



# Between the Lines

## American Prosecutors Research Institute

The Research and Development  
Division of NDAA

### SAVE THE DATE

#### Click It or Ticket Mobilization

May 18 – 31, 2009  
Nationwide

#### IPTM Symposium on Alcohol and Drug Impaired Driving Enforcement

June 9 – 11, 2009  
St. Pete's Beach, FL

#### NAPC Summer Meeting

July 8 – 11, 2009  
Orlando, FL

#### NDAA Board Meeting

July 12, 2009  
Orlando, FL

#### NDAA Summer Conference

July 12-15, 2009  
Orlando, FL

#### 15th Annual IACP Training Conference on Drugs, Alcohol and Impaired Driving

August 8 – 10, 2009  
Little Rock, AR

#### Drunk Driving. Over the Limit, Under Arrest

National Crackdown  
August 19 – September 7, 2009

#### GHSAs Annual Conference

August 30 – September 2, 2009  
Savannah, GA

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## A.R.I.D.E: Giving Officers the Tools they Need to Recognize Drug-Impaired Drivers

By Susan Glass

A police officer on routine patrol at night passes a car that does not have its headlights on. After he turns around, intending to alert the driver to this fact, he observes the car weaving in its lane and traveling below the posted speed limit. The car then pulls up to a stop sign. Despite no other traffic being at the intersection, the car sits there for several seconds before proceeding. Based on this unusual driving behavior, the officer initiates a traffic stop. Because he is trained in DWI detection, the officer already suspects he may have a drunk driver on his hands.

The officer then approaches the car to make contact with the driver. As the driver rolls down his window, the officer immediately notices his that his eyes are bloodshot and glassy. When the officer asks where he is headed, the driver stares at him blankly before finally mumbling that he can't remember. The officer notices that his speech is thick and slurred. When the officer asks to see his license and proof of insurance, the driver fumbles around to retrieve his wallet. Despite it being in plain view in the front of the wallet, the driver looks for his license for several seconds before finally telling the officer he can't find it. He seems to forget that the officer also asked to see his proof of insurance. Becoming even more convinced that he has a drunk driver on his hands, the officer asks the driver to step out of the car to perform some field sobriety tests.

As the driver walks to the back of his car, he stumbles and has to hold on to the car for balance. When the officer administers the Horizontal Gaze Nystagmus test, he observes that the driver has all six clues. When the officer administers the Walk and Turn, the driver can't maintain the starting position and almost falls. Because he is concerned for the driver's safety, the officer decides not to complete the Walk and Turn or to attempt the One Leg Stand.

Based on all of these observations, the officer suspects that he has a drunk driver on his hands. But, he's not sure. Usually, people who are this impaired smell strongly of alcohol. This driver has no odor of alcohol on his breath. Moreover, there were no empty

beer cans or liquor bottles in the car. When asked if he had been drinking, the driver says no. Most confusing of all—the driver blows triple zeros on the PBT. The officer doesn't know what to do. Despite the fact that the driver seems very drunk, the PBT says he isn't.

What should the officer do in this situation? How many officers would simply let the guy go, hoping he makes it home safe? How many officers have been in this situation before and done exactly that? What's really going on here?

The most likely explanation for the driver's impairment is one that many officers may not think about. With so much focus and attention paid to drunk driving and with all the training officers receive on the detection of drunk drivers, the officer may be so focused on impairment by alcohol that he does not consider the obvious explanation for this situation. This driver is impaired, most likely by drugs.

Driving while impaired by a drug other than alcohol is an increasingly serious and prevalent problem on our nation's highways. Based on SAMHSA's 2006 National Survey on Drug Use and Health, an estimated 10.2 million persons aged 12 or older reported driving under the influence of illicit drugs at

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To assure that you continue to receive your copy of *Between The Lines*, or to sign up to begin receiving it, please go to <http://ndaasupport.org/tinc?key=XQjOC5wC&formname=Summer2009> and provide us with your contact information. Even if you are already on our email list, please go to the link as we need to update our files.

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Susan Glass is the Traffic Safety Resource Prosecutor for the Missouri Office of Prosecution Services

least once during the preceding year. Illicit drugs in this study included marijuana, cocaine, inhalants, hallucinogens, heroin, or prescription-type drugs used non-medically. Based on the combined data from 2004 to 2006, 4.7% of drivers aged 18 or older drove under the influence of illicit drugs.<sup>1</sup> According to the Centers for Disease Control, 18% of motor vehicle driver deaths involve a drug other than alcohol.<sup>2</sup> In one study of reckless drivers, over half who were not intoxicated by alcohol were found to be impaired by cocaine and/or marijuana.<sup>3</sup> While drunk driving remains a very serious issue, it is clear that more attention needs to be paid to those who drive under the influence of drugs.

