

and in the alcohol and drinking-and-driving fields and plans to continue doing its part to further the recommendations of the Surgeon General's Workshop.

**BEYOND DETERRENCE:  
THE NEW ORDER OF BUSINESS**  
H. Laurence Ross

---

The Surgeon General's Workshop on Drunk Driving has been called historic. It was also subversive, in that it had the consequence of undermining an existing paradigm and substituting a new one.

The paradigm by which drunk driving was understood before this workshop included the idea that the problem was isolated, only incidentally related to such broad social problems as general traffic safety and alcohol abuse. Individuals caused the drunk-driving problem, either through moral deficiency or disease; in any event, they belonged to a small group of deviants as different from typical Americans as sheep are from goats. Drunk driving was primarily a matter of criminal behavior, and it could best be handled by beefing up the criminal justice system—the police, courts, and jails. This paradigm was well expressed in the 1983 report of the Presidential Commission on Drunk Driving.

The new paradigm expressed in the background papers and report of the Surgeon General's Workshop views drunk driving as being intimately involved with other problems surrounding alcohol and traffic safety. Effective countermeasures dealing with drunk driving are likely to impinge on the broader problems, and vice versa. The Surgeon General's Workshop emphasized the social causes of these problems. Drunk driving is a comprehensible, predictable consequence of normal activities in American society, embodied in the institutions of recreation and transportation: it is normal in America to consume alcohol in recreational settings, and it is normal to drive. Because driving with any amount of alcohol in the blood is driving impaired to some degree, and there is no line between drunk driving and "safe" drinking and driving, crashes caused by driving while impaired are often the product of behavior conforming to norms, either general ones or those of particular groups including youth and some ethnic minorities. No sickness, moral turpitude, or other individual deviance need be involved.

Countermeasures for drunk driving in the new paradigm center on changing institutions. In particular,

the greatest hope of change lies in effective means for reducing drinking in general, and heavy drinking in particular, and for reducing driving in general, and driving in order to drink in particular. The pricing and marketing of alcoholic beverages are among the centerpieces of these strategies. The criminal justice system, central in the old paradigm, is not abandoned in the new, but within deterrent approaches stress is placed on the certainty and swiftness of threatened punishment rather than on its severity. This emphasis is based on research evidence testifying to the ineffectiveness of such penalties as mandatory jail sentences when they are extremely unlikely to be applied.

The old paradigm was sponsored by a coalition of citizen activists, law enforcement agencies, vested interests including driver educators and therapists, and the media and alcohol industries. It flourished in the conservative political atmosphere of the 1980s, in which social problems were often blamed on individual moral fault and in which punishment was deemed necessary and even respectable. The new paradigm results from the entry of public health officials who are concerned with preventing deaths and injuries rather than with the morality of drinking and driving. Alcohol and transportation policies, the heart of countermeasures suggested by the new paradigm, are more consistent with liberal than conservative politics. In addition, a line of countermeasures suggested by public health considerations but irrelevant to the old paradigm is that of conserving lives notwithstanding drunk driving. Examples are measures to simplify driving through vehicle and highway engineering, remove roadside hazards, provide air bags and other restraints to reduce crash forces in vehicles, and improve the quality of emergency medical services. Many of these measures require state action, again in contrast to the old paradigm.

The paradigm emerging from the Surgeon General's Workshop promises to displace the old. Its successor organization, the National Coalition to Prevent Impaired Driving, will challenge the successor organization to the President's Commission, the National Commission Against Drunk Driving. Those who speak against drunk driving no longer speak with one voice. It is hoped that the argument among them will be brief and bloodless so that a combined effort, harnessing the energy and indignation of citizens, movement to the pragmatic program of public health advocates, can continue the progress made so far in reducing the lives lost to drunk driving.