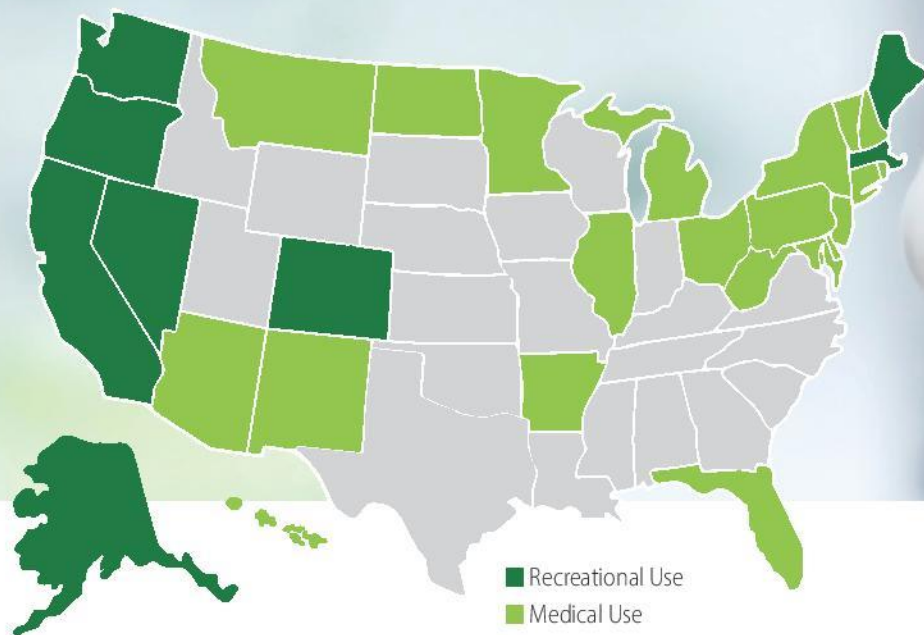


# Driving High

## Marijuana Webinar Series Part 3:

## Driving While High



May 1, 2018



# Driving High



Lauren Dutra, PhD  
Research Public Health Analyst,  
Center for Health Policy  
Science & Tobacco Research,  
RTI International



Jack Reed, MA  
Statistical Analyst,  
Office of Research and Statistics,  
Colorado Division of Criminal  
Justice,  
Department of Public Safety



Darrin Grondel, EdD  
Director,  
Washington Traffic Safety  
Commission

Lauren Dutra, PhD

Research Public Health  
Analyst,  
Center for Health Policy  
Science and Tobacco  
Research

RTI International



# Driving While “High”

Preliminary Results from RTI's National Survey

Lauren Dutra

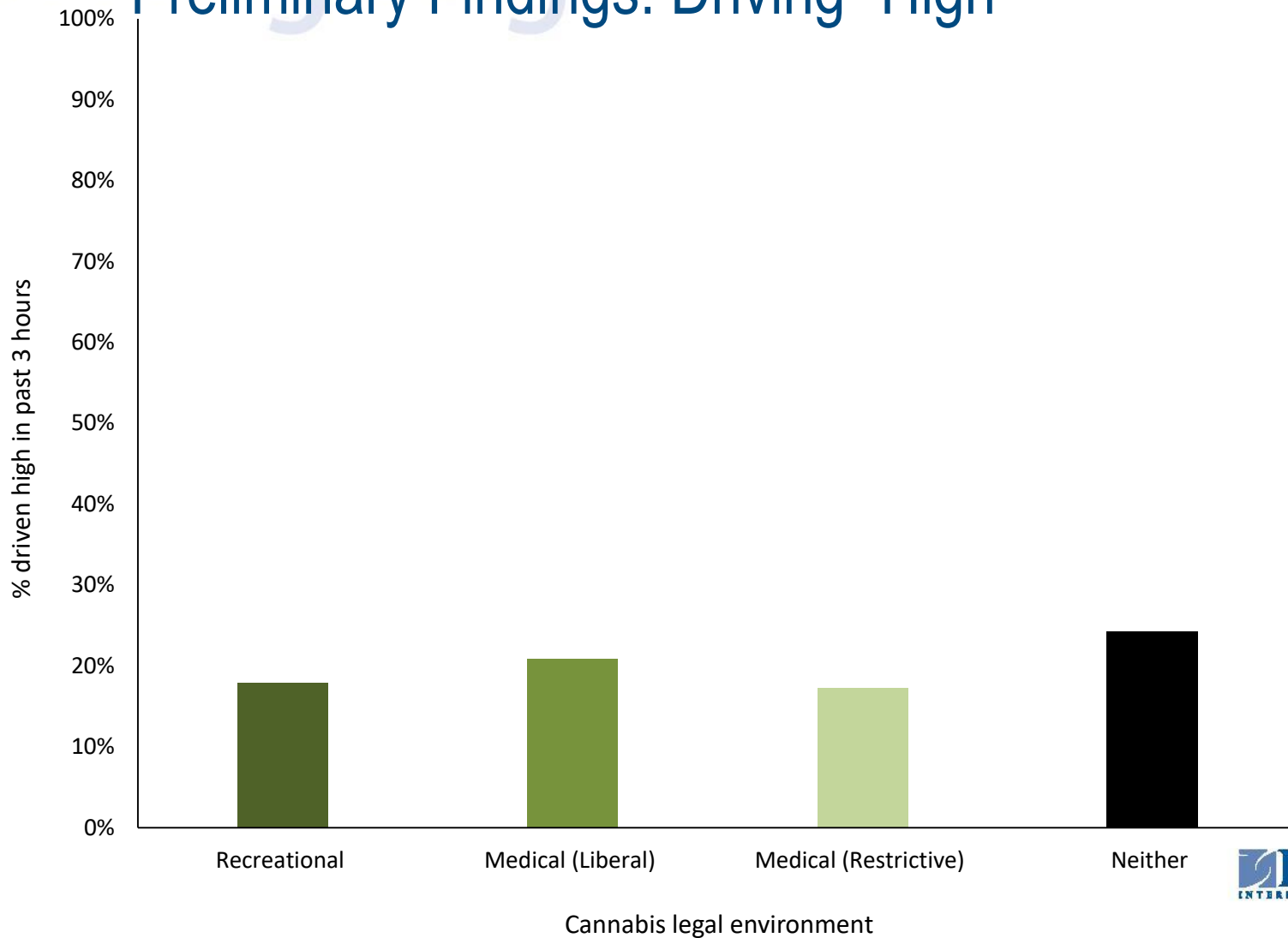
# Driving High

## About the Sample

- Address-based, mail to web and social media sampling
- 6,775 adults (18 or over) with complete data
- 2,524 current cannabis users
- Four legal environments
  - Recreational cannabis
  - Liberal medical cannabis
  - Restrictive medical cannabis
  - No legal cannabis

# Driving High

## Preliminary Findings: Driving “High”





# Driving High

## Driving While “High”

- Nationally, 21% of current cannabis users reported driving “high” in the past 30 days
- Unadjusted differences by legal environment not significant
- However, results may change when adjusted for covariates

# Driving High

## Poll Question #1





Jack Reed, MA

Statistical Analyst,  
Office of Research and  
Statistics

Colorado Division of  
Criminal Justice,  
Department of Public  
Safety

# Driving High

## DUI and Marijuana in Colorado: What Do We Know? What Do We Need?

Jack K. Reed

Colorado Department of Public Safety  
Division of Criminal Justice  
Office of Research & Statistics

May 2018





# Driving High

## Marijuana and Impaired Driving

- Smoking marijuana can:<sup>1</sup>
  - Reduce reaction time
  - Cause problems with road tracking and lane position variability
  - Decrease divided attention task performance
  - Impair cognitive performance
- National Highway Traffic Safety Administration showed a doubling of the crash risk for those who had recently used marijuana.<sup>2</sup>
  - BAC of 0.08 quadrupled the crash risk
  - BAC of 0.15 increased crash risk by 12 times (0.15 is the average BAC of a drunk driver in Colorado)
- Marijuana and alcohol used together have additive impairing effects<sup>3</sup>

1 Compton, R. (2017). *Marijuana-impaired driving: A report to Congress*. Washington, DC: National Highway Transportation Safety Administration. URL: <https://www.nhtsa.gov/sites/nhtsa.dot.gov/files/documents/812440-marijuana-impaired-driving-report-to-congress.pdf>

2 Compton, R. & Berning, A. (2015). *Drug and alcohol crash risk*. (Traffic Safety Facts Research Note). Washington, DC: National Highway Transportation Safety Administration. URL: [https://www.nhtsa.gov/staticfiles/nti/pdf/812117-Drug\\_and\\_Alcohol\\_Crash\\_Risk.pdf](https://www.nhtsa.gov/staticfiles/nti/pdf/812117-Drug_and_Alcohol_Crash_Risk.pdf)

3 Hartman, R. et al (2015). Cannabis effects on driving lateral control with and without alcohol. *Drug and Alcohol Dependence*, 154, 25-37.



# Driving High

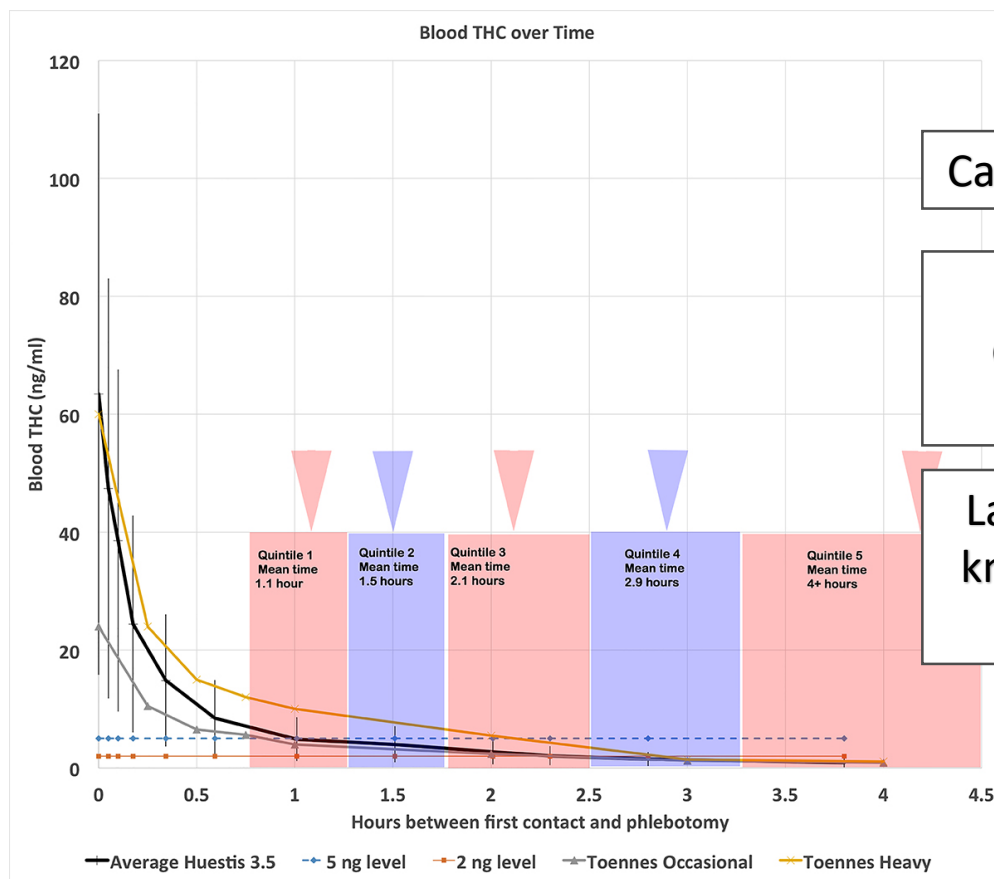
## Drug-Impaired Driving Detection

- Behavioral Determination
  - Standard Field Sobriety Testing (SFST)
  - Advanced Roadside Impaired Driving Enforcement (ARIDE)
  - Drug Recognition Experts (DRE)
- Toxicological Determination
  - Alcohol breath testing
  - Drug and alcohol blood testing
- Establishing levels for impairment
  - Delta 9 THC is primary psychoactive metabolite
  - Colorado established a 5 ng/ml in whole blood level as a “permissible inference” for impairment
  - Delta 9 THC levels degrade quickly



