OFF SKID ROAD
Evaluating A Stop Drink Driving Programme

Dr Virginia Farnsworth-Grodd¹ and Dr Grace Wang²
¹Community Alcohol and Drug Services, New Zealand; ²Department of Psychology, Auckland University of Technology, New Zealand
The Problem

- Drink drivers pose a significant risk to New Zealand roads.
- Alcohol and/or substances were involved in 40% of fatalities on New Zealand roads in 2010 (MOT, 2010).
- Third or subsequent recidivist drink drivers made up 23% of all convicted substance impaired drivers in 2010 (Ministry of Justice, 2010).
- Despite efforts (public awareness campaigns, blood alcohol limits, and legal, rates for alcohol impaired driving in NZ are rising.
- Literature reveals that interventions need to target drink-driving behaviour and attitudes.
Predictors of Recidivism

- Age (25-39)
- Male
- Severity of an individual’s alcohol problem
- Past traffic violations
- Attitudes and Beliefs
  - Toward drink driving
  - Alcohol expectancies
  - Motivation to change drinking
- Coping skills
‘Stop Drink Driving’ (SDD) programme

- Developed by The Community Alcohol and Drugs Services (CADS) in response to increased referrals from Community Probation Services.
- Integrates group motivational interviewing and cognitive behavioural techniques.
- Ten sessions; 20 hours in total.
- Targets attitudes and behaviours toward drinking and drink driving.
- First to incorporate new group Motivational Interviewing techniques.
- Uses highly trained facilitators.
Study aims

◦ To assess the effectiveness of this ‘Stop Drink Driving’ programme to change drink driving attitudes and behaviour.

◦ To improve our understanding of how recidivist drink drivers can be influenced to change and what factors promote long term change.

◦ An improved understanding will aid any further development of the programme, which would potentially significantly reduce the road toll and the costs to families, whanau and society.
Methods

- Research collaboration between CADS and the AUT University.
- Longitudinal study
  1. Assessed at waitlist
  2. Start of programme
  3. Completion of programme
  4. 1 month follow-up
  5. 3 month follow-up.

- The primary outcome measure is Behaviours & Attitudes Drinking & Driving Scale (BADDS)
- Examples of questions: I believe it is okay to drink and drive if I only had one drink with a meal; I believe it is okay to drink and drive if my blood-alcohol content is in the legal range.
Participants

- Probation referred clients who attended the SDD programme in 2014.
- Twelve groups, average 10-15 people in 2014.
- Exclusions:
  - Unwilling to provide consent
  - High risk of suicide
  - Unwilling to provide contact details
- 80 recidivist drink drivers (59% males, mean age=42 ±12 years)
- 45% identified as NZ European, 23% Maori, 14% Pacific Islanders, 7% Asians, 11% others
Results

- Significant reductions in rationalizations for drinking and driving (F=4.01, p=0.02) and likelihood for drinking and driving (F=9.1, p<0.001) were observed and the reductions remained three months after completion of the programme.
Results Cont.

- However, changes in lenient attitudes toward drink driving were not significant.

- Suggesting that people who have had experiences with the consequences of drunk driving may not discourage others from drinking and driving, and remain ambivalent regarding drink driving legal sanctions.
Discussion

◦ A 10 week SDD programme is acceptable to New Zealand recidivist drink drivers.

◦ The SDD programme is effective in reducing thoughts and beliefs associated with reasons to drink drive.

◦ The study highlighted the need to target:
  ◦ thoughts and beliefs associated with societal norms, and peer pressure.
  ◦ attitudes toward drinking laws and those designed to keep NZ roads safe.
Limitations

- Small number of participants
- Self-selected sample
- One service provider.
- Loss of participants across time limited some analyses to trend examination.

Nevertheless

- Our study is one of the few available evaluations of a New Zealand drink driving programme, and as such is adds valuable information to this research area.