

## **Combating Drink Driving: The Next Steps The Views of the Automobile Association**

### **Summary**

- \* Drinking and driving is perceived by the great majority of AA members and drivers in general as inexcusable and anti-social, and one of the worst offences that a person can commit.
- \* The AA believes that the key to a further reduction in the level of death and injury due to drinking and driving lies in tackling persistent and high alcohol level drink drivers
- \* This is best done by giving the police unlimited powers to conduct breath tests on drivers.
- \* There is considerable public support for lowering the legal alcohol limit from 80mg to 50mg/100ml blood. This coupled with the estimate (corroborated by AA research) that 50 lives a year will be saved by a reduction leaves the AA unable to oppose a reduction, especially if it is linked to increased police powers.
- \* There are valid arguments for and against a penalty lower than the current mandatory year's disqualification for offenders between the levels of the new limit and the current limit. Ultimately it is the perceived seriousness of the offence that has to determine the penalty and AA research shows members to be in favour of.....
- \* There is scope to tackle recidivism among convicted drink drivers through changes to other established measures.

# **Combating Drink Driving: The Next Steps**

## **The Views of the Automobile Association**

### **1 Introduction**

The AA's nine million members are drivers, but many of them also use buses and trains, around a third use a bicycle and they are all pedestrians. They want safe, unimpaired drivers on a safe road network. AA surveys of its members show a high level of intolerance to drunken drivers and a desire for action against them.

Many, but not all of the comments concerning the views of motorists and AA members made in this response are based on telephone surveys. It is important to remember that these are "top of the mind" studies, seeking an immediate response. Those involved were not asked to consider how they saw drinking and driving in relation to other offences, or in relation to other policing priorities. Other studies have, however, shown that people do consider drinking and driving to be a serious crime, and do want the police to devote a high level of resources to enforcing this law. Perhaps the main message from these surveys is that drinking and driving is perceived by the great majority as inexcusable and anti-social, and among the worst type of offence that a person can commit. It is more than likely that the role of drinking and driving as a factor in accidents is over-estimated by the public - one AA telephone survey showed that the average estimate of drink drive deaths was 5000 - a figure higher than the real figure for all road deaths.

In some areas the results of these surveys were at odds with the telephone comments and letters sent by AA members, and accordingly some more in-depth, qualitative research was carried out, also exploring public opinion on penalties for drink driving and other motoring offences.

Additionally, the AA has commissioned some research by Geoff Maycock, formerly of TRL, to establish whether the estimates, made in the consultation document, of the lives that would be saved are reasonable.

Summaries of these pieces of research are attached as appendices to this response.

### **2 The problem areas raised in the consultation paper**

The AA agrees with the three problem areas highlighted by the paper.

#### **a Hardened drink drivers**

It is obvious that with over two thirds of drivers killed at over the current legal limit having over 150mg of alcohol per 100ml of blood in their bodies that this is **the** problem area. In this area it is known that the problem is drivers who, by and large, believe they are not affected by alcohol and that they will not be caught for a drink driving offence. Many of them have criminal records - for drink driving, other motoring offences and "criminal" offences. It is fair to say that they have scant regard for the law. The AA believes that only increased enforcement, and increased police powers will counter this group.

**b Drivers within the current legal limit yet still impaired**

This is a smaller group than group a, but still has a significant role in causing death and injury. Changing the level of the legal limit can have an effect here, but it has to be stressed that action here will not have a major effect on the larger problem.

**c Young men**

Although there are signs that very new drivers have a responsible attitude to alcohol this seems to wear off with time. Major specific measures to tackle this group seem hard to justify but it must be remembered that the actions taken against groups A and B will have effects in this group.

**3 AA Views on proposals and questions raised in the consultation document**

**a Improving Enforcement**

**i Increasing police breath testing powers**

The AA believes that this is the key issue in tackling the problems posed by drink driving.

- \* The role of hardened and high level drinking drivers in accidents has already been highlighted
- \* Many of these drivers believe that they will not be caught because their driving is not affected by alcohol
- \* There are many suggestions that this belief is strengthened by the view that the police cannot test drivers who do nothing wrong. There are similar

suggestions that some police officers are loathe to use their full powers because of uncertainty as to their extent.

- \* There are arguments that it is not right that the separate powers to stop a vehicle and to conduct a breath test are used together but were not debated together by Parliament.
- \* A significant proportion of drivers have been shown to believe that the police have powers to stop and test drivers at any time.
- \* Between two thirds and three quarters of drivers surveyed are in favour of the police being allowed unlimited powers to breath test drivers
- \* A similar proportion believe the police should be able to "lie in wait" outside pubs to breath test drivers.
- \* *Something from MORI should also fit in here*

Minor widening of the powers, as suggested in the consultation paper would offer some benefits but these would probably be outweighed by the loophole offences that could arise, and by the fact that specified sites could be easily defeated in the modern world of mobile communication.

**Accordingly the AA calls for the government to give the police unlimited powers to carry out breath tests on drivers. This is the most important action that the government can take following this review.**

In exchange for these wider powers, police forces should be required to publish, on an annual basis, the number of breath tests conducted by each force, and the number proving positive, split by the cause for requiring the test (accident, moving traffic offence or other) and possibly whether the test was conducted at day or night-time. This will make chief officers publicly accountable for their use of the new powers.

## **ii Speeding up court proceedings**

The AA supports the need to speed up proceedings.

