenders using BAIIDs, the re-arrest rate decreased for percent compared to groups that did not have the BAIDs installed (Elder et al., 2011). As evidence of effectiveness in reducing recidivium accumulated, State logislators expanded the use of BAIDs and allowed their use in addition to or in place of license suspension.

State BAIDI programs have important roles in the prevention of alcohol-impained driving and the enforcement of DWI laws and are frequently used in combination with other stanctions and treatment programs. Although every State uses BAIDDs, IBAIDI programs across the Nation vary in key areas of program delivery; such as the sources of program funding, the agency assigned as being responsible for driver monitoring, and vendor oversight.

Project Background

In the Maving Ahead for Progress in the 21st Century (MAP21) Act. Compres directed MFTS to cetable a cospler distance of the Compression of the Compression of the Compression erative program—the National Compression Research and evaluation Program—to conduct research and evaluation of cight State highway Safety countermeasures. Through the Covernors Highway Safety countermeasures. Through the family highway Safety Association (CIFAS) the States believe are important for informing State policy, planning, and programmatic activities, CFAS Modentified a need for upto-date information on the practice of interfock programs in the United States.

Fruget Oujective This project documented the state of the practice of interlock programs across the country by surveying BAIID programs and populating an online inventory on key areas, including logislation, program funding, data management, vendor oversight, interlock technology, and monitoring of driver compliance.

NHTSA

January 2023

Methodology

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Program Fundin

Results

The project included a review of literature, examination of laws, an online survey,¹ and group phone discussions with representatives from State interlock programs. Each State and the District of Columbia was invited to provide information on the investors. Each nearure in defined he is here at



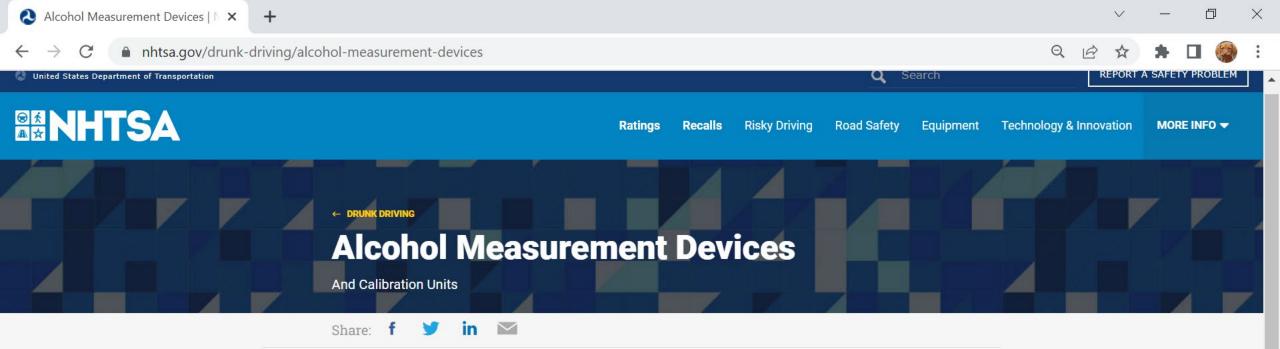


A Study Conducted Under NCREP — The National Cooperative Research and Evaluation Program





NHTSA



MODEL SPECIFICATIONS

The National Highway Traffic Safety Administration, in its effort to reduce alcohol impaired driving,

has established Model Specifications for the following alcohol testing devices:

- Evidential Breath Alcohol Measurement Devices (EBTs)
- Screening Devices to Measure Alcohol in Bodily Fluids (ASDs)
- Calibrating Units for Breath Alcohol Testers (CUs)
- Breath Alcohol Ignition Interlock Devices (BAIIDs) 2013 | 2015

CONFORMING PRODUCTS LISTS

NHTSA also maintains a Conforming Products List (CPL) for the following devices, which have been tested and determined to be in conformance with the NHTSA Model Specifications:

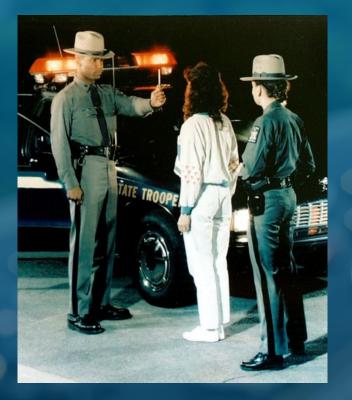
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- Evidential Breath Alcohol Measurement Devices (EBTs) 2012 | 2017
- <u>Screening Devices to Measure Alcohol in Bodily Fluids</u> (ASDs)
- <u>Calibrating Units for Breath Alcohol Testers</u> (CUs)

Law Enforcement Tools and Resources



Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

DRIVE SOBER OR GET PULLED OVER

NHTSA

<u>, **T**SI</u>

LAW ENFORCEMENT PHLEBOTOMY TOOLKIT: A Guide to Assist Law Enforcement Agencies With Planning and Implementing a Phlebotomy Program



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 Image: Second Highway Traffic Safety Administration

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 Image: Safety Administration

NHTSA March 2019

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NHTSA WATCH NOW



Toxicology

- State Toxicology Stakeholder
 Meetings
- Regional Toxicology Liaison
 Program

www.NHTSA.gov/DUIDtool



The National Highway Traffic Safety Administration is engaged in numerous activities to reduce drugimpaired driving, including conducting research and developing tools, resources, and promising practices to assist states and local communities. To aid in evaluating efforts to address drugimpaired driving, NHTSA has developed the Drug-Impaired Driving Criminal Justice Evaluation Tool. The tool is designed to assist with identifying program strengths and opportunities for improvements. After asking two organizations to test the model to explore weaknesses and identify areas for refinement, NHTSA now wishes to learn from other practitioners what improvements and refinements could add value to the tool.



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Thank you!