



ROAD
TRAVEL
REWARDS



Driving high

The need to detect drug drivers

Road Safety Series
November 2024

Acknowledging Our Traditional Owners

We acknowledge the land on which we gather, from places as widespread and diverse as the NRMA. In the presence of Elders past, present and future, we recognise all journeys and our mutual role in creating new paths together.

About the NRMA

The NRMA represents 3.1 million Australians in NSW and the ACT, making it one of the largest tourism and transport companies in Australia. We provide motoring, transport and tourism services to our Members and the community.

We have focused on better transport infrastructure since the beginning, when our founders lobbied for improvements to Sydney's Parramatta Road back in 1920. Independent advocacy is the foundation activity of our organisation, and remains critical to who we are today.

Road Safety Series

The NRMA has prepared a series of reports with the aim of identifying the main factors involved in road crashes and initiatives that may help to reduce the risk of loss of life and injuries.

Continued investment in enforcement, road infrastructure, vehicle technology and public education campaigns are needed to improve the safety of all road users.

Contents



Introduction

Every day in NSW, drug drivers are on our roads. Tragically, this has led to an average of 74 lives lost each year due to drug-related crashes. With drug driving fast becoming one of the top causes of road trauma on NSW roads, the best tool in the arsenal for deterring and detecting drug drivers is high visibility policing.

Since 2007, NSW Police have been able to conduct roadside drug testing of drivers to detect the presence of illicit drugs: cannabis, methylamphetamine, and MDMA. Cocaine was added in 2018. Unfortunately, people are not getting the message about the dangers of drug driving, with almost one in 10 drivers being caught driving with the presence of illicit drugs in their system.

In 2023, nearly 160,000 roadside drug tests were conducted across NSW. This falls short of the target of 200,000 tests that was set six years ago. NSW has never come close to hitting this target. While drug testing is not the only solution to solving this problem, it is a crucial element and the target must be met.

Data is paramount in understanding, addressing, and measuring the impact drugs play in road crashes. Currently, there is no regular reporting of drug driving fatalities and post-crash testing of serious injuries does not occur.

While the focus on drug driving has traditionally been on illicit drugs, more education is needed to educate drivers of the effects of medication on driving.

Drug driving should be socially unacceptable just like drink driving, but it's clear we have a way to go.



What the NRMA wants

Increased drug testing

- Two hundred thousand roadside drug tests to be conducted annually by 2026.
- Appropriate funding and resourcing allocated to NSW Police to ensure high visibility policing, especially on country roads.

More data

- Roadside drug and alcohol testing enforcement data should be released publicly on an annual basis, within three months following the end of the calendar year.
- Drug driving crash data should be made publicly available and should be included in road toll reports.
- Extend post-crash drug testing to serious crashes and publicly release the data.

More education and research

- Public awareness campaign to educate people on dangers of drug driving, including the effects of medication on driving.
- Investment in drug driving research and developments related to medicinal cannabis.