# Driving High

## Delta 9 THC in Blood



Can take over 2 hours to test

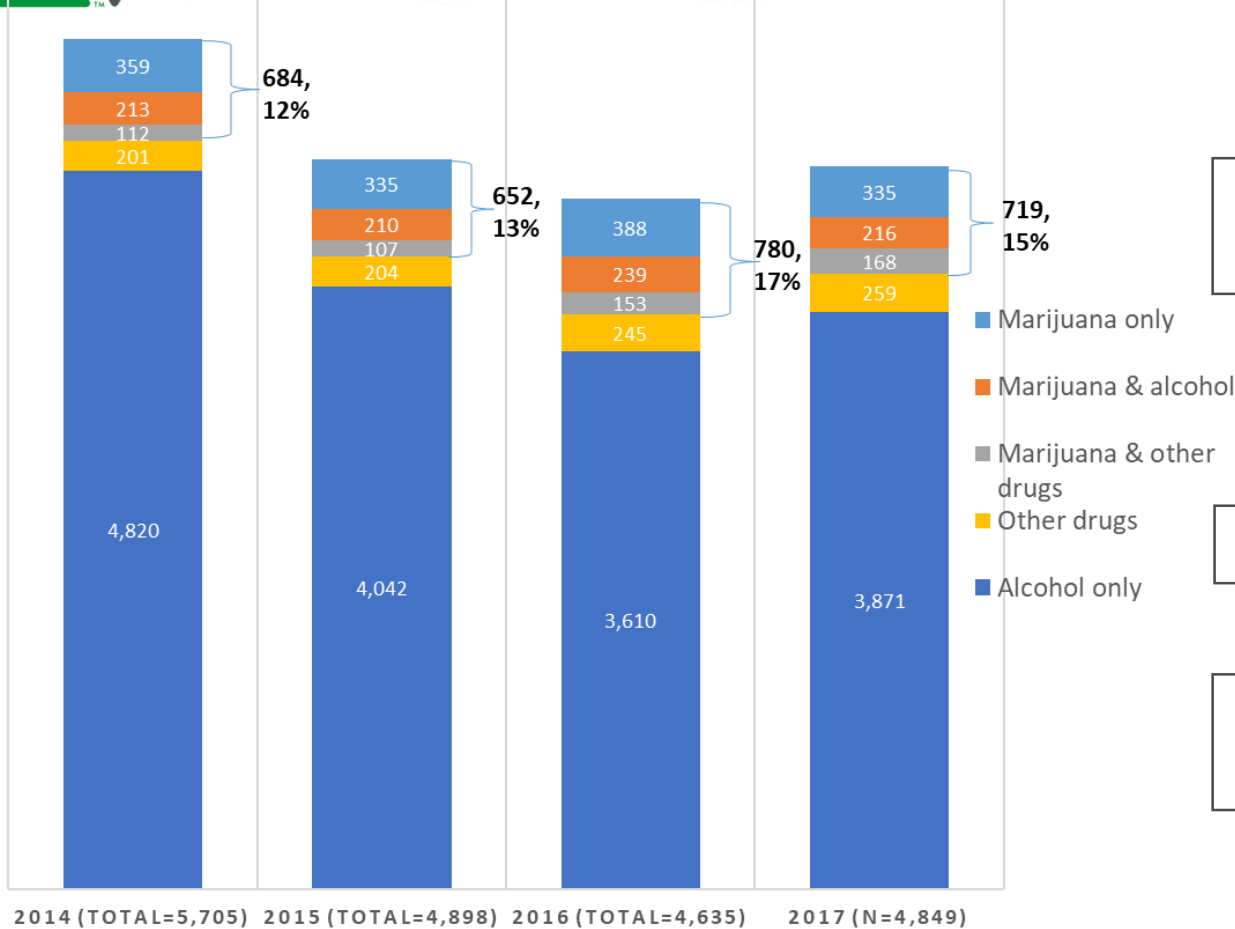
Behavioral assessments  
done at time of stop are  
critical

Law enforcement does not  
know your THC level by the  
roadside



# Driving High

## DUI Citations: Colorado State Patrol



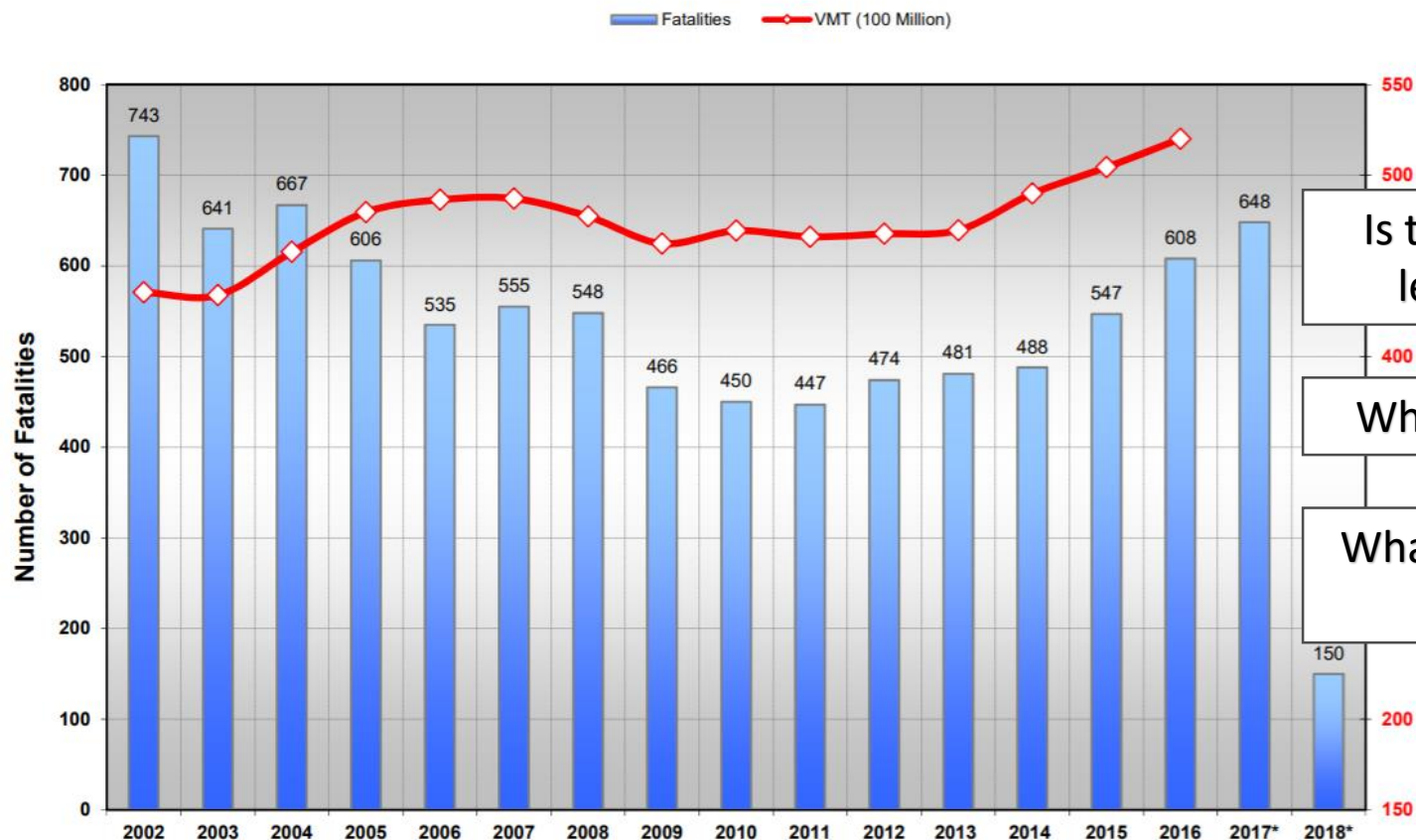
How do they determine impairment?

What kind of training?

Why not base this on toxicology?



# Fatalities on Colorado Roadways



Is this all because of legal marijuana?

What about alcohol?

What about distracted driving?

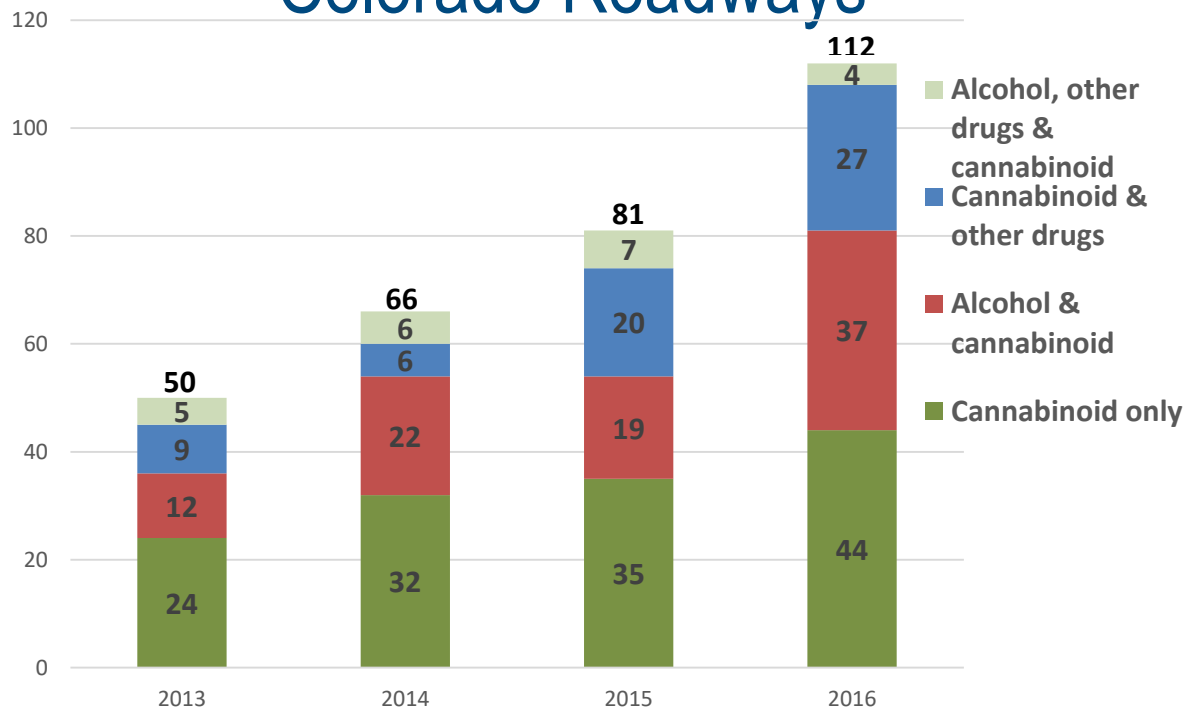
\* Note: Data is preliminary as of release of this Report

Source of Data: Colorado DOT & "As Reported" to NHTSA by FARS





# Fatalities with Cannabinoid-Positive Drivers on Colorado Roadways



Are we testing more people?

