DRUNK VERSUS DRUGGED: HOW DIFFERENT ARE THE DRIVERS?


**Background:** Driving under the influence (DUI) of drugs is increasing in the U.S., but little is known about the differences based on their patterns of use and abuse of alcohol and other drugs.

**Methods:** This paper uses a large dataset to study patients admitted to Texas substance abuse treatment programs with one or more past-year DUI arrests. t-Tests are used for comparisons between normally distributed continuous data and chi square for categorical data.

**Results:** First-time DUI offenders not only differ from those reporting more than one past-year DUI, but they differ among themselves in terms of demographics, treatment participation, substance use problems, and mental health disorders. Those with primary problems with methamphetamine, crack cocaine, powder cocaine, other opiates, sedatives, and heroin reported more days of problems and more daily use than those with problems with alcohol, while offenders with primary problems with cannabis were less impaired.

**Conclusions:** The most impaired clients were less likely to be referred to treatment from the justice system, and the differences in drug and alcohol offenders show the need to tailor approaches with education and treatment programs. More attention should be given to the needs of drivers impaired through use of prescription drugs such as the opiates and sedatives, as well as female drivers, and the role of acculturation should be recognized in programs for Hispanic drivers. In addition, specific programs should be targeted to young cannabis abusers and underage offenders. All first-time DUI arrestees should be assessed for their levels of impairment.

ALCOHOL CONSUMPTION AND BINGE DRINKING AMONG U.S.–MEXICO BORDER AND NON-BORDER MEXICAN AMERICANS

Raul Caetano, Britain Mills, Patrice A. C. Vaeth, Alcoholism Clinical and Experimental Research, published online, 2011.

**Background:** This paper examines differences in drinking and binge drinking between Mexican Americans living along the U.S.–Mexico border and those living in 2 metropolitan areas away from the border (Houston, Texas and Los Angeles, California).
Methods: Respondents in the non-border area (Houston and Los Angeles) constitute a multistage probability sample \((N = 1,288)\), who were interviewed as part of the 2006 Hispanic Americans Baseline Alcohol Survey (HABLAS). Respondents in the border area \((N = 1,307)\) constitute a household probability sample of Mexican Americans living on the U.S.–Mexico border. In both surveys, data were collected during computer-assisted interviews conducted in respondents’ homes. The HABLAS and the border sample response rates were 76 and 67%, respectively.

Results: There were no differences between border and non-border Mexican American men in the proportion of drinkers, the proportion who binge drink at least once a year, and volume of alcohol consumption. However, within each location, there were significant differences in drinking by age, indicating that younger men drank more than men who were older. Border women showed significant differences across age-groups in the proportion of drinkers, in binge drinking, and volume of alcohol consumption, which were not seen among non-border women.

Conclusions: Women’s drinking seems to be more affected than men’s by their residence on or off the U.S.–Mexico border. This is seen most clearly among young women 18 to 29 years old, and it is associated with an increased proportion of drinkers, a higher volume of drinking, and an increased proportion of women who report binge drinking. Increased drinking in this group of younger women seems to be associated with drinking in Mexico.

TEXTING AND ACCESSING THE WEB WHILE DRIVING: TRAFFIC CITATIONS AND CRASHES AMONG YOUNG ADULT DRIVERS


Objective: We examined relations between young adult texting and accessing the web while driving with driving outcomes (viz. crashes and traffic citations). Our premise is that engaging in texting and accessing the web while driving is not only distracting but that these activities represent a pattern of behavior that leads to an increase in unwanted outcomes, such as crashes and citations.

Methods: College students \((N = 274)\) on 3 campuses (one in California and 2 in Utah) completed an electronic questionnaire regarding their driving experience and cell phone use.

Results: Our data indicate that 3 out of 4 (74.3%) young adults engage in texting while driving, over half on a weekly basis (51.8%), and some engage in accessing the web while driving (16.8%). Data analysis revealed a relationship between these cell phone behaviors and traffic citations and crashes.

Conclusion: The findings support Jessor and Jessor’s (1977) “problem behavior syndrome” by showing that traffic citations are related to texting and accessing the web while driving and that crashes are related to accessing the web while driving. Limitations and recommendations are discussed.