The AA would support moves to overcome the problems that currently exist in making it a condition of bail that a driver does not drive, and accordingly prevent interim disqualification being imposed by a court. It should also be made possible for mandatory minimum periods of disqualification to be reduced to take account of driving prevented by bail conditions. Any such arrangements should also take account of the fact that a driver who has failed

an evidential test should be able to surrender his licence and commence his disqualification if for any reason a bail condition not to drive is imposed.

However, the AA believes that everyone, including drinking drivers, should continue to have the right to have the penalty imposed by a court.

### **iii Simplifying procedures**

The AA would not oppose the use of evidential machines at the roadside providing that the existing standards of reliability can be shown to exist, and that the current entitlement to a blood test in marginal cases remained.

It is reasonable to assume that the concept of a specific penalty which drink drivers could accept without going to court would only be used on marginal offenders. It is important to consider whether these are the very people who would be most affected by the indignity of having to make a court appearance.

### **iv Ignition interlocks for repeat drink drive offenders**

The AA agrees that there is insufficient evidence to support the use of these and that more research is needed.

## **b Improving the system of offences and penalties**

### **i Lowering the blood alcohol limit**

The AA has sought the view of motorists on this issue in two telephone surveys, one in *July* 1995 and the other in *March* 1998.

- \* Over 75 per cent of both samples supported a reduction in the legal limit;
- \* The 1998 survey found a higher proportion to be strongly in favour of a reduction than the 1995 survey.
- \* the majority of the people opposed to the reduction to 50 were opposed because they believed 50 was too high;

This information, along with the data in the consultation paper, confirmed as "reasonable" by the AA's research, which suggests that 50 lives a year will be saved by a reduction means the AA is unable to oppose a reduction.

However, the AA believes that any reduction must be coupled to the introduction of unlimited powers for the police to conduct breath tests, as discussed in paragraph 3ai.

### **ii Penalties for a lower drink drive limit**

The current drink drive offence is one of the few where a minimum penalty exists. It has to be debated as to whether a lowering of the legal limit should be accompanied by a lowering of the minimum penalty - or the introduction of a secondary offence punished by a lower penalty.

In discussing this issue the following points can be made:

- \* The UK penalty at 80 is very severe, and many foreign jurisdictions do not even impose disqualification at 50.
- \* One of the major reasons for the change is harmonisation. Should penalties as well as levels be harmonised.
- \* It is not hard to find precedents for differential penalties - within distinct offences, where many offences allow a court to impose different levels of penalty points (careless driving, speeding), or where separate offences exist - for example the bad driving offences of dangerous and careless driving.
- \* Many drivers with a clean licence value this and for them endorsements are a considerable penalty
- \* Were a six point offence introduced it would automatically disqualify re-offenders
- \* The courts would still have discretionary power to disqualify
- \* A six point endorsement would mean that new drivers - one of the key areas - would have their licence revoked under the Road Traffic (New Drivers) Act
- \* The severity of the UK penalty is often held as a reason for the success of the law.
- \* A reduction in the penalty could be seen as an indication that drinking and driving is no longer seen as a serious offence
- \* Court workload would increase as more drivers argued that they should face the lesser penalty
- \* There would be increased need for a blood option at and around the thresholds for both levels of offence

It is easy to find arguments in favour of both retaining the present penalty and reducing it. Ultimately the best measure of the severity of the penalty has to be the public perception of the seriousness of the offence The AA/MORI study found ..... and this leads the AA to support.....

### **iii Penalties for High Risk Offenders**

The AA sees the high level and repeat offender as the prime targets of any new initiatives. In addition to ensuring that they perceive a real risk of being caught it is important that action is taken to prevent and deter re-offending. The high risk offenders scheme does this.

The AA is keen to see the scheme publicised further, as it is agreed that the sanction is well enough known.

If the legal limit is lowered, it seems logical that the threshold for entry to the high risk offender scheme following a single offence is lowered in proportion.

### **iv Rehabilitation Courses**

The AA is keen to see steps taken to stop drinking drivers re-offending, and feels that the scheme should be available to all drivers

There have been some suggestions that magistrates in areas with experimental schemes are increasing the disqualifications imposed to compensate for the reduction in disqualification that can be earned through attending a course. Such activity must be discouraged.

### **v Special restrictions on young and novice drivers**

The AA agrees that such a scheme would be of doubtful merit, and hard to administer and enforce. A points-based differential penalty could increase the penalty for new drivers through the revocation provision of the Road Traffic New Drivers Act, and the effect of the Act could be extended to allow the revocation of the licences of new drivers who are disqualified during their first two years as licence holders.

## **c Education Publicity and Information**

### **i Education**

The AA agrees that there is a need for more education on drinking and driving (and attitudes to driving in general) in schools. The AA has in the past provided copies of its Learner Driver Questionnaire for use in the DRIVE pack which was circulated to all secondary schools.

The AA has long believed that there should be a legal requirement for schools to teach road safety.

### **ii Publicity**

The AA agrees that high profile publicity campaigns are crucial to the fight against drinking and driving.

### **iii Information on units and effects of alcohol**

This will be crucial to the early days of any new limit. Drivers should not offend through ignorance and guidance is needed. The lower limit will make information on not only absorption rates vital. Many more drivers will run the risk of committing "morning after" offences and will need to understand the rate of elimination.

### **iv Self Test Breathalysers**

The AA has always advised drivers against using these devices for the reasons outlined in the document.

A breathalyser expressly designed to test for the absence of alcohol may have a role, particularly in the "morning after" situation. A device calibrated at, say 20mg/100ml blood, and from which it was hard if not impossible to estimate higher levels, would seem worthy of support were it introduced to the market.