Does this imply impairment?

In 2016, 39% involve only a cannabinoid

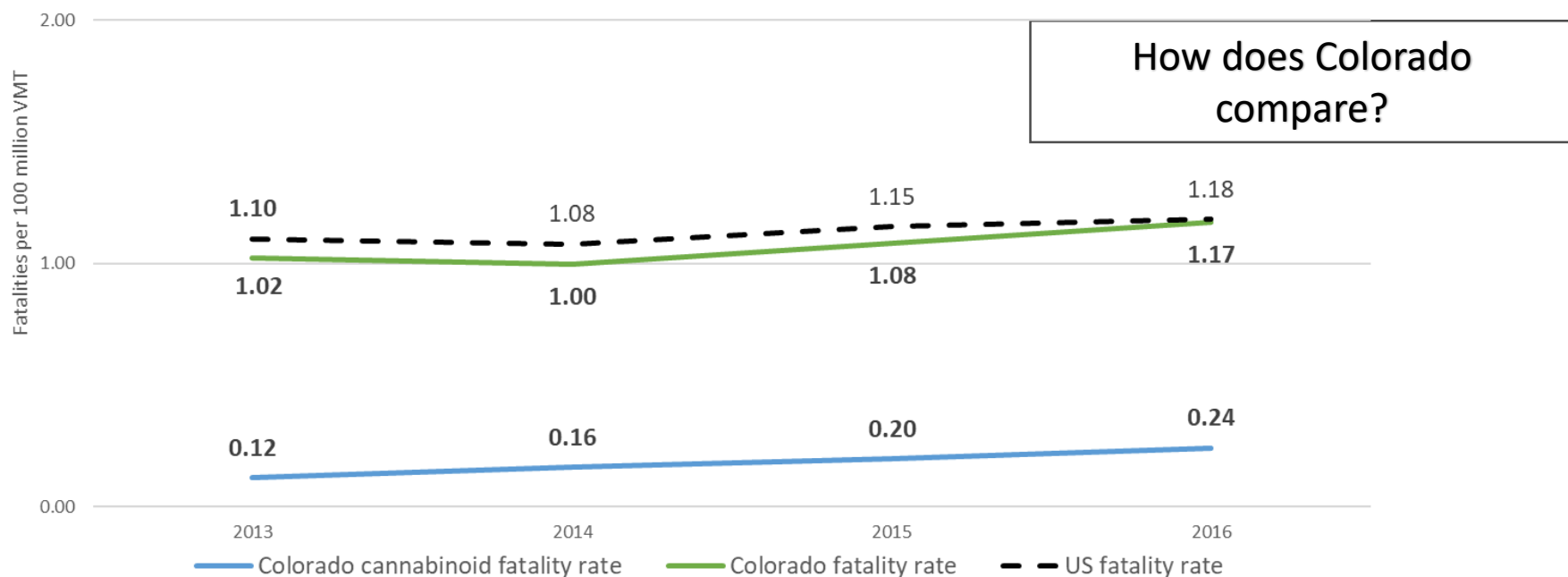
How many with Delta 9 over 5 ng/ml?  
51 fatalities → 8% of total

Note: A positive test for cannabinoids may be the result of active THC or one of its inactive metabolites and does not necessarily indicate impairment.

Source: Data provided by Colorado Department of Transportation, 6/27/2017.

# Driving High

## Fatality Rates on Colorado and US Roadways, 2013–2016

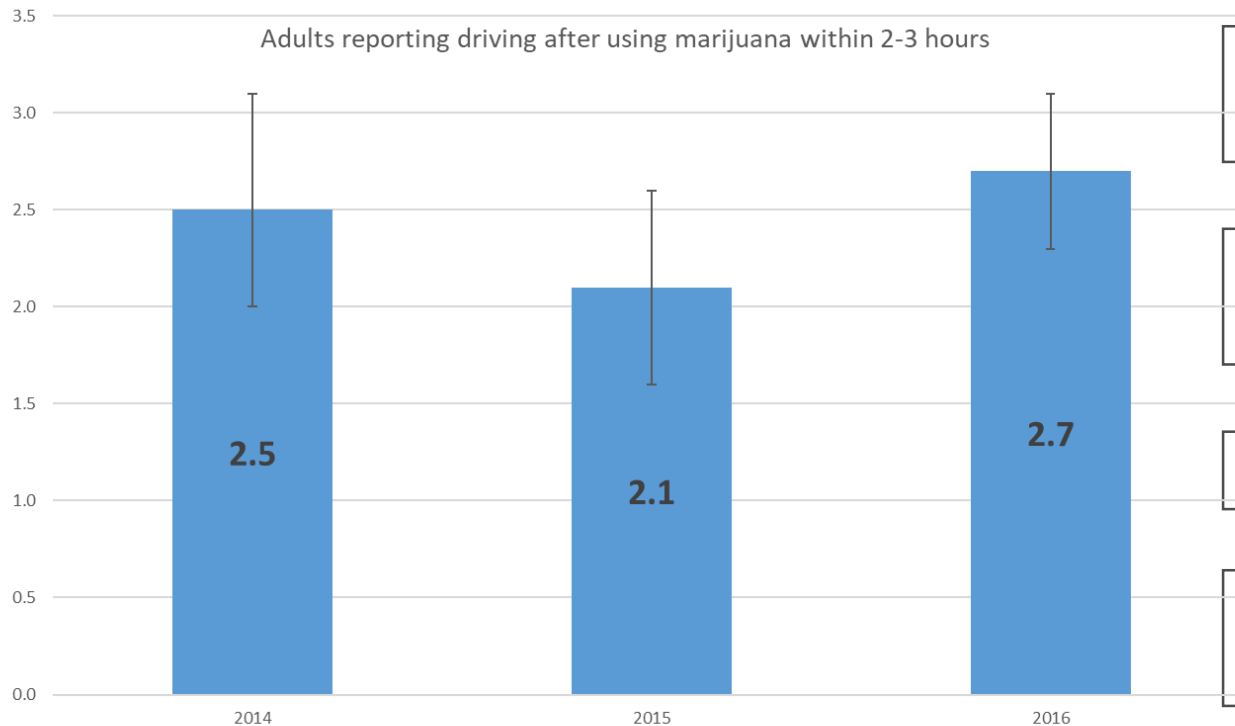


Note: A positive test for cannabinoids may be the result of active THC or one of its inactive metabolites and does not necessarily indicate impairment.  
Source: Data provided by Colorado Department of Transportation, 9/22/2017; National Highway Transportation Safety Administration, *2016 Quick Facts*; *2015 Quick Facts*.



# Driving High

## How many people are using and driving?



Colorado pop.:  
4.3 million adults

Are they *really*  
impaired?

Why 2–3 hours?

Why not just ask if they  
“drove high”?

Note: Comparing across years, there were no statistical differences from 2014 to 2016.

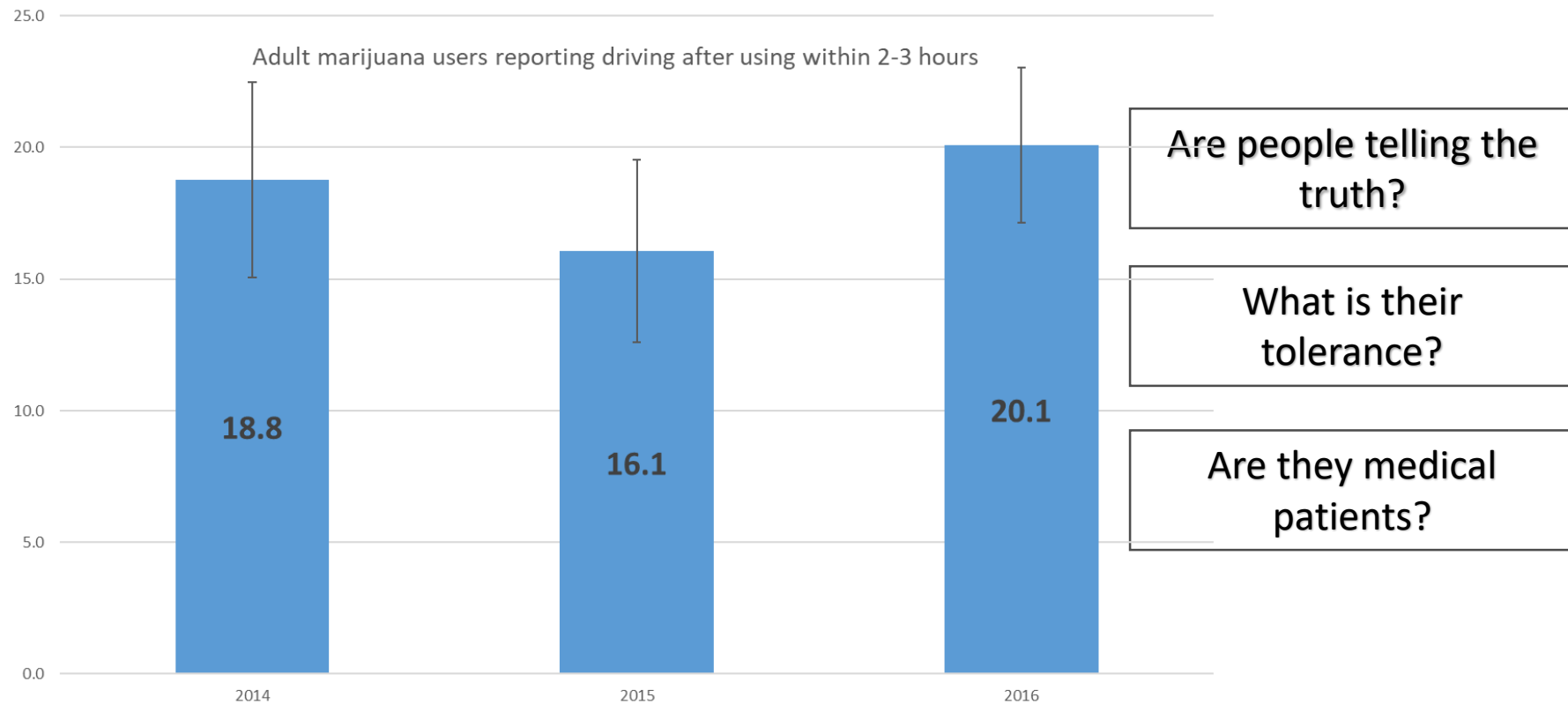
Source: Colorado Department of Public Health and Environment. Behavioral Risk Factor Surveillance System.