Effects of the high

Drug driving contributes to

24%

of road deaths on NSW roads.¹

On average, each year

74 lives

are lost due to drug related crashes.¹

Over a five year period,

67%

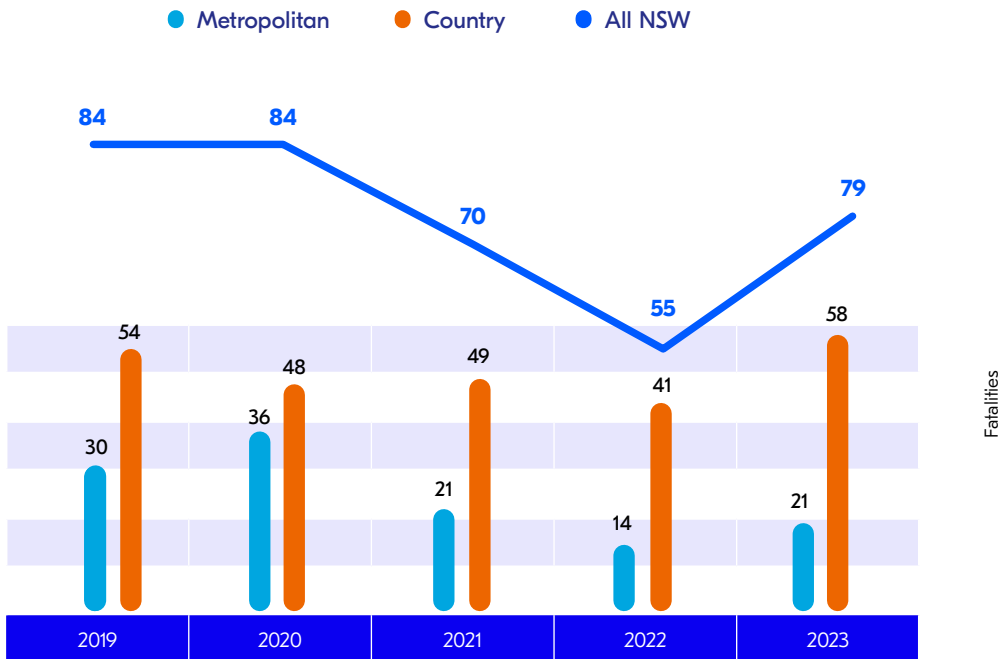
of all illicit drug related fatalities occurred on country roads.¹

In 2023,

79 people

lost their lives in drug related crashes (up from 55 in 2022).¹

Figure 1. Number of illicit drug fatalities during 2019 – 2023 by urbanisation.



Source: NSW Centre for Road Safety.

Driver or motorcycle riders with the presence of an illicit drug involved in fatal crashes (2019 – 2023)

Type of illicit drug

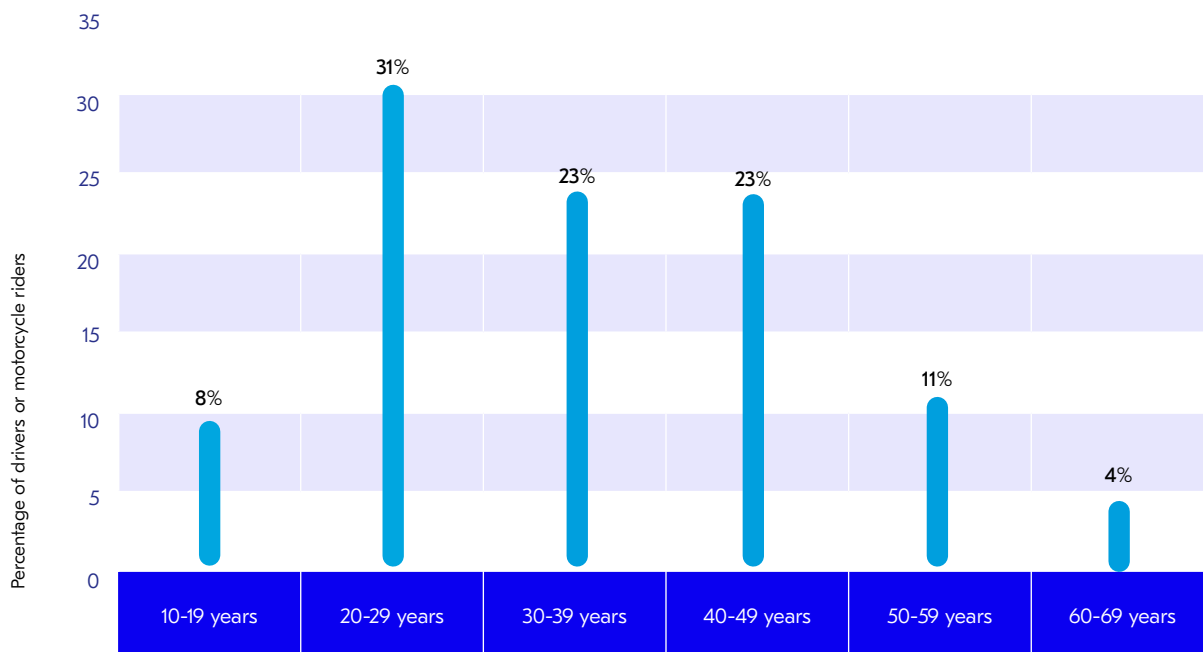
- Cannabis 69%
- Methylamphetamine (ice) 43%
- Cocaine 7%
- MDMA (ecstasy) 5%

Gender

- Males 85%
- Females 15%

Drivers who combine illicit drugs with alcohol can increase their risk of a fatal crash by 23 times.³

Figure 2. Percentage of drivers or motorcycle riders with the presence of an illicit drug in their system involved in fatal crashes by age (2019 – 2023).