EFFECTS OF AGE AND THE USE OF HANDS-FREE CELLULAR PHONES ON DRIVING BEHAVIOR AND TASK PERFORMANCE

**Objective:** This study used a driving simulator to investigate the effect of using a Bluetooth hands-free cellular phone earpiece on the driving behavior of two age groups. **Methods:** Forty-eight participants (24 aged 20–26 and 24 aged 65–73) were examined to assess their performance on the following divided-attention tasks under 2 driving load conditions (high and low): (1) attempting to maintain the speed limit and (2) using a cellular phone while driving. The length of the call conversation (long vs. short) and the conversational content (complex vs. simple) were manipulated as within-subject independent variables. The driving behavior of the participants, their task reaction times and accuracy, and subjective ratings were collected as dependent variables. **Results:** The results indicate that under low driving loads, short talk times, and simple conversational content, the driving behavior of the participants showed low variance in the vehicle’s mean speed. In contrast, complex conversation had a significantly negative impact on driving behavior. Notably, under a low driving load, motorists’ driving behaviors, measured in lateral acceleration, caused significantly smaller variance in complex conversations compared to no call and simple conversations. The use of a hands-free cellular phone affected the performance (acceleration, lane deviation, reaction time, and accuracy) of older drivers significantly more than younger drivers. While performing divided attention tasks, the accuracy of the older drivers was 66.3 percent and that of the younger drivers was 96.3 percent. Although this study did not find a clear impact of cellular phone use on the driving behavior of younger drivers, their divided-attention task reaction times and accuracy were better under no-call than calling conditions. **Conclusions:** This study indicates that the use of hands-free cellular phones could significantly affect the safety of driving among the older and present risks, although lesser, for younger drivers.

**RECENT CHANGES IN THE AGE COMPOSITION OF U.S. DRIVERS: IMPLICATIONS FOR THE EXTENT, SAFETY, AND ENVIRONMENTAL CONSEQUENCES OF PERSONAL TRANSPORTATION**

Michael Sivak & Brandon Schoettle, Traffic Injury Prevention, 12:6, 588-592
Available online: 01 Dec 2011

**Objective:** This study examined the changes in the United States from 1983 to 2008 in the percentage of persons with driver’s licenses as a function of age. **Method:** The analysis used data from the Federal Highway Administration on driver's licenses by age. **Results:** (1) Over the past 25 years, there was a substantial decrease in the percentage of young people with a driver’s license and a substantial increase in the percentage of older people with a driver’s license. (2) For cohorts who were between age 20 and 44 in 1983 (and thus between age 45 and 69 in 2008), the percentage of licensed drivers has not changed appreciably between 1983 and 2008. This finding suggests that, for all practical purposes, all those who wanted to obtain a driver’s license did so by age 20. (3) For cohorts who were between age 45 and 59 in 1983 (and thus between age 70 and 84 in 2008), this percentage dropped substantially. This finding reflects the surrendering of driver’s licenses with advanced age.
Conclusion: The age composition of US drivers has changed substantially between 1983 and 2008. In 1983, the largest group of drivers included those between 25 and 29 years of age. In contrast, in 2008, the largest group included those 70 years and older.

YOUNG AND UNLICENSED: RISKY DRIVING BEFORE ENTERING THE LICENSING SYSTEM


Objective On-road driving before gaining a valid license (pre-license driving) represents a risk for all road users. Pre-License driving among young people who obtained a Provisional license within an enhanced graduated driver licensing program in Queensland, Australia, was investigated.

Methods Recently-licensed drivers (n = 1032) aged 17-19 years (M = 17.54) completed a survey exploring their driving experiences while on their Learners license. Six months later, 355 of these drivers completed the same survey exploring their experiences on their Provisional (intermediate) license.

Results Twelve percent of participants reported pre-License driving. Pre-License drivers reported significantly more risky driving as Learners and Provisional drivers.

Conclusions Pre-License drivers not only place themselves and other road users at risk at the time but also continue to do so through their subsequent risky driving. Pre-license driving should be discouraged, and parents should be encouraged to monitor car use and the driving behavior of their children.

ALCOHOL-IMPAIRED DRIVING: AVERAGE QUANTITY CONSUMED AND FREQUENCY OF DRINKING DO MATTER


Objective: To estimate and validate a logistic model of alcohol-impaired driving using previously ignored alcohol consumption behaviors, other risky behaviors, and demographic variables.