URL: <https://www.colorado.gov/pacific/cdphe/adult-marijuana-use-trends>



# Driving High

## How many users are driving after using?



Note: Comparing across years, there were no statistical differences from 2014 to 2016.

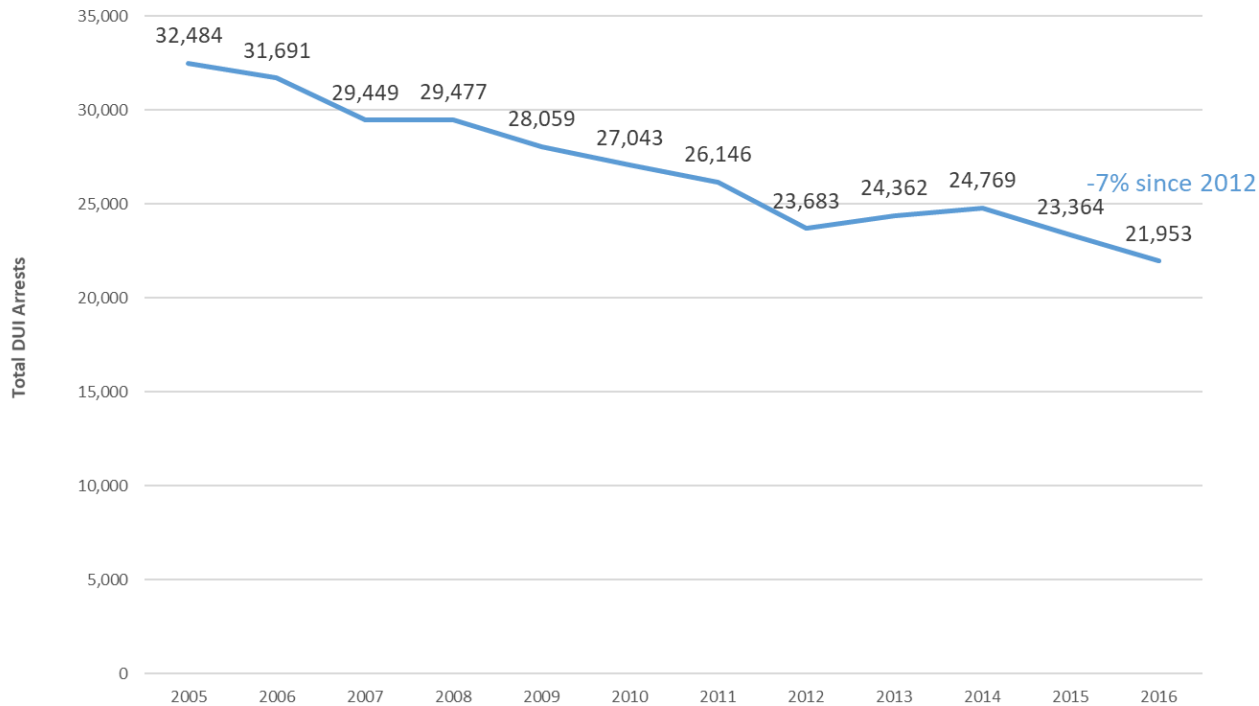
Source: Colorado Department of Public Health and Environment. Behavioral Risk Factor Surveillance System.

URL: <https://www.colorado.gov/pacific/cdphe/adult-marijuana-use-trends>



# DUI Arrests in Colorado

Are DUIs skyrocketing?



Source: Colorado Bureau of Investigation, *Crime in Colorado*, Federal Bureau of Investigation, *Crime in the United State*; Colorado Department of Local Affairs, Office of Demography.  
Prepared by Colorado Division of Criminal Justice, 7/29/2017.



# Driving High

## Is Colorado working on this? It's been 4 years!

### Toxicology

Blood tests  
~12,300

Breath tests  
~9,300

Refuse tests  
???

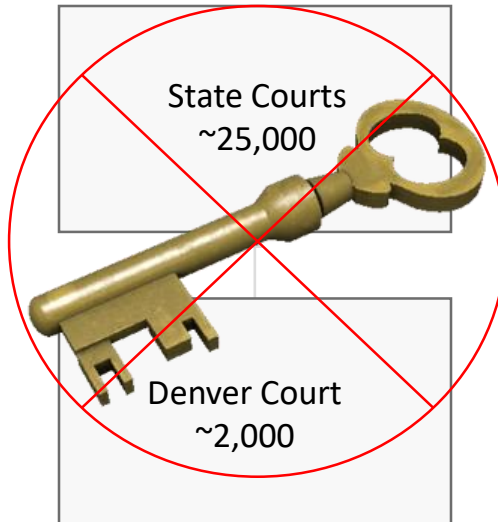
### Court Filings

State Courts  
~25,000

Denver Court  
~2,000

### Pre-sentence assessment

Probation  
Department  
~22,000



# Driving High



Contact:

Jack Reed

Colorado Department of Public Safety

[Jack.reed@state.co.us](mailto:Jack.reed@state.co.us)





# Driving High

## Poll Question #2

Darrin T. Grondel, EdD

Director,

Washington Traffic  
Safety Commission



# DRIVING HIGH – WASHINGTON PERSPECTIVE



**Darrin T. Grondel**  
**Director**

**Washington Traffic Safety Commission**

**May 1, 2018**

**Webinar**

**Disclaimer** – presentation is for historical and instructional purposes and is not intended to be pro or con on the issues.



WASHINGTON  
**Traffic Safety**  
COMMISSION

# Driving High

## Collaboration and Research Are Essential

**Drugged driving** is more complicated than drunk driving.

	DRUGGED DRIVING	DRUNK DRIVING
Number:	Hundreds of drugs	Alcohol is alcohol
Data on Use by Drivers & Crashes:	Limited	Abundant
Use by Drivers:	Increasing	Decreasing
Impairment:	Varies by type	Well-documented
Crash Risk:	Varies by type	Precise
Beliefs & Attitudes:	No strong attitudes – public indifferent	Socially unacceptable



RESPONSIBILITY.ORG

NHTSA National roadside survey: ~1–4 drivers tested positive for drugs  
22.4% daytime weekday drivers and 22.5% weekend night time drivers  
(20% increase from 2007).

Percentage of drivers with marijuana in their system increased 50%  
(8.6% in 2007 to 12.6% in 2013–2014).



# Driving High

## Considerations



- Creation of an Impaired Driving Task Force or Working Group comprised of various disciplines and expertise.
  - Develop baseline data (if possible) with current data available
    - Crash—arrest data, public perceptions/attitudes on driving, healthy youth surveys, and so on.
  - Assess
    - Current DUI and DUID laws—definitions, laws, gap analysis
    - Medical and Recreational—What is truly medical? What conditions? What is the dosage? How managed? Who regulates?
    - Judicial—Review current laws, sanctions, and training—comparison with legalized states and countries

# Driving High

## Considerations

- Officers need to consider the totality of the circumstances and not get locked in just looking for cannabis—see the whole picture
- Develop and implement an educational campaign with materials in multiple languages and relevant to various cultures
- Evaluate data collection (e.g., traffic crash data, toxicology, poison control, hospital)
  - What information is collected? How is it collected? Who has access for analysis?
- Creation of a regulatory agency
  - Full enforcement authority
  - Track from seed to sale
  - Packaging requirements with THC level, not attractive to children
  - Rules and regulations



**TARGET  
ZERO**

**RTI**  
INTERNATIONAL

# Driving High

## Considerations



- Seek dedicated funding from revenues marijuana taxes for education and enforcement
- What Driving Under the Influence of Drugs (DUID) laws will be considered?:
  - Zero Tolerance—Illegal to drive with **any amount** of specified drugs in the body
  - Per se: Illegal to drive with amounts of specified drugs in the body exceeding set limits (e.g., 5 ng Delta 9 THC or carboxy)
- Law Enforcement—SFSTS, ARIDE, DRE
  - How is DRE viewed for impaired driving? Is this a priority for prosecutors for DUI cases? ARIDE
- Training programs for law enforcement, prosecutors, judges
- Electronic search warrants: <https://www.responsibility.org/end-impaired-driving/initiatives/e-warrants/>
- Drugged driving is not just a nighttime or weekend issue but is prevalent day and night
  - Emphasis patrol times, media messaging, officer perspective for daytime crashes



