

# Drugged Driving & SUDs: Clinical Considerations

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## 2019 Impaired Driving Forum



# Texas Statewide **IMPAIRED** DRIVING FORUM



# The Challenge

- 20.7 million people aged 16 or older drove under the influence of alcohol in the past year and 11.8 million drove under the influence of illicit drugs (NSDUH, 2016).
- Use of multiple drugs increase the risk of negative outcomes such as crashes and people with addiction often use multiple drugs at once.
- Opioids are a big factor in fatal drugged driving crashes and the opioid epidemic rages on.

<https://www.drugabuse.gov/publications/drugfacts/drugged-driving>

# Continuum of Substance Use

Abstinence = DWI impossible

Use = DWI less likely

No diagnosis;  
a high risk,  
“poor choice”



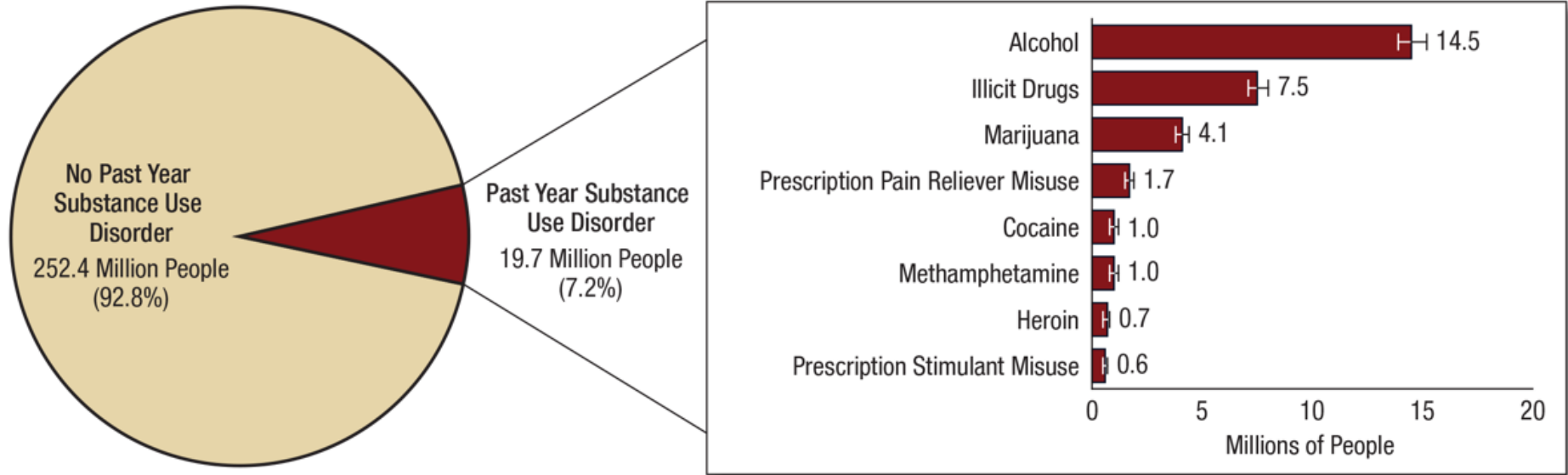
Misuse = DWI more likely

A clinical condition;  
impaired choice



Substance Use Disorder = DWI very likely  
(mild, moderate, & severe)

# Numbers of People Aged 12 or Older with a Past Year Substance Use Disorder: 2017



NSDUH, 2017



# ASAM

American Society of Addiction Medicine

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## Public Policy Statement: Definition of Addiction

**Short Definition of Addiction:** Addiction is a primary, chronic disease of brain reward, motivation, memory and related circuitry. Dysfunction in these circuits leads to characteristic biological, psychological, social and spiritual manifestations. This is reflected in an individual pathologically pursuing reward and/or relief by substance use and other behaviors.

Addiction is characterized by inability to consistently abstain, impairment in behavioral control, craving, diminished recognition of significant problems with one's behaviors and interpersonal relationships, and a dysfunctional emotional response. Like other chronic diseases, addiction often involves cycles of relapse and remission. Without treatment or engagement in recovery activities, addiction is progressive and can result in disability or premature death.

