Substance-related traffic-risk behaviors among college students

MAJOR FINDINGS:

College students drive under the influence of drugs as often as they drive drunk, and both behaviors are strongly associated with dependence on drugs or alcohol.

Specifically, in this study using multi-year interviews of 1,194 college students ages 19 through 22, one in six of those with access to a car drove drugged in the past year—meaning they were under the influence of an illicit drug or a prescription drug they used nonmedically (in most cases marijuana was the drug used). Those numbers stayed about the same through age 22.

Annually, about half of the drugged drivers also drove drunk.

Both drugged and drunk driving were independently associated with an increased risk for alcohol dependence. However, drunk driving did not add to the risk for marijuana dependence, after taking into account drugged driving.

Regardless of car access, about one in four students rode with a drugged driver in any given year. The probability of riding with a drugged driver was stable from age 19 to 21, but decreased by age 22.

Men and white individuals were at increased risk for both drugged driving and riding with a drugged driver, compared with women and non-whites.

Practice and Policy Suggestions: Several suggestions derive from the findings, including: 1) a need to step up educational campaigns warning of the risks of drugged driving simultaneously with drunk driving; 2) early identification and intervention with drugged drivers, especially on college campuses; 3) better enforcement of existing impaired driving laws; and 4) referrals to evaluation and treatment for students arrested for drugged driving.

One promising strategy may be roadside drug testing, which has been shown to be more effective than either increasing the severity of sanctions or providing education about the risks of drugged driving.
(Practice and Policy Suggestions Continued): Future research should learn more about whether students are using drugs in combination with alcohol before they get behind the wheel to drive. The combination of alcohol and marijuana is particularly risky when driving a car, even when blood alcohol levels are relatively low. Students who drive after drinking but without feeling drunk might be more impaired than they realize, particularly if they’ve used marijuana in the past few hours.

Both drugged driving and riding with a drugged driver should be regarded as a “red flag” for serious alcohol and/or drug problems. Campus health professionals should ask students about drugged driving and riding with a drugged driver as part of routine screenings for alcohol and drug dependence. Law enforcement response should consider implementing mandatory referrals for drug and alcohol evaluation and treatment for all drugged driving offenders, and voluntary referrals for passengers as well. Driving privileges could also be restricted until treatment is completed.


About the College Life Study (CLS)

The CLS is a longitudinal study of 1,253 college students at a large, public, mid-Atlantic university. This study is one of the first large-scale scientific investigations that aims to discover the impact of health-related behaviors during the college experience. Any first time, first-year student between 17 and 19 years old at the university in the fall of 2004 was eligible to participate in a screening survey. The researchers then selected students to participate in the longitudinal study, which consisted of two-hour personal interviews administered annually, beginning with their first year of college. A full description of the methods used is available.¹ Inherent to all self-reporting research methods is the possibility for response bias. Because the sample is from one large university, the ability to generalize the findings elsewhere is uncertain. However, response rates have been excellent and attrition bias has been minimal.

For more information about the study, please visit www.cls.umd.edu or contact Amelia M. Arria at the University of Maryland School of Public Health at aarria@umd.edu.


This research brief was disseminated with assistance from the Treatment Research Institute (TRI), a non-profit research and development group specializing in science-driven transformation of treatment and policy in substance use/abuse. Click here to learn more about TRI.