Methods: The determinants of impaired driving are estimated using the Behavioral Risk Factor Surveillance System (BRFSS) surveys. Variables used in a logistic model to explain alcohol-impaired driving are not only standard sociodemographic variables and bingeing, but also frequency of drinking and average quantity consumed, plus other risky behaviors. We use interactions to understand how being female and being young affect impaired driving. Having estimated our model using one year’s survey, we validate our model using the next nearest year's data.

Results: Drinking nine or more times in the past month doubles the odds of impaired driving. Being a respondent in each higher quartile measured by ethanol consumption in grams per kilogram of weight, increases the odds as well, especially for the highest quartile. Bingeing has the largest effect on impaired driving. Seatbelt use is the one risky behavior found to be related to such driving. Sociodemographic effects are
consistent with earlier research. Being young (18—30) interacts with two of the alcohol consumption variables and being a woman interacts with always wearing a seat belt. Our model proves robust in the validation analysis.

**Conclusions:** All three dimensions of drinking behavior are important explainers of alcohol-impaired driving, including frequency and average quantity consumed. Including them in regressions improves the estimates of the effects of all variables on such driving.

**FATAL CRASHES OF 16–17-YEAR-OLD DRIVERS INVOLVING ALCOHOL, NIGHTTIME DRIVING, AND PASSENGERS**

Allan F. Williams Bethany A. West & Ruth A. Shults; Traffic Injury Prevention, Available online: 02 Nov 2011

**Objective:** To provide a contemporary analysis of the alcohol-impaired driving problem among 16–17-year-olds; to consider the potential role of night and passenger restrictions in dealing with the alcohol problem by determining how many of the alcohol crashes take place at night or with passengers.

**Methods:** The data were derived from the Fatality Analysis Reporting System for 16–17-year-old passenger vehicle drivers in fatal crashes during 2005–2009.

**Results:** During the five-year period, 15 percent of the 8,664 16–17-year-old drivers in fatal crashes had positive blood alcohol concentrations, most of which were 0.08% or greater. Drivers in alcohol crashes were more likely than those in non-alcohol crashes to be male, unbelted, in single vehicles, speeding, and their crashes were more likely to occur on Saturday or Sunday, at night, and when passengers were present. Of the alcohol crash involvements, 88 percent took place at night, or with passengers present, or both, as did 67 percent of the non-alcohol crashes.

**Conclusions:** Stronger night and passenger restrictions with increased compliance, and greater application of alcohol-specific policies, would likely be effective in reducing the alcohol and non-alcohol crashes of 16–17-year-olds. Increasing the licensing age beyond age 16 would supplement the effectiveness of these actions.

**PATTERNS OF RECIDIVISM RELATED TO CASE DISPOSITIONS OF ALCOHOL-IMPAIRED DRIVING OFFENSES**


**Objectives:** The current study examined the relationship between court outcomes of a first alcohol-impaired driving charge and recidivism.

**Methods:** Data on arrests for alcohol-impaired driving offenses (driving under the influence [DUI] and the lesser offense of driving while impaired [DWI]) and associated court dispositions were obtained from the State of Maryland for 1994–2003. Drivers whose first DUI- or DWI-related disposition took place during 1999–2000 were included in analysis. Eighty-two percent of arrests resulted in conviction (29% without probation before judgment [PBJ] and 53% with PBJ); 10 percent of defendants were not
prosecuted, 3 percent were acquitted, and all other adjudications combined (eg, abated by death, failure to appear) accounted for 5 percent. Recidivism was tracked by compiling instances of rearrest for an alcohol-related driving offense during the 3 years following disposition.

**Results:** Approximately 10 percent of all drivers arrested for DUI/DWI recidivated within 3 years after their first disposition, and the rate of recidivism varied by court outcome. The rate of recidivism was lowest (10%) for drivers who were convicted (with or without PBJ), followed by 13 percent for cases not prosecuted and 16 percent for acquittals. After controlling for other factors and relative to drivers who were acquitted, it was estimated that drivers who were not prosecuted were 23 percent less likely to recidivate, whereas drivers who were convicted with or without PBJ were 39 percent less likely to recidivate.