**A disease is:**

Progressive

Predictable

Primary

Chronic

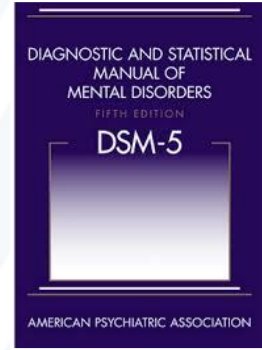
Terminal

<https://www.asam.org/resources/definition-of-addiction>

# DSM-5 Substance Use Disorder

A cluster of symptoms indicating a person continues to use despite significant substance-related problems.

*(including legal consequences and making hazardous decisions)*



# Substance Use Disorder Diagnostic Criteria

- 1) Substance taken in larger amounts or longer than intended
- 2) A persistent desire or unsuccessful efforts to cut down or control use
- 3) A great deal of time is spent obtaining, using & recovering from effects
- 4) Cravings, strong desire or urge to use
- 5) Failure to fulfill major role obligations at work, school, or home
- 6) Persistent or recurrent social/interpersonal problems caused or exacerbated by use
- 7) Social, occupational, or recreational activities are given up or reduced
- 8) Recurrent use in situations in which it is physically hazardous
- 9) Use is continued despite knowledge of physical or psychological problems
- 10) Tolerance – need for increased amounts or diminished effect
- 11) Withdrawal – symptoms or use to avoid symptoms

Criteria met:  
0-1 no diagnosis  
2-3 mild SUD  
4-5 moderate SUD  
6-11 severe SUD