Source: NSW Centre for Road Safety.

Tested positive

NSW Police conducted

159,610

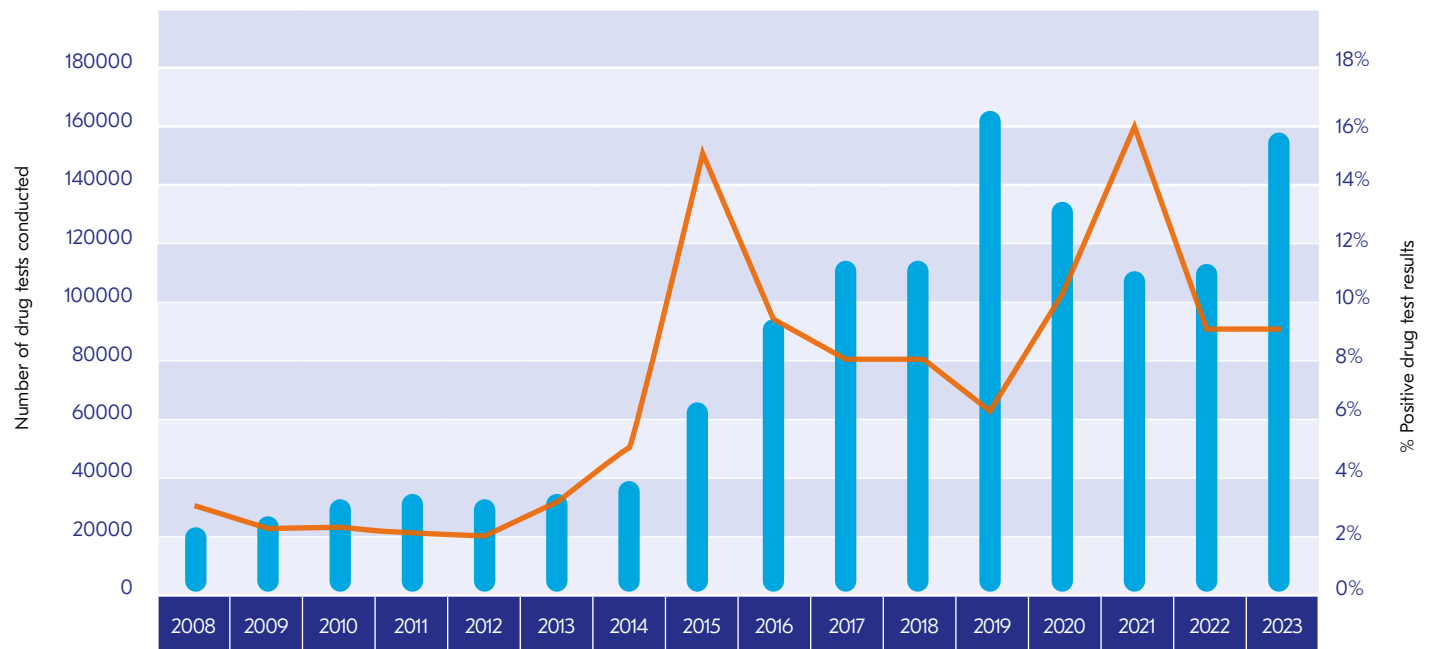
roadside drug tests in 2023.²

Almost

1 in 10

tested positive to illicit drugs.

Figure 3. Number of roadside drug tests conducted vs positive results in NSW.



Source: Department of Infrastructure, Transport, Regional Development, Communication and the Arts.

Stopping drugged drivers in their tracks

Drug driving has been the second leading cause of fatalities in NSW surpassing drink driving, fatigue and non-seatbelt use (Figure 4).

