



April 2, 2018

The Honorable Nancy Skinner
Chair, Senate Public Safety Committee
California State Senate
1303 10th Street; State Capitol, Rm. 2059
Sacramento, CA 95814-4900

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Dear Chair Skinner,

The Foundation for Advancing Alcohol Responsibility (Responsibility.org) is a national not-for-profit that leads the fight to eliminate drunk driving and underage drinking and is funded by the following distillers: Bacardi U.S.A., Inc.; Beam Suntory; Brown-Forman; Constellation Brands, Inc.; DIAGEO; Edrington; Mast-Jägermeister US, Inc.; and Pernod Ricard USA. Responsibility.org brings individuals, families, and communities together to guide a lifetime of conversations around alcohol responsibility and offers proven strategies to stop impaired driving. To learn more, visit www.responsibility.org.

Responsibility.org strongly supports SB 1273 which seeks to establish a zero tolerance law for individuals under the age of 21 who test positive for delta-9-tetrahydrocannabinol (THC - primary psychoactive ingredient in marijuana) as measured by a saliva/oral fluid test or other chemical field test. The proposed legislation would establish parity with existing zero tolerance laws for alcohol and establish administrative penalties, as opposed to criminal sanctions, for individuals under 21 who are driving with THC in their system.

Motor vehicle crashes are the leading cause of death for U.S. teenagers (CDC, 2015). These young drivers are a high-risk group due to their relative inexperience behind the wheel. The use of impairing substances (e.g., alcohol, marijuana and/or other drugs), puts them at heightened risk of being involved in a crash. The proposed law is needed to send a strong message about the dangers of using marijuana and driving and to deter youth from engaging in this behavior. As such, **we urge you to vote yes on this bill to protect public safety.**

Effectiveness of zero tolerance laws. Decades of research have shown that policies targeted at youth are effective in reducing crashes. For example, the 21 minimum legal drinking age law, graduated licensing laws, and zero tolerance policies for people under 21 who drive with any alcohol in their system have led to a nearly 80% reduction in alcohol-involved traffic fatalities among young drivers since 1982. Studies have further demonstrated that zero tolerance alcohol laws are highly effective in reducing the number of young drivers who operate a vehicle after consuming alcohol (CDC, 2012; Fell et al., 2009, 2016; Haegerich et al., 2016; Liang and Huang, 2008; Shults et al., 2001). An early study in Maryland found that alcohol-involved crashes for drivers under 21 dropped by 21% in six counties after the zero-tolerance law was implemented; following publicity of the enactment of the law, these

crashes decreased by an additional 30% (Blomberg, 1992). In a 2009 analysis, Fell et al. estimated that zero-tolerance laws save 159 lives each year. SB 1273 does not seek to reinvent the wheel but rather to apply a well-established and evidence-based policy and extend it to another substance that, while legal for those over the age of 21, remains an illicit substance for youth.

Addressing youth misperceptions about marijuana and driving. Following the legalization of marijuana in other states such as Colorado and Washington, analyses have shown an increase in the number of fatally-injured drivers who test positive for THC (Colorado DOT, 2017; Tefft et al., 2016; Washington Traffic Safety Commission, 2016). Recent analysis of fatal crash data in California reveals that drivers under the age of 21 with THC in their system have been fatally-injured at an increasing rate in recent years (3.5% in 2013, 14.3% in 2014, and 15.8% in 2015). In order to save more lives, it is necessary to communicate the dangers of this behavior and to enact strong laws that send the message that driving after using marijuana is illegal, can be detected, and carries consequences.

In experimental settings, marijuana impairs psychomotor skills and cognitive functions that are needed to operate a vehicle including time and distance perception, lane tracking, motor coordination, divided attention, and reaction time (Capler et al., 2017; Compton and Berning, 2015; Hartman and Huestis, 2013; Kelley-Baker, 2014). However, it is clear from survey data that many youth do not view driving after using marijuana as a serious issue. A 2017 study conducted by Liberty Mutual Insurance and Students Against Destructive Decisions (SADD) illustrates this point. In a survey of 2,800 high school students, 33% of respondents believed it was legal to drive under the influence of marijuana in states where recreational use has been legalized. Furthermore, only 68% of teens said that driving under the influence of marijuana is dangerous, 27% thought it does not make someone a worse driver, and 22% admitted that this behavior was common practice among their peers. The enactment and publicization of a zero tolerance THC law for drivers under 21 could combat misperceptions and ultimately, deter young drivers from engaging in this behavior. For this reason, this policy was identified as a priority recommendation by a panel of national experts in the Governor's Highway Safety Association's (GHSA) *Drug-Impaired Driving Guide for States* (Hedlund, 2017).

Oral fluid testing. Of course, for any law to be effective and to create a deterrent effect, there must also be enforcement. The inclusion of oral fluid testing as a means to identify young drivers who operate a vehicle with THC in their system is an important provision in this bill. These devices offer many advantages over blood and urine testing as they are quick and easy to use, minimally invasive, have a short detection window (i.e., positive findings are indicative of recent as opposed to historical use), and provide a sample proximate to the time of driving (Bosker and Huestis, 2009; Moore and Crouch, 2013; Wille et al., 2014).

Multiple studies have found these devices to be reliable and valid including a formal evaluation done in the European Union that identified several devices with both sensitivity and specificity of more than 80% (Schulze et al., 2012) and a recent Canadian evaluation (Beirness & Smith, 2016) that found sensitivity exceeded 80% for most drug categories (including cannabis) and specificity exceeded 90% for all drug categories. As a result of these findings, Canadian law enforcement agencies plan to move forward with the deployment of oral fluid testing once legalization occurs later this year. Other countries such as Australia and the United Kingdom have been using this roadside drug testing technology for years. In addition, jurisdictions across the United States have piloted various devices to assess their viability, including several California counties. These pilots have concluded that oral fluid devices provide good information to law enforcement regarding the presence of active drugs in drivers' systems (Moore and Miles, 2015).

The National Highway Traffic Safety Administration (NHTSA) is currently researching the feasibility of incorporating roadside oral fluid devices in criminal justice processes and indicated at a recent Drugged Driving Summit that the agency “believes in oral fluid testing.”

Responsibility.org believes that strong laws and a combination of enforcement, public awareness, and education are needed to create deterrence and change behavior. For the reasons articulated in this letter of support, we believe **it is imperative that California pass SB 1273** to begin to alter youth perceptions about the dangers, illegality, and consequences of driving after using cannabis much like has been done with alcohol. As has been shown with alcohol zero tolerance laws, this approach can save young lives.

If there is anything that Responsibility.org can do to support this effort, please contact Erin Holmes, Director of Traffic Safety at (202) 445-0334 or erin.holmes@responsibility.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Ralph S. Blackman". The signature is fluid and cursive, with a long horizontal flourish at the end.

Ralph S. Blackman
President & CEO