

SESSION 2

THE SURGEON GENERAL'S WORKSHOP ON DRUNK DRIVING—TWO YEARS LATER

INTRODUCTION

Barry M. Sweedler

Two years have now gone by since former Surgeon General C. Everett Koop convened his controversial and historic Workshop on Drunk Driving. Dr. Koop brought together more than 100 traffic safety officials, public health professionals, citizen activists, and researchers to develop a national response to the crisis of impaired driving.

The workshop was historic because unlike previous workshops and conferences on this problem, it considered all policies and programs that could reduce the impaired driving problem—including those that were opposed by the alcoholic-beverage, advertising, and broadcasting industries. The workshop was controversial because it went ahead despite the efforts of the opposition to cancel or delay it.

Two years are not all that have gone since the workshop. More than 45,000 Americans have also gone—victims of the drunk driver. This session will discuss the recommendations that came from the workshop and the progress that has been made to implement them.

GOVERNMENT IMPLEMENTATION OF THE WORKSHOP RECOMMENDATIONS

Robert W. Denniston

Office for Substance Abuse Prevention

In December 1988, then surgeon General C. Everett Koop convened a Surgeon General's Workshop on Drunk Driving to focus national attention on the problem of alcohol-impaired driving. The workshop, which was the last in a series of 11 such meetings held during Koop's term, was attended by 120 professionals who served on 11 expert panels that made more than 200 recommendations.

The recommendations addressed alcohol pricing and availability, advertising and marketing, epidemiology and data management, education, judicial and administrative processes, law enforcement, transportation and alcohol service policies, injury control, youth and other special populations, treatment, and citizen advocacy. After reviewing all of the recommendations, Koop endorsed 10 Key Summary Recommendations that continue to guide

program and policy decisions related to alcohol-impaired driving. These 10 recommendations are as follows:

1. Reduce the illegal blood alcohol concentration (BAC) for drivers from its present level of 0.10 percent to 0.04 percent by the year 2000, and establish a level of 0.00 percent for drivers under 21 years of age.
2. Increase excise taxes on alcoholic beverages, and tax beer, wine, and distilled spirits equally based on alcohol content.
3. Have every state provide a system to fund comprehensive alcohol-impaired driving programs.
4. Reduce the availability of alcoholic beverages.
5. Pass legislation in every state to confiscate drivers' licenses on the spot for those found to be above the legal BAC.
6. Match the level of alcoholic-beverage advertising with an equal number of prohealth and prosafety messages.
7. Restrict certain types of advertising and marketing practices, especially those that reach underage youth.
8. Conduct public information efforts that are based on social marketing and communication strategies and on sound learning principles.
9. Conduct drinking-and-driving education within worksites, communities, health care agencies, and schools.
10. Increase the enforcement of drinking and driving laws, and expand the use of sobriety checkpoints.

After the recommendations were released in May 1989, primary responsibility for implementing them was assigned to the office for Substance Abuse Prevention (OSAP) in the Alcohol, Drug Abuse, and Mental Health Administration, U.S. Public Health Service. Over the past 2 years, OSAP has developed an alcohol-impaired driving initiative and is now involved in the following types of activities and programs related to implementing the workshop recommendations:

- Developing white papers on counteradvertising, designated-driver programs, administrative license revocation, and college drinking;
- Convening an Impaired Driving Initiative Expert Panel to advise OSAP on its impaired-driving activities.
- Conducting an analysis of media efforts to influence the entertainment community by various advocates of alcohol and other drug education such as

the Harvard School of Public Health, the Scott Newman Center, and the Entertainment Industries Council.

- Supporting the National Coalition to Prevent Impaired Driving, a nonprofit educational organization that was established as a result of the workshop.

- Conducting (in collaboration with the U.S. Departments of Transportation and Education) regional college workshops and train-the-trainer workshops on alcohol, other drugs, and traffic safety.

- Funding public information and education grants that assist local communities in developing educational and media advocacy activities.

- Organizing an issues forum to examine the implications of the mixed messages society sends to youth about alcohol, tobacco, and other drugs and to develop environmentally based strategies for reducing the impact of these messages.

- Conducting alcohol advertising and availability counteradvertising campaigns in six sites to reach racial and ethnic audiences that are heavily targeted by the alcohol industry.

- Documenting through case studies current or recent media advocacy experiences by organizations, coalitions, or individuals in African-American and Hispanic communities.

- Developing materials (e.g., advocacy packages, position papers, and fact sheets) and compiling data bases and files of speeches, slide shows, journal articles, and videos on impaired driving.

OSAP is also promoting the Healthy People 2000 National Health Promotion and Disease Prevention Objectives, which address many of the workshop recommendations. In particular, OSAP staff are making presentations and providing technical assistance to selected sites to promote the Healthy People 2000 objectives that call for a lowering of BAC levels; administrative driver's license suspension and revocation laws; education for children, youth, employees, and primary care providers; reduction in youth access to alcoholic beverages; and restrictions in promotion of alcoholic beverages to youth.

Updated data on the workshop recommendations addressed in the Healthy People 2000 objectives are being compiled by OSAP for a December 1991 briefing for the Assistant Secretary for Health, James O. Mason. Additional data on the workshop recommendations and ways they are being implemented at the federal, state, and local levels will be presented at the Secretary's Conference on Alcohol-Related Injuries, which OSAP is convening from March 23-25, 1992, in Washington, D.C. This landmark conference will provide a forum for

educating individuals about the risks and costs associated with alcohol-related injuries and for empowering communities to implement effective prevention strategies.

NATIONAL COALITION TO PREVENT IMPAIRED DRIVING: A COORDINATED RESPONSE

Laurel E. Harris

National Coalition to Prevent Impaired Driving

The National Coalition to Prevent Impaired Driving (NCPID) exists today because of former Surgeon General Koop's Workshop on Drunk Driving held in December 1988. One of the important recommendations of that workshop, and one strongly endorsed by Dr. Koop himself, was the formation of a national coalition designed to coordinate efforts to promote the recommended strategies that came from the workshop's drinking-and-driving expert panels. These strategies are summarized in the Ten Key Summary Recommendations, which act as a boilerplate for the coalition's agenda.

Not all of the recommendations deal directly with intervention at the driving level; instead, they look at a bigger picture. The idea is that to truly reduce drinking and driving, both sides of the equation must be considered; that means examining policies that also affect the social environment that encourages, normalizes, and pushes drinking as an essential part of American life. Stricter law enforcement and other driving deterrence measures that focus on individual behavior are just part of a comprehensive attack on drinking and driving. Policy intervention at the societal level creates conditions in which fewer people ever reach the point of being behind the wheel of an automobile when they are too impaired to drive.

Research has shown that as consumption goes down, alcohol-related problems also go down, including problems related to drinking and driving. Several of the recommendations developed at the workshop address policies that will help reduce consumption by affecting the availability and pricing of alcoholic beverages, advertising and marketing, and public information and education.

The coalition's agenda reflects the comprehensiveness and substantive breadth of the workshop recommendations. For the first time ever, a drinking-and-driving group has embraced the full range of alcohol-prevention policies that hold promise for reducing impaired driving—underscoring the belief that only through such an approach will the entire spectrum of alcohol-related problems, which include traffic crashes