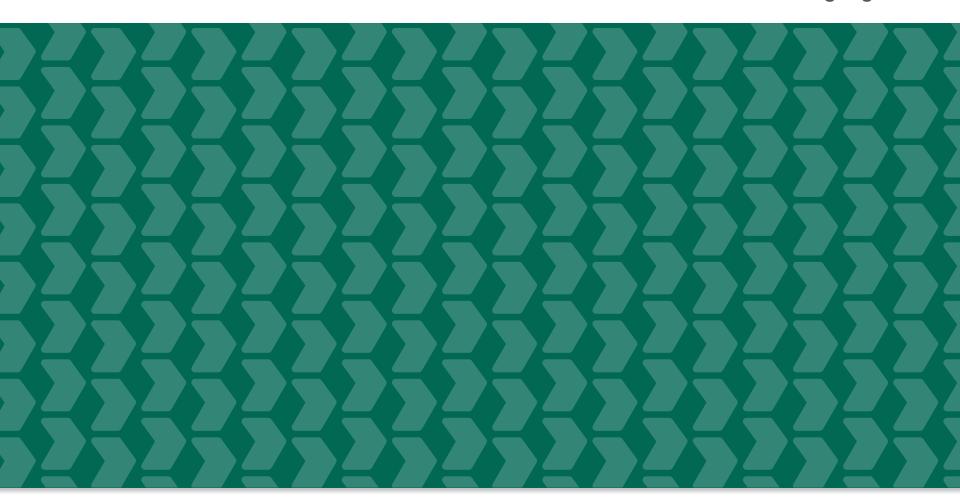


Assessing Impact: Update from the UK

Carolina Castillo carolina.castillo@dft.gsi.gov.uk



Moving Britain Ahead February 18



Overview

- Drug driving problem
- Legislation
- Publicity campaign
- Impact
- Key findings and issues



Drug Driving Problem

Traffic volumes and collisions where drug driving cited as contributory factor 2006-2015 for England and Wales

		Collisions with drug driving as a CF				
Year	Billions of vehicles miles (all vehicles)	Number of collisions	Number of fatalities	Number of serious injuries		
2006	284.1	582	57	236		
2007	286.5	633	66	232		
2008	283.6	638	53	257		
2009	280.8	585	47	233		
2010	276.4	526	39	199		
2011	277	588	49	216		
2012	275.7	564	29	222		
2013	276.7	554	32	225		
2014	283.4	643	51	249		
2015	288.7	818	60	326		

Source: Source: Table TRA0106 from https://www.gov.uk/government/statistical-data-sets/ tra01-traffic-by-road-class-and-region-miles and similar tables for previous years, STATS19, Risk Solutions

- Drug driving figures likely under-reported
- Males are overrepresented in drug driving collisions and self-reported drug driving
- Illicit drug use more common among 16-34 year olds



Drug Driving Problem

Self-reported drink and drug driving as a proportion of all drivers, driving at least once in last 12 months, 2009/10 onwards



 Cannabis is the most prevalent drug in use and in drug driving

Source: ONS Crime Survey for England and Wales, published by DfT September 2016 (n=15,500)



Drug Driving Legislation and Penalties

Road Traffic Act 1988 (RTA)

RTA Section 4	RTA Section 5A (introduced 2015)	Penalties
Driving, or being in charge, when under influence of drink or drugs.	Driving or being in charge of a motor vehicle with concentration of specified controlled drug above specified limit	 Minimum 1 year driving ban An unlimited fine Up to 6 months in prison A criminal record Driver's licence record held for 11 years



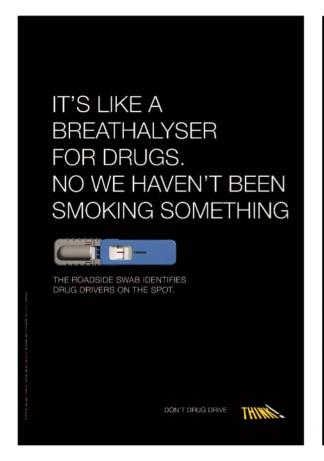
Specified Drugs and Limits Threshold limit in micrograms per litre of blood (µg/L)

Illegal drugs	Medical drugs					
Benzoylecogonine	50µg/L	Clonazepam	50µg/L			
Cocaine	10μg/L	Diazepam	550µg/L			
Delta-9-tetrahydrocannabinol (Cannabis)	2µg/L	Flunitrazepam	300µg/L			
Ketamine	20μg/L	Lorazepam	100µg/L			
Lysergic acid diethylamide (LSD)	1µg/L	Methadone	500µg/L			
Methylamphetamine	10µg/L	Morphine	80µg/L			
Methylenedioxymethamphetamine (MDMA	Oxazepam	300µg/L				
6-Monoacetylmorphine (Heroin)	5µg/L	Temazepam	1,000µg/L			
Amphetamine 250µg/L						



THINK! Campaign











Impact

Evaluation of the first year:

- Operation and enforcement
- Public attitudes and awareness
- Convictions and behaviour



First year findings

Operation and enforcement

- Increase in drug driving as a contributory factor in traffic collisions
- ▶ 54% of preliminary drug screening tests are positive for cannabis and/or cocaine
- Of the drivers screened: 94% male and 64% aged between 16-29 years
- For blood samples taken where the preliminary saliva test was positive for cannabis, 32% of blood tests were at or below the specified limit
- In approximately 1 in 8 cases, blood could not be taken following a positive saliva test

Public attitudes and awareness

- ▶ 67% of people believe that drug drivers are unlikely to be caught
- ▶ 48% of drivers and 32% of nondrivers aware of the section 5A drug driving offence

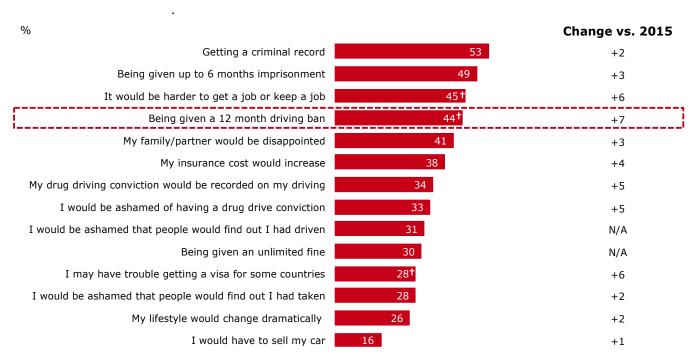
Convictions and behaviour

- Conviction rates for Section 5A offences were 98% in 2015; similar to drink driving
- Reduction in self-reported drug driving



Campaign insights

Practical and emotional fears of drug driving repercussions



- Overall, young male drivers are less willing to drug drive after the campaign
- Significant increases in people believing that, once stopped, drug drivers will be spotted and convicted
- The roadside swab was perceived as a deterrent

Base: All males 17-29 Post (2015: 499; 2016: 750) †denotes significant difference 2015 post to 2016 post

Source: Think! TNS BMRB 2016

Q11a. Imagine you were to be caught driving after taking recreational drugs, which of the following would you be most likely to worry about happening?



Key Findings and Issues







Monitor trends



- Reduce time between screening test and evidential sample
- Investigate alternative evidential methods
- Improve public awareness and perceptions



Thank You

Carolina.Castillo@dft.gsi.gov.uk