# Driving High

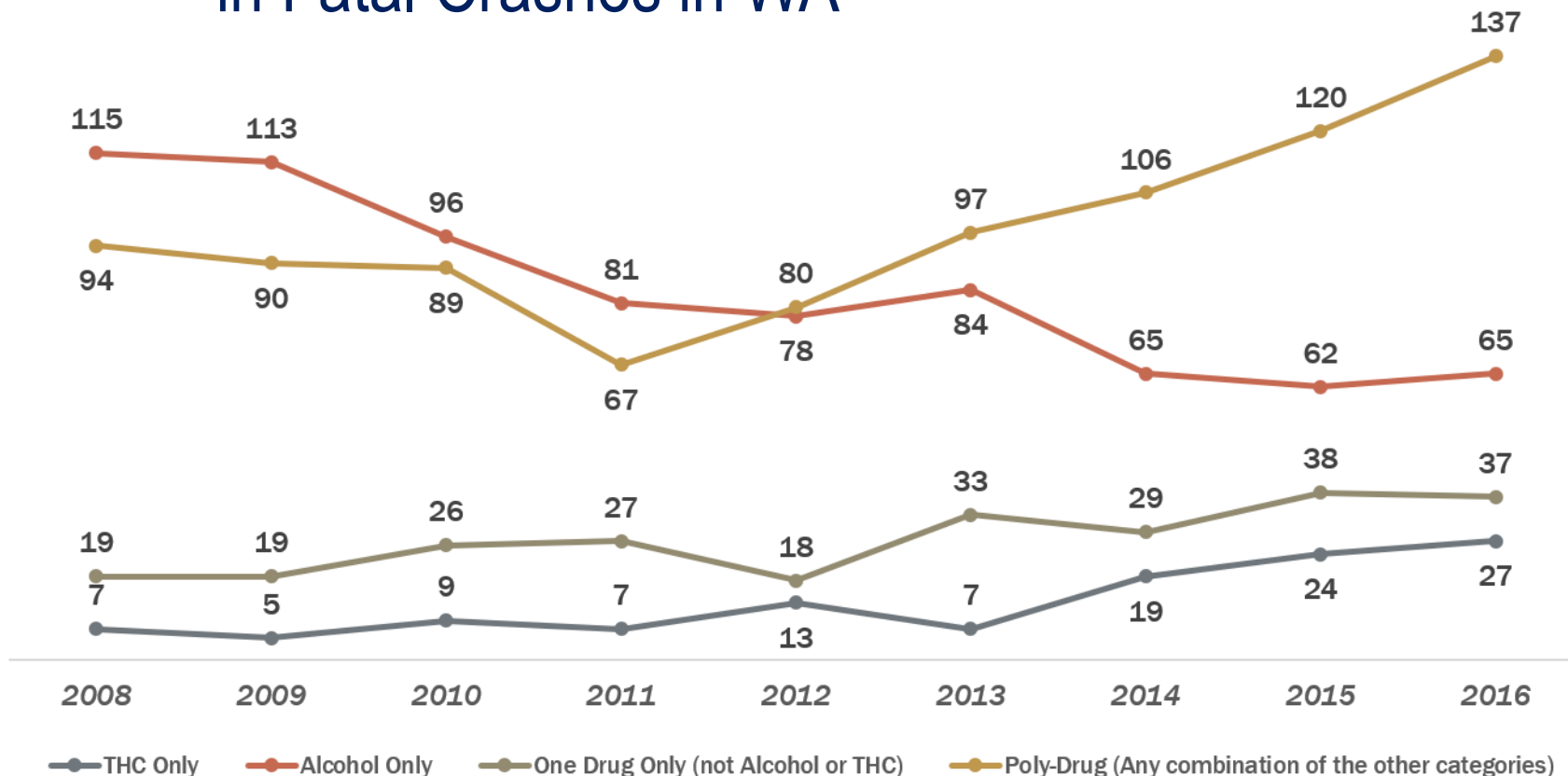
## Considerations



- Chemical Evidence—oral swabs, blood, or urine
  - Phlebotomy for law enforcement officers—paradigm shift
- Toxicology evidence collection and analysis—How will it be collected? What drugs are collected? Screening levels, sensitivity, or tolerances consistent across jurisdictions? How will it be used? Reported?
- Do all fatally injured drivers have a toxicology examination?
- Do all surviving drivers get assessed on-scene by a DRE or if transported? Even if no alcohol is present or detected?
- Green labs similar to “Wet Labs”—provide realistic training and experience for officers to conduct SFST and to better screen the occasional or chronic user
- Commercial Vehicle Carriers—international travel/provincial
  - Safety Manager training for drug and alcohol recognition
  - Drug testing—the FMCSA has noted the highest drug failure rate in 7 years

# Driving High

## Rising Frequency of Poly-Drug Drivers in Fatal Crashes in WA



# Driving High

## Marijuana and Alcohol Use in Washington State Report

- Among all drivers involved in fatal crashes 2008–2016, **one in three** were positive for alcohol and/or drugs. This number is likely under-reported because not all drivers in fatal crashes are actually tested for alcohol and drugs (60 percent of fatal crashes involved drivers who were tested for alcohol and drugs 2008–2016).
- Among drivers in fatal crashes 2008–2016 that tested positive for alcohol or drugs, **44 percent** tested positive for two or more substances (poly-drug drivers). The most common substance in poly-drug drivers is alcohol, followed by **THC**. Alcohol and THC combined are the most common poly-drug combination.
- For the first time in 2012, poly-drug drivers became the most prevalent type of impaired drivers involved in fatal crashes. Since 2012, the number of poly-drug drivers involved in fatal crashes has increased an average of 15 percent every year.

# Driving High

## Signs and Symptoms of Marijuana

- Relaxation
- Euphoria
- Relaxed inhibitions
- Disorientation
- Altered time and distance perception
- Lack of concentration
- Impaired memory and comprehension
- Jumbled thought formation
- Drowsiness
- Mood changes, including panic and paranoia with high doses
- Heightened senses
- Body tremors (Major muscle groups: quads, glutes, and abs)
- Eyelid tremors
- Red, bloodshot eyes
- Possible GVM or green coating on tongue
- Dilated pupils

# Driving High

## DUI Detection and SFST



- **DUI Detection and Standardized Field Sobriety Test (SFST)**
  - Provides an officer with methods to detect an impaired driver and describe the associated signs and symptoms of impairment. Tests an officer's ability to properly administer roadside sobriety tests (horizontal gaze nystagmus, walk and turn, and one leg stand) and identify the associated clues.
  - This course does not grant a certification but must be successfully completed through written and practical testing.
  - 24 hours (3 days)
  - Prerequisites:
    - Valid breath test operator permit
  - Free
- **DUI Detection and Standardized Field Sobriety Test (SFST) Refresher**
  - Recommended to attend on a 3-year cycle
  - 4 hours
  - Prerequisites:
    - Valid breath test operator permit
    - DUI Detection and Standardized Field Sobriety Test (SFST)
  - Free



# Advanced Roadside Impaired Driving Enforcement

- Intended to bridge the gap between SFST and DRE training by providing officers with general knowledge related to drug impairment and by promoting the use of DREs. One of the more significant aspects of ARIDE is its review and required student demonstration of the SFST proficiency requirements. This course will train law enforcement officers to observe, identify, and articulate the signs of impairment related to drugs, alcohol, or a combination of both.
- 16 hours (2 days)
- Prerequisites:
  - DUI Detection and SFST
  - Valid breath test operator permit
- Free
- Online ARIDE



# Driving High

## Drug Recognition Expert

- Training to recognize impairment in drivers under the influence of drugs other than, or in addition to, alcohol. DREs utilize a 12-step evaluation process in order to render an opinion of impairment by one or more of the seven drug categories.
- 80 hours classroom
- 40 hours of field certifications
  - Hands-on supervised evaluation of individuals under the influence of drugs.
- 1 day for a final knowledge exam
- Prerequisites:
  - DUI Detection and SFST
  - Valid breath test operator permit
- Free





# Driving High

## Roadside Strategies



- Electronic DUI packet
- Electronic search warrants
- Forensic phlebotomy
- Lakewood PD/Pierce County



WASHINGTON STATE  
DUI ARREST REPORT  
REPORT OF BREATH / BLOOD TEST FOR ALCOHOL AND/OR THC OR  
REFUSAL TO SUBMIT TO BREATH TEST FOR ALCOHOL

SUBJECT'S NAME (LAST, FIRST, MI) \_\_\_\_\_ DATE / TIME OF ARREST \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_ CITY / STATE / ZIP CODE \_\_\_\_\_  
DRIVER'S LICENSE NUMBER \_\_\_\_\_ COL ENDORSED? CHECK IF YES ☐ STATE \_\_\_\_\_ COUNTY OF ARREST \_\_\_\_\_ CASE / CITATION NUMBER \_\_\_\_\_

BAC Readings - DataMaster 1<sup>st</sup> Sample \_\_\_\_\_ 2<sup>nd</sup> Sample \_\_\_\_\_ Refused Test \_\_\_\_\_  
BAC Readings - Draeger 1<sup>st</sup> Sample (R) \_\_\_\_\_ Blood Alcohol \_\_\_\_\_  
1<sup>st</sup> Sample (EC) \_\_\_\_\_ 2<sup>nd</sup> Sample (EC) \_\_\_\_\_ Blood THC \_\_\_\_\_

The subject was lawfully arrested. At that time, there were reasonable grounds to believe that the arrested person had been driving or was in actual physical control of a motor vehicle within this state while under the influence of intoxicating liquor or drugs, or both, or was under the age of twenty-one years and had been driving or was in actual physical control of a motor vehicle while having an alcohol or THC concentration in violation of RCW 46.61.503.

After receipt of any applicable warnings required, the person refused to submit to a test of his or her breath, or a test was administered and the results indicated that the alcohol concentration of the person's breath or blood was 0.08 or more, or the THC concentration of the person's blood was 5.00 or more, or the person is age twenty-one or over, or that the alcohol concentration of the person's breath or blood was 0.02 or more, or the THC concentration of the person's blood was above 0.02, or the person is under the age of twenty-one.

☐ Driver's Hearing Request information was given to the arrested person.

Notice of Right to Hearing: I have been given written notice of my right to a hearing, including the steps required to obtain a hearing, and understand that the notice of suspension, revocation, or denial of license will be mailed to the address of record on file with the Department of Licensing.

SIGNATURE OF DRIVER \_\_\_\_\_ DATE \_\_\_\_\_

☐ Complete this box ONLY if the arrested person was driving a commercial motor vehicle as defined in Chapter 48.25 RCW at the time of the incident.

There are reasonable grounds to believe that the driver was driving a commercial motor vehicle while having alcohol, marijuana, or any drug in his or her system or while under the influence of alcohol, marijuana, or any drug. The driver was informed that refusing the breath test would result in disqualification from operating a commercial motor vehicle under RCW 46.25.040. A breath test was administered and the result indicated an alcohol concentration of 0.04 or more OR the person refused the breath test OR a blood test was administered pursuant to a search warrant, a valid waiver of the warrant requirement, when exigent circumstances exist, or under any other authority of law AND the blood test indicated an alcohol concentration of 0.04 or more or any measurable amount of THC concentration.

VEH YEAR MAKE MODEL LICENSE PLATE NUMBER STATE HAZARDOUS MATERIAL? ☐ YES ☐ NO

NOTES: If applicable, sign and date this page after toxicology report is received.

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing and the accompanying reports/copies of documents and the information contained therein are true, correct, and accurate. (RCW 9A.72.085.)

LAW ENFORCEMENT AGENCY (OR NO. 3 RPT) OFFICER'S SIGNATURE \_\_\_\_\_ DATE SIGNED \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_ PRINTED NAME OF OFFICER \_\_\_\_\_ BADGE NUMBER \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PLACE SIGNED (city / county / state) \_\_\_\_\_ CONTACT PHONE NUMBER FOR HEARING (include area code) \_\_\_\_\_

OFFICER'S E-MAIL ADDRESS \_\_\_\_\_ Department of Licensing  
Driver Records  
SvornReports@DOL.WA.GOV  
Fax: (360) 570-7026

OFFICERS: Fax or e-mail complete report, test result document, and supplemental reports to: \_\_\_\_\_ Number of pages \_\_\_\_\_

USE THIS PAGE AS COVER SHEET

STATE OF WASHINGTON COUNTY \_\_\_\_\_ COURT \_\_\_\_\_

STATE OF WASHINGTON, \_\_\_\_\_  
Plaintiff,  
v. \_\_\_\_\_  
Defendant.