**Conclusions:** Data limitations prevented comparison of recidivism rates for convictions with and without PBJ. Reasons for not prosecuting are unknown, but the findings indicate that the decision is resulting in higher recidivism rates than would occur with prosecution and conviction.

**LATENCY PERIODS BETWEEN ALCOHOL-RELATED TRAFFIC VIOLATIONS: IMPLICATIONS FOR RECIDIVISM**


**Objective:** Before October 1, 2002, Maryland's regulations for relicensing drivers with 2 recorded alcohol-related traffic violations distinguished between offenders with 5 or more years between their first and second violations and those with less than 5 years. Our research examined whether this policy was supported by differential probabilities of recidivism and violation-free survival.

**Methods:** We compared recidivism rates and survival probabilities among the 2 latency subgroups and 2 control groups (first offenders and drivers with no previous alcohol-related traffic violation). Data were extracted from Maryland's driver record database and segregated files and analyzed by age quintiles using Cox proportional hazards models containing identifiers for risk factors, including prior violations. All drivers (N = 64,536) were matched on age quintile, gender, and month of offenders' index violations. Effects of violation histories on survival and recidivism probabilities were measured by contrasts of regression coefficients.

**Results:** Among second offenders, the shorter latency subgroup consistently had higher recidivism and lower violation-free survival than the longer latency subgroup, whose rates fell between those of first offenders and the shorter latency subgroup. Although highly significant, the subgroup differences were small and paled by comparison to differences between first and zero offenders in probability of a subsequent violation.

**Conclusions:** An earlier study that showed similar overall recidivism for these latency subgroups helped encourage Maryland to change its regulations governing license reinstatement. New regulations issued October 1, 2002, focused on 2 alcohol violations "during any period of time" where investigation indicated alcoholism or unaddressed
alcohol problems. To obtain relicensure, these offenders could be required to enter or complete a lengthy certified alcohol treatment program. Our current results are consistent with these requirements. License reinstatement should be primarily guided by the extent of alcohol impairment, especially because both latency subgroups showed higher risks of recidivism than first offenders, who themselves had comparatively high risk.

A DESCRIPTIVE ANALYSIS OF THE SOCIAL CONTEXT OF DRINKING AMONG FIRST-TIME DUI OFFENDERS


Objective: To understand the role of social context in contributing to the incidence of alcohol-impaired driving.

Methods: Telephone interviews were conducted with 161 individuals who received a first-time DUI citation. They were predominantly white (70%), male (62%) and 21 to 45 years of age (62%). They were paid $25 for their participation. Questions were asked about their social network, the social context in which they typically drink, the specific location and circumstances where they were drinking at the time of their citation, risky driving behaviors, in the last month as well as the number of traffic tickets they received and crashes they have been involved in since they started to drive.

Results: Two reliable social contexts of drinking were identified through principle components factors analysis: emotional pain and social facilitation. Analyses of variance showed that drinking in a context of emotional pain (eg, to deal with depression, stress) was related to drinking alone at this location and driving when they know they have had too much to drink. Drinking in a context of social facilitation (eg, with friends, to be sociable) was related to drinking more frequently and with others (versus alone) at this location. Social facilitation was also positively related to driving over the speed limit and running a red light/stop sign.

Conclusions: The social context of drinking is important for understanding the social network of drinking drivers, because most (86%) said that someone from their social network was with them at this drinking location. The need to understand how significant others influence the context of drinking as well as the likelihood of impaired driving is critical for program development. These results suggest that different types of interventions are needed for offenders depending on their social context of drinking.

AN ANALYSIS OF U.S. ROAD FATALITIES PER POPULATION: CHANGES BY AGE FROM 1958 TO 2008

Michael Sivak & Brandon Schoettle, Traffic Injury Prevention, Available online: 05 Oct 2011

Objective: This article presents a time-series analysis of changes in road safety in the United States from a public-health point of view.

Method: A 50-year period was examined, from 1958 to 2008. The emphasis was on the
changes by decades in fatalities per population across different age groups.

**Results:** First, from 1958 to 2008, the overall fatality rate per population decreased by 40 percent. Second, the decrease in the rate was age dependent (with the largest decreases for the youngest and the oldest, and the smallest decreases for the middle-aged). Third, the overall fatality rate increased from 1958 to 1968, but it decreased for each of the 4 following decades. Fourth, the changes in the rate for each decade were age dependent. Fifth, the patterns of these age-dependent changes varied across the decades.