Driving under the influence of drugs is illegal in every state. Only a handful of states, however, have laws that make it illegal for a person to drive with any amount of certain substances in his bloodstream. In these *per se* drug law states, all that is needed to prove guilt is a toxicology test that is positive for drugs. In most other states, it is necessary to show that the driver was impaired by whatever substance he had ingested. Despite the nature of these laws, few police officers receive training on drug impairment and driving. Unless they undergo the specialized training required to become a drug recognition expert, officers may not receive any training on how to recognize and respond to a drug-impaired driver. And, as described above, an officer who is not familiar with drug impairment may simply decide not to arrest an obviously impaired driver.

Recognizing the need for training on drug impairment, the National Highway Traffic Safety Administration developed "ARIDE—Advanced Roadside Impaired Driving Enforcement." This curriculum focuses on drugged driving and is intended to bridge the gap between traditional law enforcement training that focuses on the detection and apprehension of drunk drivers and the full blown Drug Evaluation and Classification Program (DEC). It is a two-day (16 hour) course that can be presented in any state.

The curriculum includes a detailed review of the standardized field sobriety tests, which remain vital to the detection of drug-impaired drivers. The course also includes information on: the physiology of the human body and how driving is affected by drugs, various methods of ingestion of drugs, and medical conditions that may mimic drug or alcohol impairment. Most importantly, the ARIDE course introduces the seven drug categories from the DEC program and describes the general indicators of impairment that are associated with each category. This course, when successfully presented, will give officers the knowledge and tools they need to recognize a drug-impaired driver. An officer who has attended an ARIDE class will know exactly how to proceed in a scenario like that described above and will not run the risk of simply letting an impaired driver go because he doesn't know what else to do.

It is important to note that successful completion of the ARIDE class *will not* qualify an officer as a drug recognition expert. The course does not teach the 12-step drug evaluation protocol. The course does not teach officers to conduct vital

sign examinations. ARIDE is not a substitute for the DEC program. For this reason, ARIDE-trained officers should not assume that they do not need to call a DRE when they are faced with a drug-impaired driver. More importantly, law enforcement administrators should not assume that they can send officers to ARIDE instead of the full Drug Evaluation and Classification Program training. The testimony of a trained drug recognition expert remains vital to successfully prosecute a drug-impaired driver, particularly in the majority of states where impairment must be tied to the substance ingested.

In DEC states, ARIDE will give law enforcement officers the information they need to determine when to call a DRE to conduct a full evaluation. ARIDE will give officers in the few states that have not yet adopted the DEC program the ability to more completely and effectively document impairment caused by drugs. In every state, officers that complete the ARIDE course will be able to recognize and respond to drivers impaired by a drug other than alcohol and will have the confidence they need to make appropriate arrest decisions in any impaired driving case.

Missouri has been active in presenting the ARIDE course to law enforcement officers and prosecutors. Several agencies, including the Missouri Office of Prosecution Services, the Missouri State Highway Patrol and various law enforcement academies have hosted classes, training a total of approximately 200 officers to date. Because the curriculum is relatively new, it is too soon to tell whether there has been any significant impact on drug-impaired driving in this state. Officers who have attended the class, however, have been enthusiastic in their response and eager to put their new found knowledge and skills to the test on the road. These officers, armed with the ability to recognize and respond to drug-impaired drivers, will never again release an obviously impaired driver simply because there was no alcohol on board. This will clearly result in better enforcement and safer roads. For this reason alone, the ARIDE class is worthwhile training that should be offered in every state.

<sup>1</sup> See [www.oas.samhsa.gov/2k8/stateDUI/stateDUI.cfm](http://www.oas.samhsa.gov/2k8/stateDUI/stateDUI.cfm).

<sup>2</sup> See [www.cdc.gov/ncipc/factsheets/driving.htm](http://www.cdc.gov/ncipc/factsheets/driving.htm).

<sup>3</sup> See D. Brookoff, et. al., "Testing Reckless Drivers for Cocaine and Marijuana," *New England Journal of Medicine*, Vol. 331, No. 8, 8/25/94, p. 518.

## NDAA Welcomes New Executive Director

The National District Attorneys Association has named Scott Burns as its new executive director effective March 27, 2009.

Burns spent more than 15 years as the district attorney in Iron County, Utah, before serving in several high level government positions. In his most recent appointment, Burns served as the deputy director of the Office of National Drug Control Policy since 2007.

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