NO.  
SEARCH WARRANT FOR EVIDENCE OF A CRIME, TO WIT:

☐ VEHICULAR HOMICIDE, RCW 46.61.520  
☐ VEHICULAR ASSAULT, RCW 46.61.522  
☐ DRIVING WHILE UNDER THE INFLUENCE, RCW 46.61.502  
☐ DRIVER UNDER TWENTY-ONE CONSUMING ALCOHOL OR MARIJUANA, RCW 46.61.503  
☐ PHYSICAL CONTROL OF VEHICLE WHILE UNDER THE INFLUENCE, RCW 46.61.504  
☐

TO ANY PEACE OFFICER IN THE STATE OF WASHINGTON:

WHEREAS, upon the sworn complaint heretofore made and filed and/or the testimonial evidence given in the above-entitled Court and incorporated herein by this reference, it appears to the undersigned Judge of the above-entitled Court that there is probable cause to believe that, evidence of intoxicating liquor, marijuana, or any drug as defined by RCW 46.61.540, in violation of the laws of the State of Washington, evidence of the crime(s) of:

- ☐ Vehicular Homicide, RCW 46.61.520  
☐ Reckless Manner ☐ Under the Influence of Liquor or Drugs  
☐ Disregard for the Safety of Others



RTI  
INTERNATIONAL

# Driving High

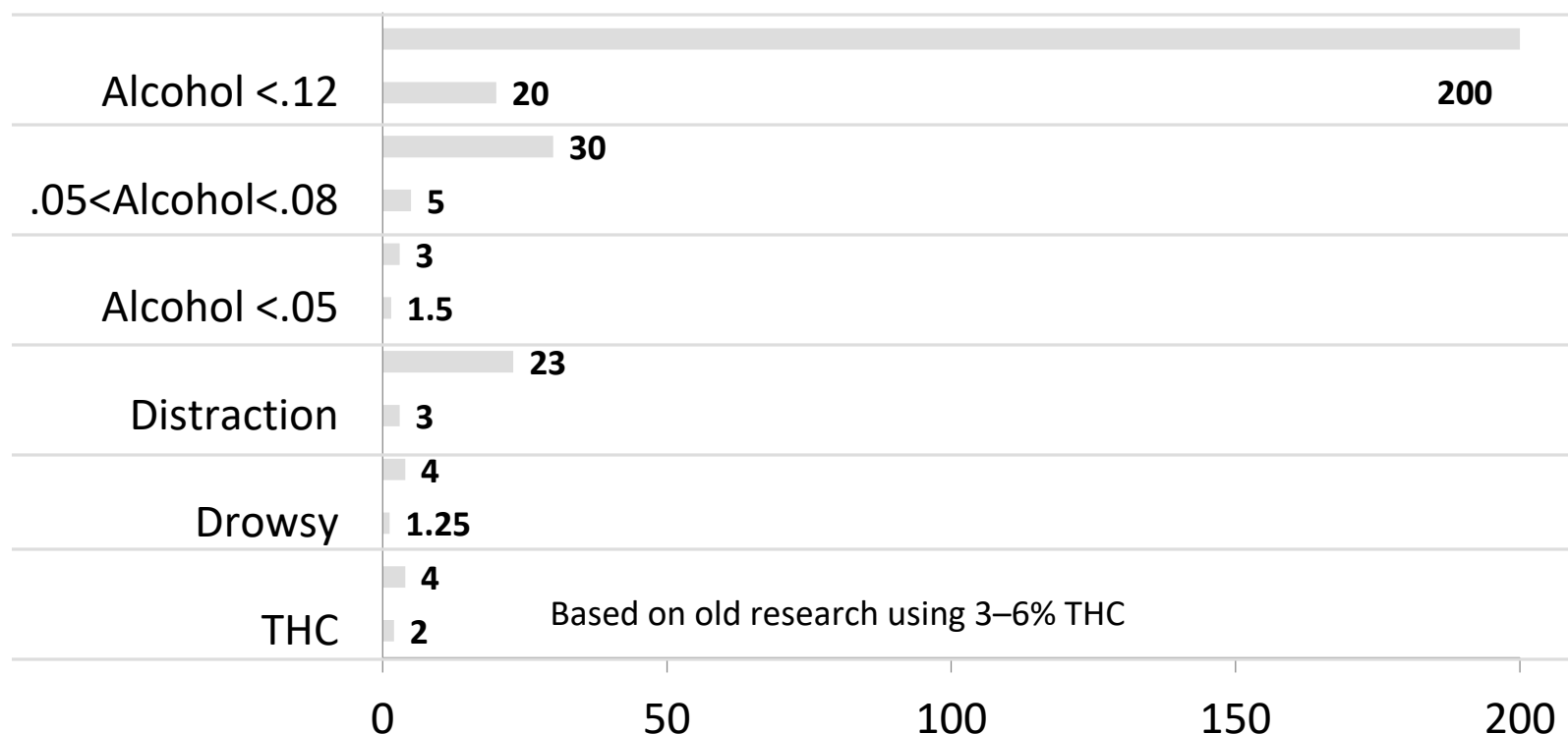
## Law Enforcement Phlebotomy: A New Tool That Brings Challenges (and Benefits) for Prosecutors

- Speeds up evidence collection in the field
- Eliminates need to go to the hospital for a blood draw
- Removes the potential for hospital staff being unwilling to assist law enforcement with a legal blood draw



# Driving High

## Does Marijuana Use Increase Crash Risk?



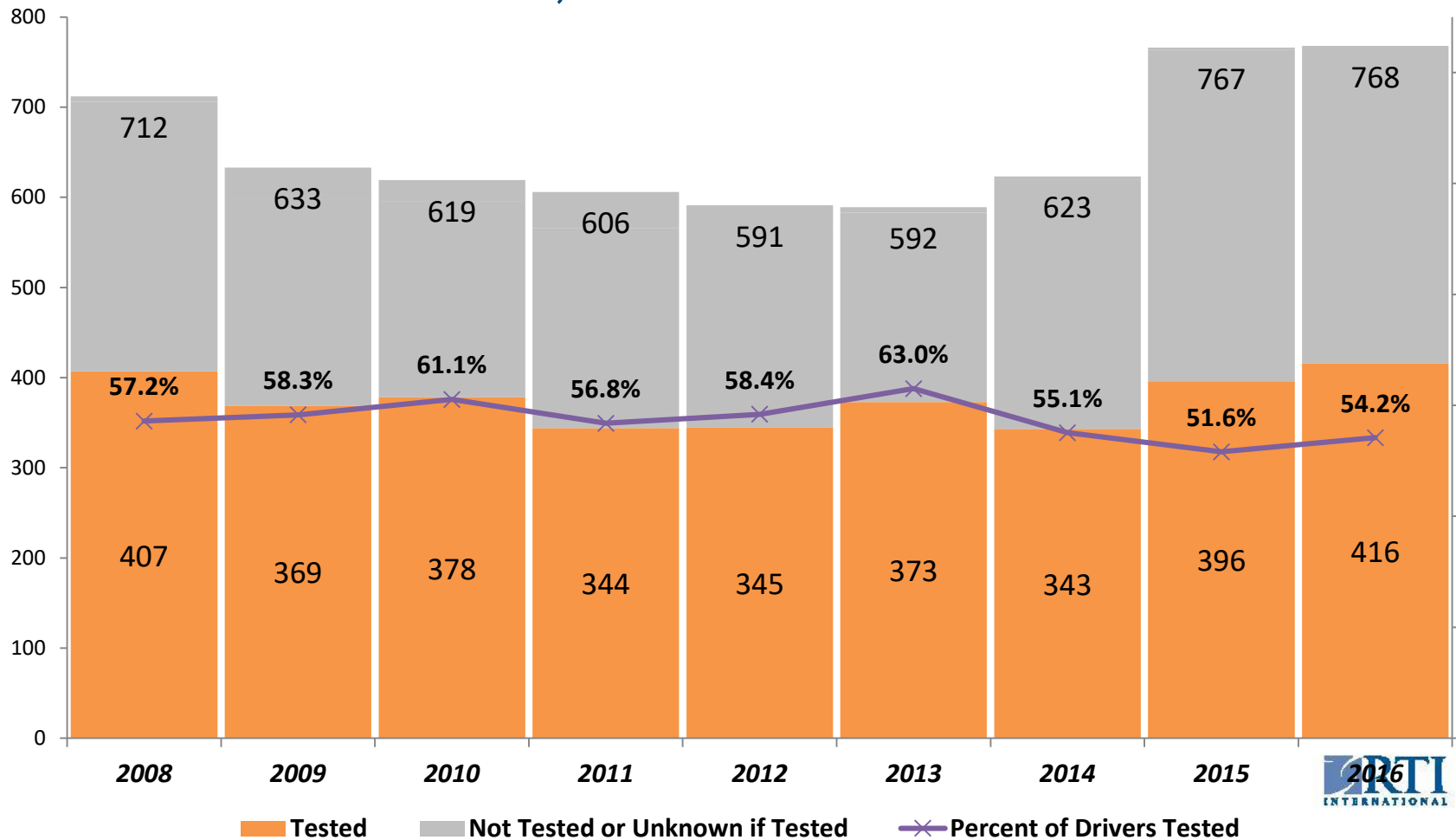
Review of literature revealed varying crash risk and difficulty with THC

# Most Cannabinoid-Positive Drivers Also Tested Positive for Drugs/Alcohol

TEST STATUS	Driver Category 1	Sample	Driver Category 2	Sample	Driver Category 3	Sample
Not Tested	Not Tested	2,360	Not Tested	2,360	Not Tested	2,360
Tested - Negative	No Drugs, No Alcohol	1,288	No Drugs, No Alcohol	1,288	No Drugs, No Alcohol	1,288
<b>Tested – Positive</b> (2,073)  <b>Excluding Alcohol Test Only (179),            Drug Test Only (7), Tested with            Unknown Results (3)</b>	Alcohol Only	671	Alcohol Only <.079	96	Alcohol Only <.079	96
			Alcohol Only ≥.08	575	Alcohol Only ≥.08	575
	Cannabinoids Only	188	THC Only	118	THC Only	118
			Carboxy-THC Only	70	Carboxy-THC Only	70
	Cannabinoids + Alcohol Only	275	THC + Alcohol	187	THC + Alcohol <.079	25
					THC + Alcohol ≥.08	162
			Carboxy-THC + Alcohol	88	Carboxy-THC + Alcohol	88
	Cannabinoids + Drugs + Alcohol	103	THC + Drugs + Alcohol	66	THC + Drugs + Alcohol <.079	14
					THC + Drugs + Alcohol ≥.08	52
			Carboxy-THC + Drugs + Alcohol	37	Carboxy-THC + Drugs + Alcohol	37
	Cannabinoids + Drugs Only	132	THC + Drugs	76	THC + Drugs	76
			Carboxy-THC + Drugs	56	Carboxy-THC + Drugs	56
	Other Drugs Only	502	Other Drugs Only	502	Other Drugs Only	502
	Other Drugs + Alcohol Only	202	Other Drugs + Alcohol Only	202	Other Drugs + Alcohol Only	202
Total Driver Sample, 2008-2016						5,910