**Conclusions:** Examples of interventions that are likely to have age-dependent effects consistent with the obtained differential age changes in the fatality rate are discussed. However, other interventions are also likely to have relevant age-dependent effects on the fatality rate.

**ALCOHOL USE AND CRIME: FINDINGS FROM A LONGITUDINAL SAMPLE OF U.S. ADOLESCENTS AND YOUNG ADULTS**

Ioana Popovici, Jenny F. Homer, Hai Fang, & Michael T. French, Alcoholism: Clinical and Experimental Research, available online: 14 DEC 20

**Background.** This been well documented among adults, but fewer studies explore this relationship among adolescents.

**Methods:** Using data from 4 waves of the National Longitudinal Study of Adolescent Health (Add Health), we examine alcohol use patterns and criminal activity from adolescence to young adulthood. Fixed-effects models partially address the potential endogeneity of alcohol use, and, because numerous studies indicate that males are more likely than females to engage in drinking and criminal activity, the analyses are segmented by gender.

**Results:** We find a strong positive relationship between alcohol consumption, the commission of crimes, and criminal victimization for both genders. Various sensitivity analyses and robustness checks support this core finding.

**Conclusions:** Our results have important policy implications, as public policy tools that aim to reduce drinking among adolescents could also reduce criminal activity. Moreover, effective alcohol abuse treatment may indirectly reduce delinquency and thus have greater long-term economic benefits than previously estimated.

**THE EFFECT OF ALCOHOL ADVERTISING ON IMMEDIATE ALCOHOL CONSUMPTION IN COLLEGE STUDENTS: AN EXPERIMENTAL STUDY**

Renske Koordeman, Doeschka J. Anschutz, Rutger C. M. E. Engels, Alcoholism: Clinical and Experimental Research, Article first published online: 21 OCT 2011

**Background:** Survey studies have emphasized a positive association between exposure to alcohol advertising on television (TV) and the onset and continuation of drinking among young people. Alcohol advertising might also directly influence viewers’ consumption of alcohol while watching TV. The present study therefore tested the immediate effects of alcohol advertisements on the alcohol consumption of young adults.
while watching a movie. Weekly drinking, problem drinking, positive and arousal expectancies of alcohol, ad recall, attitude, and skepticism toward the ads were tested as moderators.

**Methods:** An experimental design comparing 2 advertisement conditions (alcohol ads vs. nonalcohol ads) was used. A total of 80 men, young adult friendly dyads (ages 18 to 29) participated. The study examined actual alcohol consumption while watching a 1-hour movie with 3 advertising breaks. A multivariate regression analysis was used to examine the effects of advertisement condition on alcohol consumption.

**Results:** Assignment to the alcohol advertisement condition did not increase alcohol consumption. In addition, no moderating effects between advertisement condition and the individual factors on alcohol consumption were found.

**Conclusions:** Viewing alcohol advertising did not lead to higher alcohol consumption in young men while watching a movie. However, replications of this study using other samples (e.g., different countries and cultures), other settings (e.g., movie theater, home), and with other designs (e.g., different movies and alcohol ads, cumulative exposure, extended exposure effects) are warranted.

**TWENTY-ONE-YEAR TRENDS AND CORRELATES OF PRESSURE TO CHANGE DRINKING**


**Background:** The vast majority of individuals with alcohol problems in the United States and elsewhere do not seek help. One policy response has been to encourage institutions such as criminal justice and social welfare systems to mandate treatment for individuals with alcohol problems (Addiction, 1997;92:1133). However, informal pressures to drink less from family and friends are far more common than institutional pressures mandating treatment (Addiction, 1996;91:643). The prevalence and correlates of these informal pressures have been minimally studied.

**Methods:** This analysis used data from 5 Alcohol Research Group National Alcohol Surveys (NAS) collected at approximately 5-year intervals over a 21-year period (1984 to 2005, pooled N = 16,241) to describe the patterns of pressure that drinkers received during the past year from spouse, family, friends, physicians, police, and the workplace.