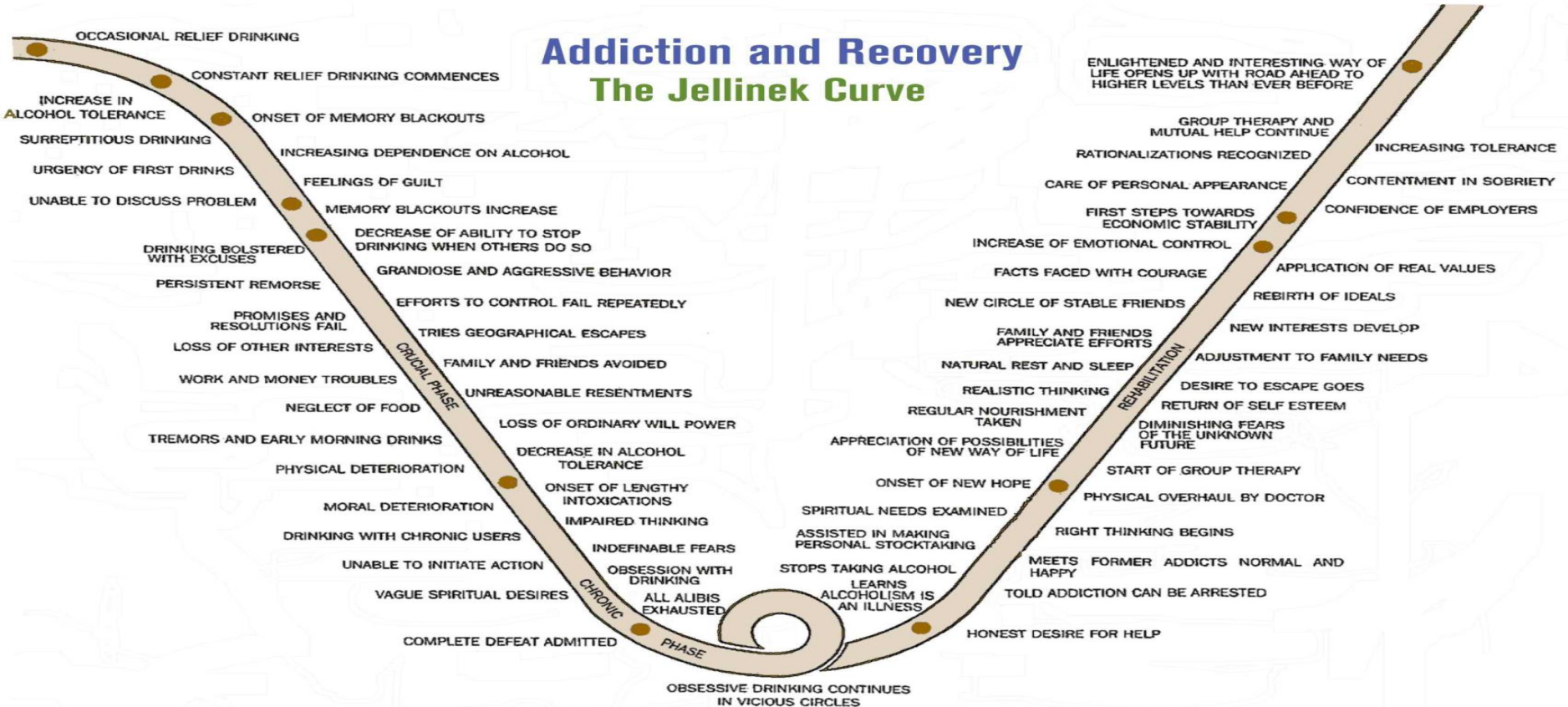
legal  
consequences

impaired  
driving



# The Progression of Addiction

## Addiction and Recovery The Jellinek Curve



# Substance Use Disorder Diagnostic Criteria

- 1) Substance taken in larger amounts or longer than intended
- 2) A persistent desire or unsuccessful attempts to cut down or stop use
- 3) A great deal of time spent in activities necessary to obtain the substance or in recovering from its effects
- 4) Cravings, strong desire or urge to use

## Impaired Control

- 5) Failure to fulfill major role obligations at work, school, or home
- 6) Persistent or recurrent social problems, interpersonal conflicts, or legal problems exacerbated by use
- 7) Social, occupational, or recreational activities are given up or reduced

## Social Impairment

- 8) Recurrent use in situations in which it is physically hazardous
- 9) Use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is caused or exacerbated by the substance

## Risky Use

- 10) Tolerance – need for markedly increased amounts of the substance to achieve the desired effect
- 11) Withdrawal – symptoms that are characteristic of the substance and are caused by the substance

## Pharmacological

# Substance Use Disorder Diagnostic Criteria

1) Substance taken in larger amounts or longer than intended

2)

**Impaired Control = potential DWI**

3)

4) Cravings, strong desire or urge to use

5) Failure to fulfill major role obligations at work, school, or home

6) Persistent or recurrent

**Social Impairment**

ated by use

7) Social, occupational, or recreational activities are given up or reduced

8) Recurrent

**Risky Use = potential DWI**

9) Use is

10) Tolerance

11) Withdrawal

**Pharmacological = potential DWI**

There is a therapeutic opportunity when someone is arrested for DWI who does *not* have a SUD.

Prevention & risk  
reduction

There is a therapeutic opportunity when someone is arrested for DWI who has a SUD.

Clinical intervention

*“Opportunity is not a lengthy visitor.”*

Stephen Sondheim – American Composer

# Recidivism $\approx$ SUD ?

- The FBI reported that 990,678 people were arrested for DUI in 2016.
- NHTSA estimates 25% of those with DWI subsequently receive another DWI. That's almost 250,000 per year.
- Why?
- Could it be that these folks have a substance use disorder?

FBI, UCR, 2016  
NHTSA, DOT HS 811 991, 3/14

# More Evidence that Recidivism $\approx$ SUD

“Repeat [DWI]offenders are also more criminally-involved, report *heavier alcohol and drug use*, and are more likely to report psychological problems such as depression.”

In other words, they likely have co-occurring mental health and substance use disorders.

Dickson, M.F., Wasarhaley, N.E. & Webster, J.M. (2013)

# Centers for Disease Control

## “What Works: Strategies to Reduce or Prevent Drunk Driving”

- Drunk driving laws
- Sobriety checkpoints
- Ignition interlocks
- Multi-component interventions
- Mass media campaigns
- License revocation or suspension laws
- Alcohol screening & brief interventions
- School-based instructional programs



City of East Liverpool, OH from wnep.com

[https://www.cdc.gov/motorvehiclesafety/impaired\\_driving/strategies.html](https://www.cdc.gov/motorvehiclesafety/impaired_driving/strategies.html)



# National Institute on Drug Abuse

## Steps People Can Take to Prevent Drugged Driving

- Offering to be a designated driver
- Appointing a designated driver to take all car keys
- Getting a ride to and from parties where there are drugs and alcohol
- Discussing the risks of drugged driving with friends in advance



www.enterpriseneews.com

<https://www.drugabuse.gov/publications/drugfacts/drugged-driving>



# National Highway Traffic Safety Administration

## “Responsible Behavior”

- If you use an impairing drug, designate a sober driver, call a cab, or use a ride-hailing service.
- Don't let friends get behind the wheel if they're under the influence of drugs or alcohol.
- Download NHTSA's SaferRide app from Google Play or the iTunes Store to help you call a friend or taxi, pinpoint your location, and arrange to be picked up.
- If you're hosting a party where alcohol or other substances will be used, it's your job to make sure all guests leave with a sober driver.
- Always wear your seat belt—it's your best defense against impaired drivers.