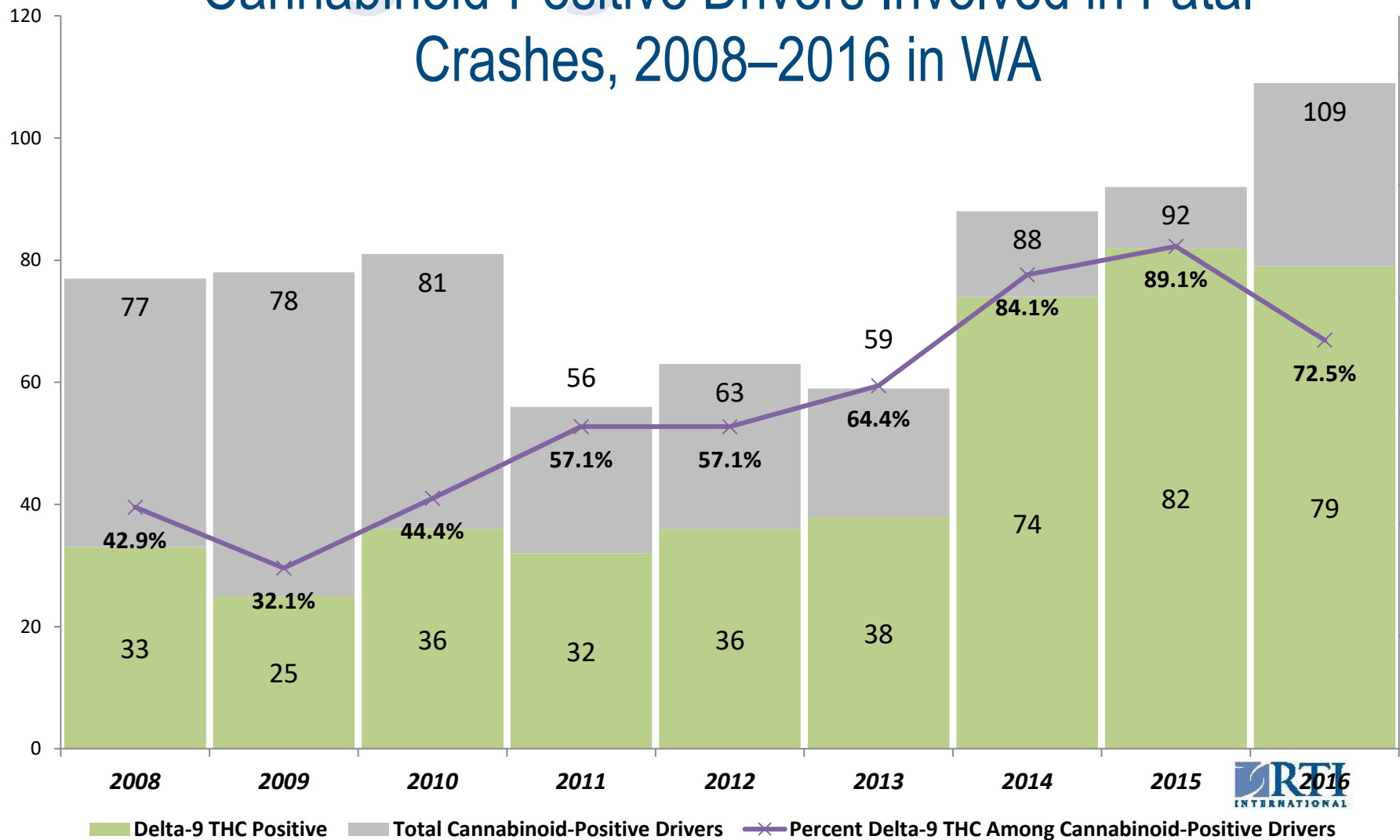
# Driving High

## WA Drug Testing Among Drivers Involved in Fatal Crashes, 2008–2016



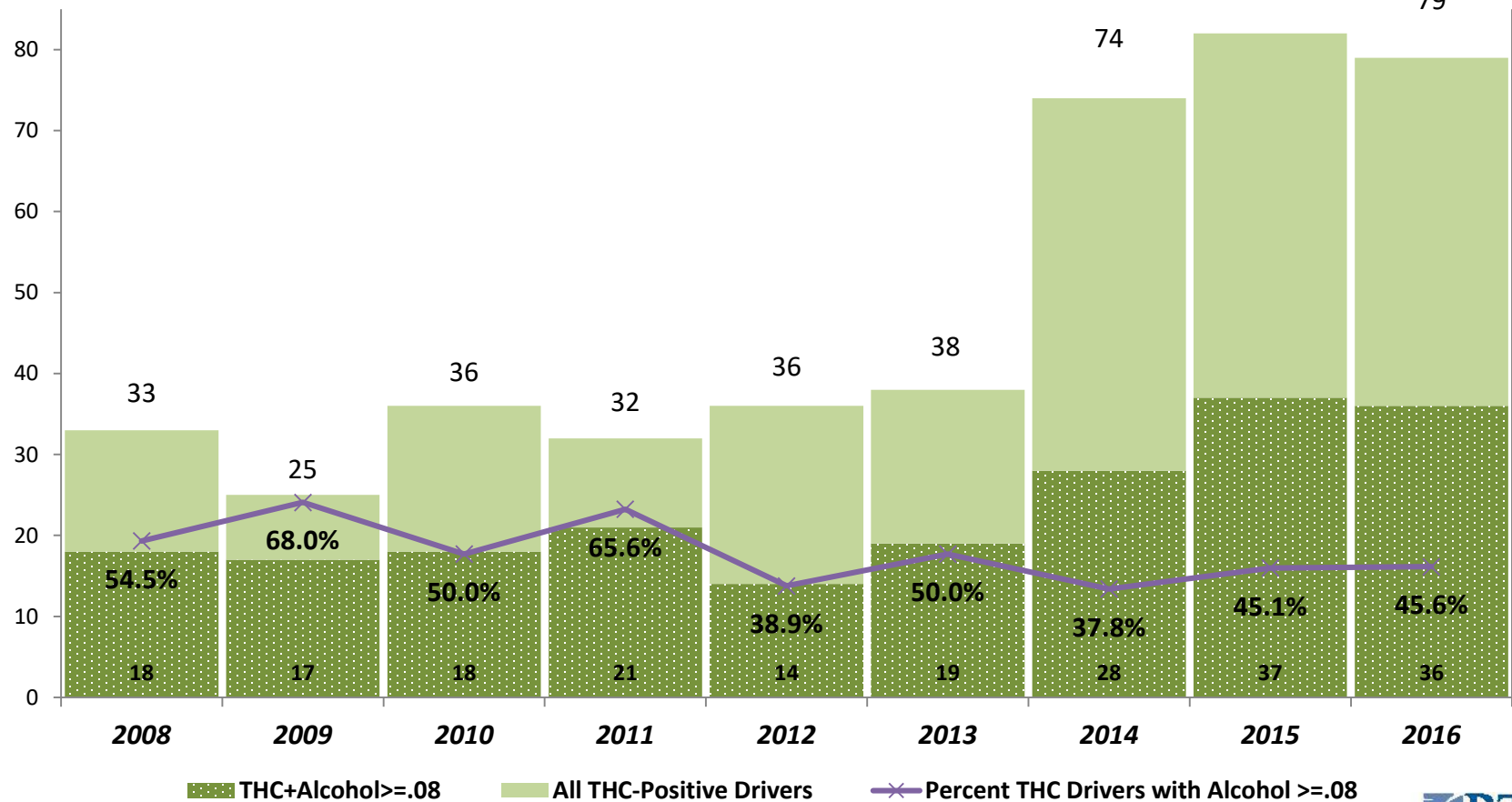
# Driving High

## Cannabinoid-Positive Drivers Involved in Fatal Crashes, 2008–2016 in WA



# Driving High

## THC-Positive+Alcohol $\geq$ .08 Drivers Involved in Fatal Crashes, 2008–2016, in WA





# Driving High

## PIRE Roadside Survey

### Pacific Institute for Research and Evaluation

- Data collection: June 2014; Nov. 2014, and June 2015
- Statewide sample—six counties, five areas within each (Spokane, Yakima, King, Whatcom, Snohomish, Kitsap)
- Alcohol and drugs (75 types, with levels)



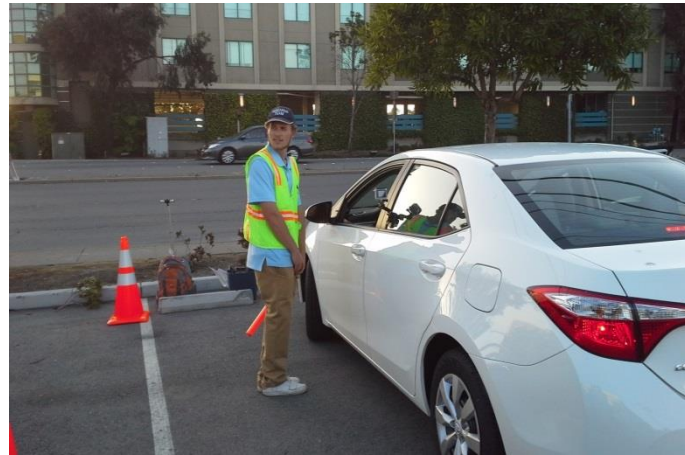
# Driving High

## June 2014 Data Collection

- Six counties, five locations
- 926 drivers eligible
- 97% (917) breath tests
- 96% (902) saliva
- 74% (711) blood
- 95% K&A surveys

**Male drivers age 20–34  
over-represented:**

- \* 21% population
- \* 45% survey sample



# Driving High

Have you ever, even once, used marijuana?

69% yes	T= 615	
31% no	T= 273	<b>T= 888</b> respondents



Those who said they used marijuana in the last year were also asked: “**Have you used marijuana within 2 hours of driving?**”

44% yes	T= 97	
56% no	T = 123	<b>T =220</b> respondents



# Driving High

The drivers who said they'd used marijuana within 2 hours of driving were also asked: When you used marijuana and drove, how do you think it affected your driving?

	Percentage of drivers:	Total number:	
Did not make any difference in my driving:	62%	60	
Made me a better driver:	25%	24	T = 84 (87%)
I don't know:	10%	10	
Made my driving worse:	3%	3	

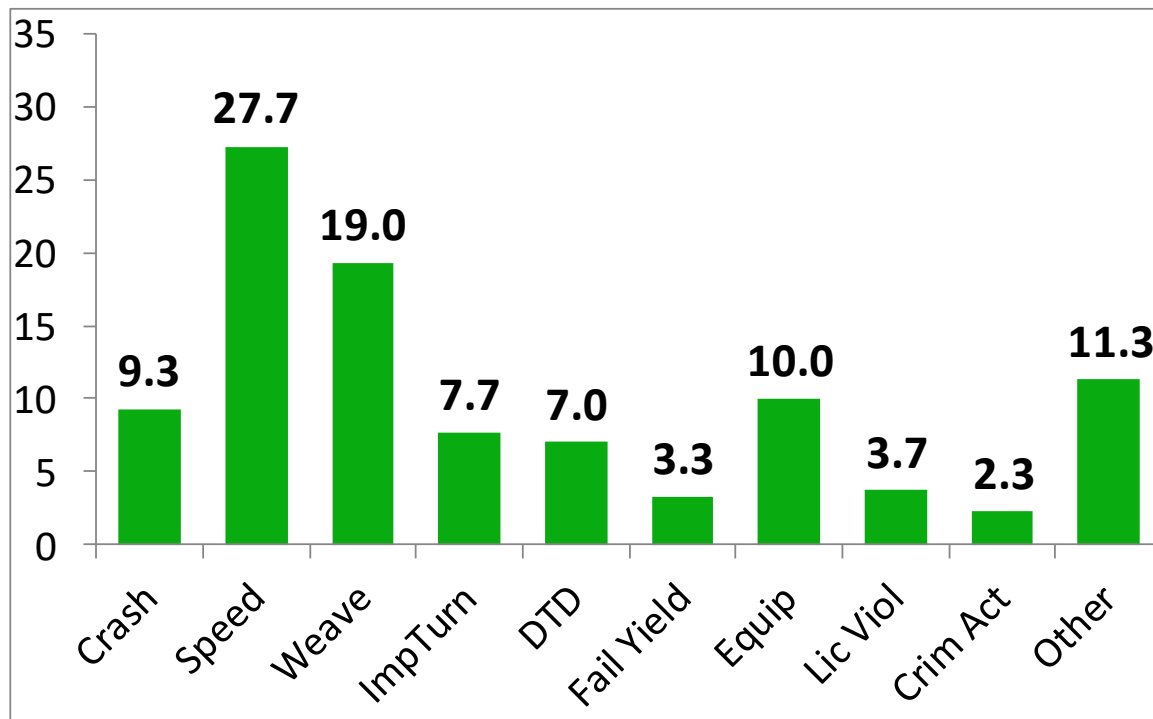
# “Drug Recognition Expert (DRE) Examination Characteristics of Cannabis Impairment”