**Results:** The overall trend of pressure combining all 6 sources across all 5 NAS data sets indicated a decline. Frequent heavy drinking and alcohol-related harms also declined, and both were strong predictors of receiving pressure. Trends among different sources varied. In multivariate regression models, pressure from friends showed an increase. Pressure from spouse and family showed a relatively flat trajectory, with the exception of a spike in pressure from family in 1990.

**Conclusions:** The trajectory of decreasing of pressure over time is most likely the result of decreases in heavy drinking and alcohol-related harm. Pressure was generally targeted toward higher risk drinkers, such as heavy drinkers and those reporting alcohol-related harm. However, demographic findings suggest that the social context of drinking might also be a determinant of receiving pressure. Additional studies should
identify when pressure is associated with decreased drinking and increased help seeking.

DO WOMEN DIFFER FROM MEN ON ALCOHOLICS ANONYMOUS PARTICIPATION AND ABSTINENCE? A MULTI-WAVE ANALYSIS OF TREATMENT SEEKERS

Jane Witbrodt, Kevin Delucchi, Alcoholism: Clinical and Experimental Research, Article first published online: 20 JUN 2011

**Background:** Given the widespread use of Alcoholics Anonymous (AA) and other similar groups in the United States and the increasing membership of women, this study compares women with men on their meeting attendance and AA-prescribed behaviors, factors associated with that AA participation, and tests how these relate to women’s and men’s abstinence across time.

**Methods:** All consecutive new admissions (age ≥ 18) from county-wide public and private treatment programs representing the larger population of treatment seekers were approached to be in the study at treatment entry. Those consenting at baseline (n = 926) were sought for follow-up interviews 1, 3, 5, and 7 years later. Generalized linear models were used to test whether various help-seeking factors were associated with AA participation differentially by gender and, controlling for AA and other confounders, whether women differ from men on abstinence.

**Results:** At each follow-up interview, women and men attended AA at similar rates and similarly practiced specific AA behaviors, and they were alike on most factors associated with AA participation and abstention across time including abstinence goal, drink volume, negative consequences, prior treatment, and encouragement to reduce drinking. Relative to men, women with higher drug severity were less likely to participate in AA. Although higher AA participation was a predictor of abstinence for both genders, men were less likely to be abstinent across time. Men were also more likely to reduce their AA participation across time.

**Conclusions:** These findings add to an emerging literature on how women compare with men on factors related to AA participation and subsequent drinking outcomes across time. Findings have clinical implications for service providers referring clients to such groups.

FUNCTIONING OF ALCOHOL USE DISORDER CRITERIA AMONG MEN AND WOMEN WITH ARRESTS FOR DRIVING UNDER THE INFLUENCE OF ALCOHOL


**Background:** Many states require screening of individuals arrested for driving under the influence (DUI) of alcohol to determine recidivism risk and the need for treatment based on severity of alcohol problems. Several screening instruments use DSM-IV criteria for alcohol abuse and dependence to assess alcohol problems in this
population, but whether they adequately measure alcohol problems in individuals with DUls has not been examined. In addition, gender differences in DUI samples suggest that female offenders have more severe alcohol problems than male offenders. The current study examines differences in alcohol criteria functioning by DUI history and gender using an item response theory (IRT) approach.

**Methods:** Data from diagnostic interviews with 8,605 participants in the Collaborative Study on the Genetics of Alcoholism, including 1,655 who ever reported a DUI arrest (20% women), were used to examine differences in alcohol criteria functioning between men and women with and without DUls. The factor underlying item response was conceptualized as unidimensional, representing alcohol problem severity.

**Results:** Social/interpersonal problems, larger/longer, and inability/persistent desire to quit displayed greater discrimination of IRT-defined alcohol problem severity among individuals with DUls than those without. Irrespective of DUI status, women had a higher threshold than men for time spent drinking or recovering. Women without DUls had a higher threshold than similar men for social/interpersonal problems. Taken as a whole, the criteria yielded similar amounts of information in all groups.

**Conclusions:** DSM-IV criteria for alcohol abuse and dependence adequately detect alcohol problem severity in individuals with DUls, and some are better at detecting severity in this particularly high-risk group than in individuals without DUls. However, the criteria as a whole are equally effective in measuring alcohol problem severity among individuals with and without DUls and may be used with confidence in screening DUI offenders.