**“Baby ejected, 1 dead in possible 'drugged driving' crash”**



usatoday.com

# Key Criminal Justice Interventions

- Court monitoring
- Ignition interlocks
- CAM bracelets
- Revocation
- Fines
- Incarceration
- Vehicle confiscation

But once the criminal justice requirements are dispatched, how many DWI offenders who had their license suspended in your jurisdiction never followed through with required assessments and other clinical steps to regain their license?

How many of these folks are in active addiction?

How many are driving anyway?

### WV Residents Information

If you received a DUI in the state of West Virginia, you will need to complete the following before your driver's license can be reinstated. Note that in some cases additional penalties/requirements may be imposed by the court system, the Department of Motor Vehicles, and/or Department of Health and Human Resources.

- Complete a substance abuse evaluation and follow any treatment recommendations as stipulated by the evaluator. Need help finding a licensed substance abuse evaluator in West Virginia? Find Services in your County by clicking [here](#) or call 1-877-215-2522.
- Successfully complete an 18-hour driver under the influence education program. There are a number of providers that have been approved to provide this program in the state of West Virginia. General questions regarding the driver under the influence program may be directed to 1-877-215-2522.

If you have more than one DUI offense you are considered a multiple/habitual offender in the State of West Virginia, and are advised to seek assessment and admission to a **structured, clinically based, substance abuse treatment program designed for multiple/habitual DUI offenders**. The intensity of services shall be based upon a clinical assessment completed at the time of program admission by a substance abuse professional using American Society of Addiction Medicine (ASAM) Patient Placement Criteria. The successful completion of multiple/habitual DUI offender programming is a step to secure reinstatement of driving privileges administratively suspended as a result of second offense DUI per Chapter 17C-5A-3 of WV State Code.

# SUD Intervention: Best Practices

- Screening, Brief Intervention and Referral to Treatment (SBIRT)
- Comprehensive psycho-social assessment
- Intervention planning
- Referral to appropriate prevention, early intervention or treatment program (based on ASAM levels of care)
- Case management, including involvement of criminal justice system personnel (Drug Court works!)
- Immediate and on-going community-based, peer/recovery coach support

# What Do Peer Recovery Coaches Do?

Peer recovery coaches walk side by side with individuals seeking recovery from substance use disorders. They help people to create their own recovery plans, and develop their own recovery pathways.

Recovery coaches provide many different types of support, including



emotional (empathy and concern)



informational (connections to information and referrals to community resources that support health and wellness)



instrumental (concrete supports such as housing or employment)



affiliational support (connections to recovery community supports, activities, and events)



# Is Peer Recovery Coaching Effective? cont.

Emerging research indicates that peer recovery coaching holds promise for supporting recovery from substance use disorders. Taken as a whole, the current body of research suggests that people receiving peer recovery support may experience:



Decreased  
criminal justice  
involvement



Decreased emergency  
service utilization



Reduced relapse  
rates



Reduced re-hospitalization rates



Reduced  
substance use

# Peer Recovery Coach Settings

- Treatment programs
- Drop-in centers
- Community recovery organizations
- Emergency rooms, trauma centers and other hospital-based services
- Health services
- Drug Courts
- Police stations



# Recovery Coaches & Law Enforcement

Sussex County, NJ



A community coalition led by law enforcement to improve addiction intervention.

Pre-arrest intervention:  
creating non-arrest pathways  
to treatment and recovery



“Cambridge Police Hires  
Recovery Coach after  
Grant Concludes”  
Sept. 2018

# Recovery Coaches & DWI: An Opportunity

- There is an opportunity to place recovery coaches in contact with DWI arrestees.
- The quicker the better.
- Priority response to second and other multiple DWI offenders.

## The Bottom Line:

Recovery coaches can do those things that law enforcement is not trained or don't have the time to do, improving recovery outcomes and ultimately reduce reoffending.

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