*Accident Analysis and Prevention*, April 2016



# Driving High

## Reason for Traffic Stop

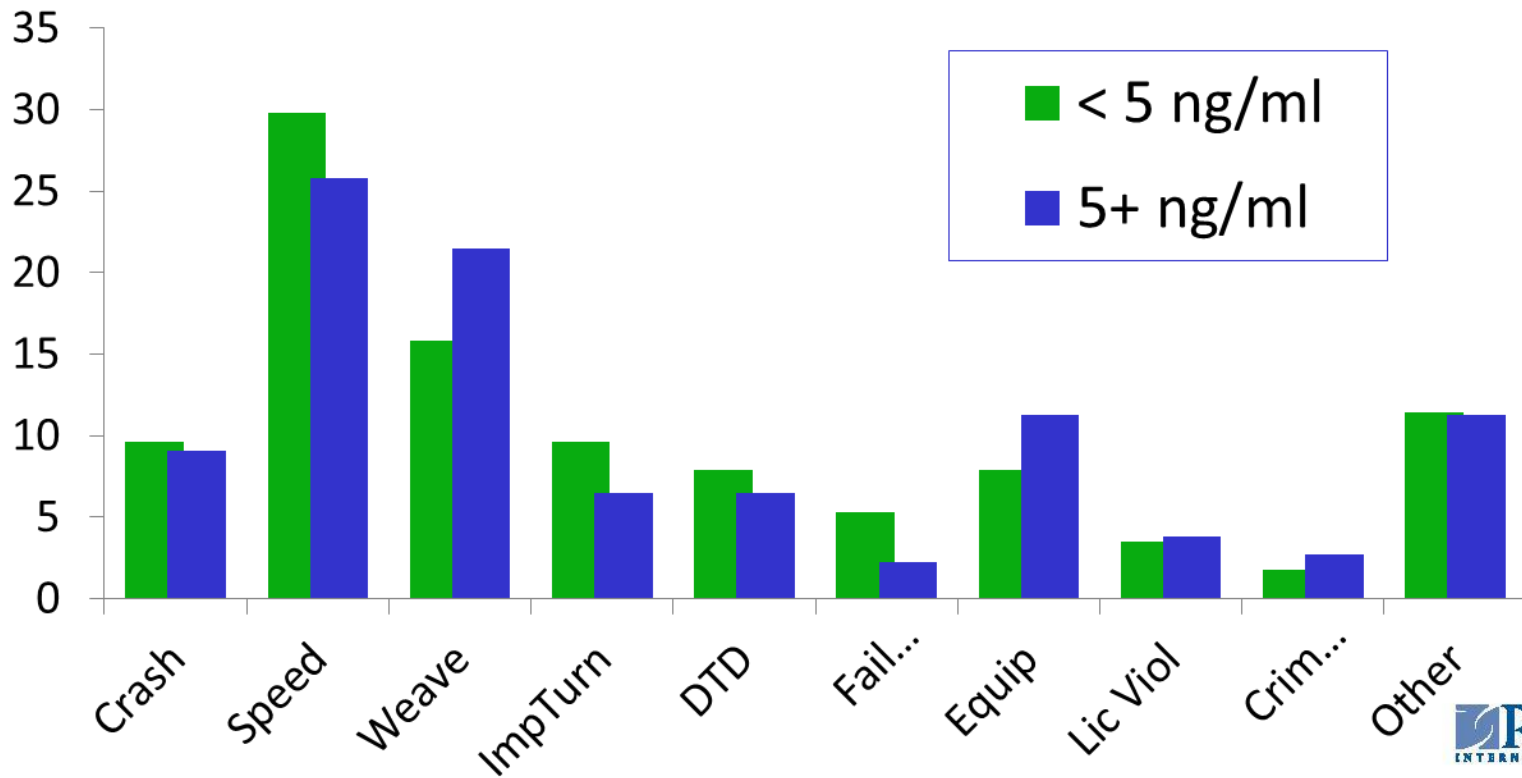


72% of cases involved one or more moving violations.  
(DTD—Disobeyed Traffic Device)

# Driving High

## Reason for Traffic Stop

Percent





# Driving High

Among the drivers surveyed, 877 answered the question:  
“How likely do you think it is that marijuana impairs a person’s ability to drive safely if used within 2 hours of driving?”

	Percentage:	Number of Respondents:	T= 877
Very likely	47%	409	
Likely	19%	162	
Somewhat likely	22%	197	T= 768 (88%)
Not at all likely	12%	109	



# Driving High

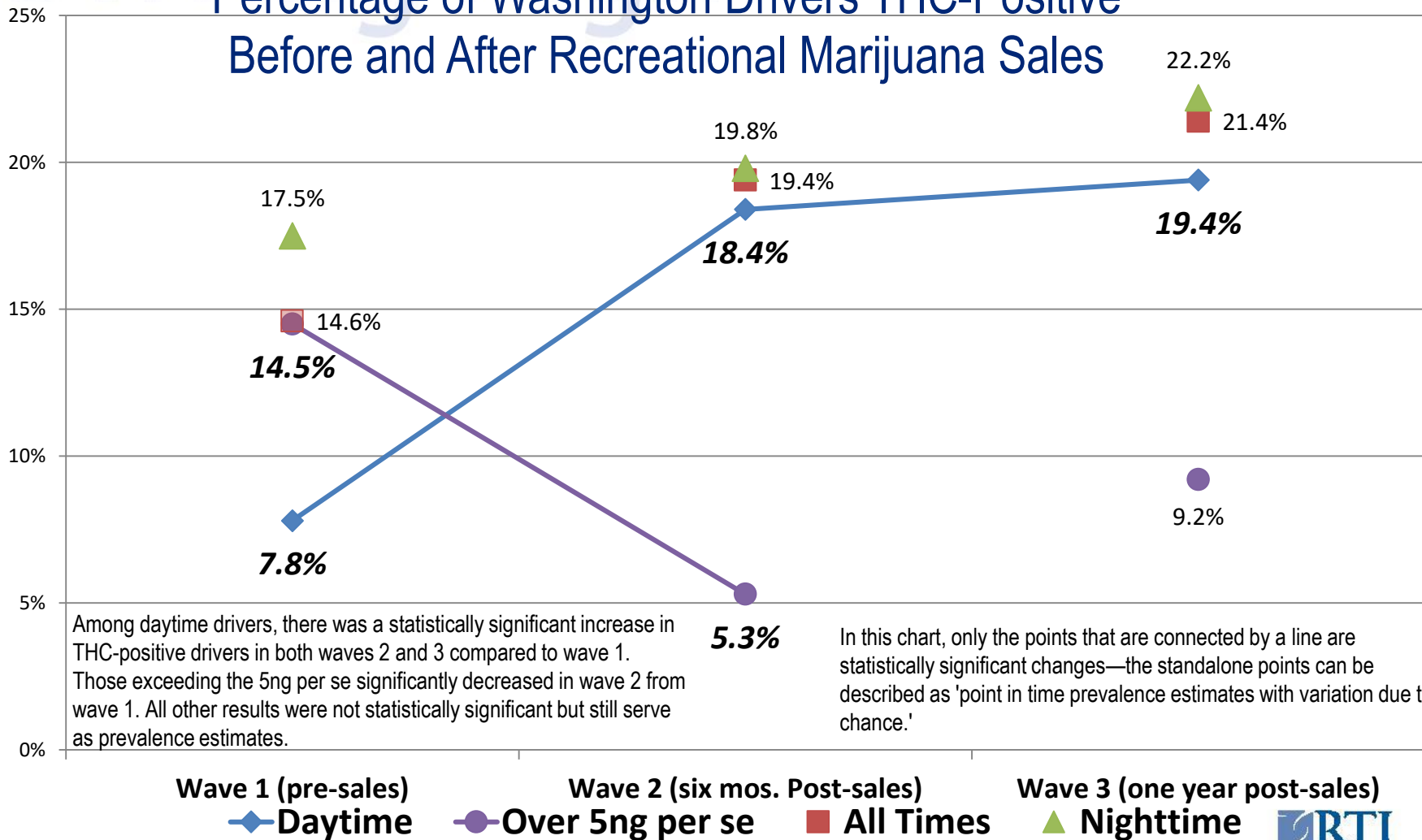
881 survey respondents answered the question:

“How likely do you think it is that a person could be arrested for impaired driving after using marijuana within 2 hours of driving?”

	Percentage:	Number of Respondents:	T= 881
Very likely	41%	360	
Likely	23%	204	
Somewhat likely	25%	219	T= 783 (89%)
Not at all likely	11%	98	

# Driving High

## Percentage of Washington Drivers THC-Positive Before and After Recreational Marijuana Sales



# Driving High

## Campaign Messages Used in Washington About Young Drivers and Drugged Driving

Listen To Your Selfie—Remember What's Important, Forget Marijuana

<http://listen2yourselfie.org/>

Start Talking Now

<http://www.starttalkingnow.org/>

Dr. Leslie Walker—Adolescent Substance Abuse

<https://www.youtube.com/watch?v=hhVDf8MEiDA>



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### Prevalence of Marijuana Involvement in Fatal Crashes: Washington, 2010-2014

May 2016



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Car crashes rank  
among the leading  
causes of death in  
the United States.



### Driving Under the Influence of Alcohol and Marijuana: Beliefs and Behaviors, United States, 2013-2015

May 2016



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### An Evaluation of Data from Drivers Arrested for Driving Under the Influence in Relation to *Per se* Limits for Cannabis

May 2016



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### Cannabis Use among Drivers Suspected of Driving Under the Influence or Involved in Collisions: Analysis of Washington State Patrol Data

May 2016



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<http://ghsa.org/html/publications/2015drugged.html>



<https://www.aaafoundation.org/impaired-driving-and-cannabis>



# Driving High

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WASHINGTON  
***Traffic Safety***  
COMMISSION



# Driving High

## Poll Question #3



# Driving High

## Questions



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# **JOIN US FOR OUR NEXT WEBINAR!**

## **Marijuana-Focused Mass Media Campaigns**

September 18, 2018

**Kristen Haley**

Washington State Department of Health

**&**

**Jessica Neuwirth**

Colorado Department of Public Health & Environment

# Driving High

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