**DEPARTMENT OF TRANSPORTATION ANNOUNCES NATIONWIDE CRACKDOWN ON DRUNK DRIVING**

By Join Together Staff, December 14, 2011

The U.S. Department of Transportation has announced a nationwide crackdown on drunk driving this holiday season.

Transportation Secretary Ray LaHood said the education and enforcement initiative will include reminders to drivers that police and other agencies will be vigilant in seeking out drunk drivers, The Washington Post reports. “We’re making gains in our fight against drunk driving, but we cannot and will not let up,” LaHood said in a statement.

The government is creating awareness of the dangers of drunk driving through the National Highway Traffic Safety Administration’s (NHTSA) “Drive Sober or Get Pulled Over” $7 million advertising campaign. The ads, which will run through January 2, portray drunk drivers being arrested.

Last week, the NHTSA released a report that found an estimated 31 percent of driving deaths were linked to alcohol in 2010, compared with nine percent of deaths caused by distracted driving. The report found that overall, highway deaths fell last year to the lowest level in six decades, even though Americans are driving more.

A total of 32,885 people died in vehicle crashes in the United States last year. Of those deaths, 10,228 were related to alcohol. Deaths linked to alcohol fell 4.9 percent from
2009 to 2010, the report noted.

**MARIJUANA USE RISES IN POPULARITY AMONG TEENS**
By Join Together Staff, December 14, 2011

Marijuana use is gaining in popularity among teens, according to Monitoring the Future, an annual survey of eighth, 10th, and 12th-graders, The New York Times reports. The survey found one of every 15 high school seniors smokes marijuana on an almost daily basis.

About 25 percent of teens who took part in the study said they used marijuana in the past year, an increase from 21 percent in 2007. Daily marijuana use is at a 30-year peak among high school seniors. The findings indicate a decline in the perceived risk of harm associated with marijuana use, according to a news release by the National Institute on Drug Abuse, which funds the survey.

R. Gil Kerlikowske, Director of the Office of National Drug Control Policy, told the newspaper he believed the increasing prevalence of medicinal marijuana was a factor in the uptick. “These last couple years, the amount of attention that’s been given to medical marijuana has been huge,” he said. “And when I’ve done focus groups with high school students in states where medical marijuana is legal, they say ‘Well, if it’s called medicine and it’s given to patients by caregivers, then that’s really the wrong message for us as high school students.’”

Cigarette and alcohol use are at their lowest point since the survey began in 1975. Alcohol use in general and binge drinking in particular continued to gradually decline among teenagers. Energy drinks continue to be popular among teens—about one-third said they drink them.

The survey found 11.4 percent of high school seniors said they used synthetic marijuana, known as “Spice” and “K2,” in the past year. This was the first year the survey included questions about synthetic drugs.

Use of prescription drugs such as Vicodin and Adderall declined, as did use of sedatives and tranquilizers, the article noted. Cocaine use also decreased.

**TREATMENT ADMISSIONS FOR PRESCRIPTION DRUG ABUSE JUMPED 430 PERCENT IN 10 YEARS**
By Join Together Staff, December 12, 2011

Treatment admissions for prescription drug abuse rose 430 percent from 1999 to 2009, according to a new government report.

In the same period, the overall rate of admissions related to substance abuse stayed constant, the Substance Abuse and Mental Health Administration (SAMHSA) found.
The biggest jumps in admissions for prescription drug abuse occurred in Maine, Vermont, Delaware, Kentucky, Maryland, Arkansas, Rhode Island and West Virginia, the New York Daily News reports.

SAMHSA found admissions related to marijuana rose 33 percent over the 10-year period, while those for treatment to heroin, cocaine, and alcohol abuse declined. Admissions for methamphetamine/amphetamine treatment increased between 1999 and 2005, and then decreased every year through 2009.

“While some aspects of substance abuse treatment admissions have changed, meeting the overall need remains an essential public health priority,” SAMHSA Administrator Pamela S. Hyde said in a news release. “The increasing numbers of people entering treatment for prescription drug abuse is the latest indicator of the severity of the problem. Concerned family members or friends who think a substance abuse problem may exist should seek help. Treatment is effective and people recover.”

WOMEN’S BINGE DRINKING IN COLLEGE LINKED WITH SEXUAL ASSAULT RISK

By Join Together Staff, December 8, 2011

Young women who start binge drinking in college may be at relatively high risk of sexual assault, a new study suggests.

The study, by researchers at the University of Buffalo in New York, followed 437 young women from the time they graduated high school through their freshman year of college. Of the women who had not been heavy drinkers in high school, or who had avoided alcohol altogether, almost half said they engaged in binge drinking at least once by the end of their first semester of college. Young women who were already binge drinking in high school tended to continue once they were in college, according to Medical News Today.

Binge drinking was associated with young women’s risk of sexual victimization, regardless of whether they had started drinking in high school or college, the study found. Of the young women whose biggest binge involved four to six drinks, one-fourth said they had been sexually victimized in the fall semester. The incidents ranged from unwanted sexual contact to rape. The more they drank, the greater the chance of sexual assault. Among women who had ever consumed 10 or more drinks in one sitting since they started college, 59 percent reported being sexually victimized by the end of their first semester.

“This suggests that drinking-prevention efforts should begin before college,” lead researcher Maria Testa said in a news release. She advised parents to talk with their children about drinking before they go to college, and continue the conversation once they are in college.

The findings will be published in the January issue of the Journal of Studies on Alcohol and Drugs.
PARENTS INFLUENCE TEENS’ DECISIONS ABOUT DRUNK OR DRUGGED DRIVING, STUDY FINDS
By Join Together Staff, December 7, 2011

Teenagers whose parents drive under the influence of alcohol or drugs are far more likely to drive under the influence themselves compared with teens whose parents don’t drive after using drugs or alcohol, according to a new government study.

The study by the Substance Abuse and Mental Health Services Administration (SAMHSA) is based on a survey of 67,500 people ages 12 and older. The survey found that overall, 11.5 percent of youths ages 16 and 17 drove under the influence of drugs or alcohol in the previous year.

More than 18 percent of 16- and 17-year-olds who lived with a mother who drove under the influence of alcohol or drugs had also driven under the influence, compared with 11 percent of teens who lived with a mother who didn’t use drugs or alcohol before driving.

HealthDay reports 21.4 percent of teenagers who lived with a father who drove under the influence also engaged in this risky behavior, compared with 8.4 percent of teens whose fathers did not engage in drugged or drunk driving.

“Parents play a key role in preventing drunk and drugged driving, beginning with setting a good example,” SAMHSA Administrator Pamela Hyde said in a news release. “Parents who drink, or drug, and drive not only put their lives and the lives of others at immediate risk, but increase the likelihood that their children will follow down this destructive path.”

MAJOR INCREASE SEEN IN EMERGENCY ROOM VISITS INVOLVING ENERGY DRINKS
By Join Together Staff, December 2, 2011

The number of emergency room visits related to energy drinks jumped from 2005 to 2009, according to a new government report. The Substance Abuse and Mental Health Services Administration (SAMHSA) found more people are combining energy drinks with drugs and alcohol.

According to Reuters, the report found the number of hospital visits linked to energy drinks rose more than tenfold, from 1,128 in 2005, to 13,114 in 2009. SAMHSA said 52 percent of visits made by 18- to 25-year-olds involved combinations of energy drinks with alcohol or other drugs.

The report found 64 percent of hospital visits involving energy drinks were made by males; visits by males were more likely than visits by females to involve a combination of energy drinks and alcohol or illicit drugs. Visits by females were more likely to involve energy drinks combined with pharmaceuticals.

The report notes that energy drinks are flavored beverages that contain high amounts of...
caffeine. They usually have other additives, such as herbal supplements, vitamins, or guarana, a plant product that contains concentrated caffeine. The high doses of caffeine in the drinks act as a stimulant on the central nervous system and cardiovascular system.

The amount of caffeine in an energy drink can range from 80 to more than 500 milligrams, compared with about 100 milligrams in a five-ounce cup of coffee, or 50 milligrams in a 12-ounce cola, the report states.

“Energy drinks used in excess or in combination with alcohol or drugs can pose a serious health risk,” SAMHSA Administrator Pamela S. Hyde said in a news release, which notes that combining energy drinks with substances of abuse increases the risk of serious, even life-threatening injury, as well as the likelihood that a person will engage in risky behaviors such as driving under the influence.