Five years of data shows that drug driving is not solely a city issue, with nearly 70 per cent of illicit drug-related fatalities occurring on country roads. Male drivers and motorcycle riders are significantly overrepresented in fatal crashes involving illicit drugs (85%). Additionally, drug driving is not just a problem among young people. While 31 per cent of drivers or riders involved in fatal crashes were aged 20-29, 23 per cent were aged 40-49, and 23 per cent were aged 30-39.

Mobile Drug Testing (MDT) plays a vital role in catching drug drivers. It can be conducted by NSW Police during roadside operations or when patrolling NSW roads. MDT detects the presence of four illicit drugs:

- THC (delta-9-tetrahydrocannabinol, the active ingredient of cannabis)
- Methylamphetamine (also known as ice and speed)
- MDMA (the active ingredient in ecstasy)
- Cocaine

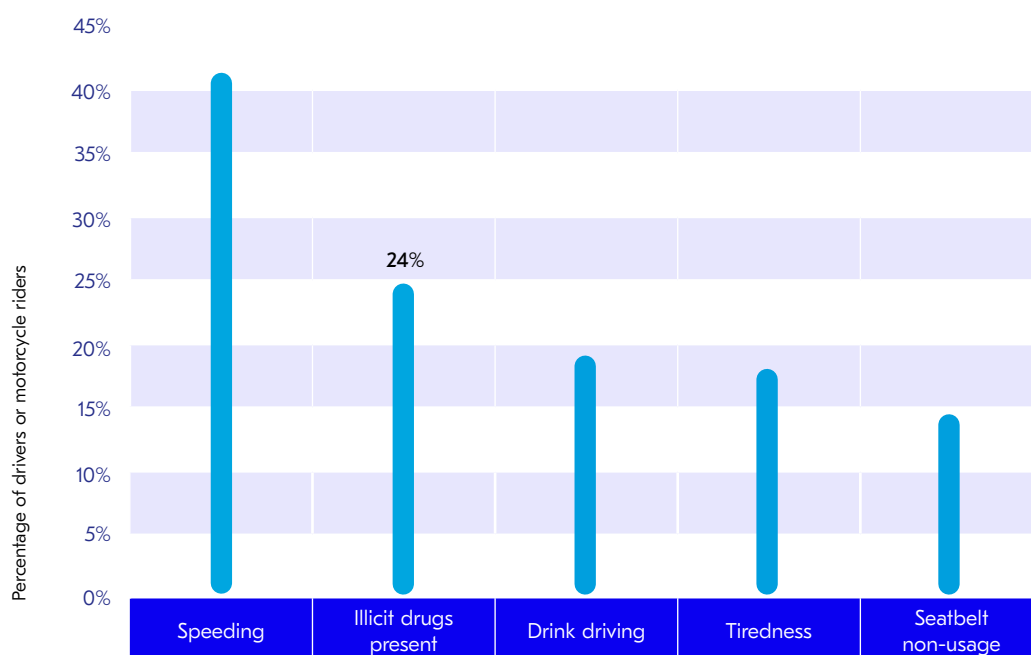
Testing for cocaine as an illicit drug was introduced in July 2018.

During 2019–2023, the most common illicit drug involved in fatal crashes by drivers or motorcycle riders was cannabis (69%), followed by methylamphetamine (43%), cocaine (7%) and MDMA (5%).

This information is essential for understanding and addressing the role of drug driving in road crashes. Currently, regular reporting of drug driving fatalities is not publicly available. Given the significant involvement of illicit drugs in crashes, it is crucial to include this data alongside other behavioural factors in road toll reports.

It is clear that a public awareness campaign is needed to educate people on the dangers of drug driving. This must be combined with adequate funding and resourcing to maintain a strong visible police presence to catch drug drivers, particularly on country roads.

Figure 4. Behavioural factors in NSW fatalities



Source: Transport for NSW.



Expanding post-crash testing

Accurately measuring drug involvement in road crashes is crucial. With mandatory testing limited to only fatal crashes, there is no data available on drug involvement in serious crashes. It is likely that that issue of drug driving is far greater in NSW than is currently known.

Expanding post-crash drug testing to crashes that cause grievous bodily harm is one of the measures in the NSW 2026 Road Safety Action Plan that is yet to be implemented.⁴ We would welcome the introduction of stronger post-crash drug testing to serious injuries and the public release of the data.

Failure to hit target

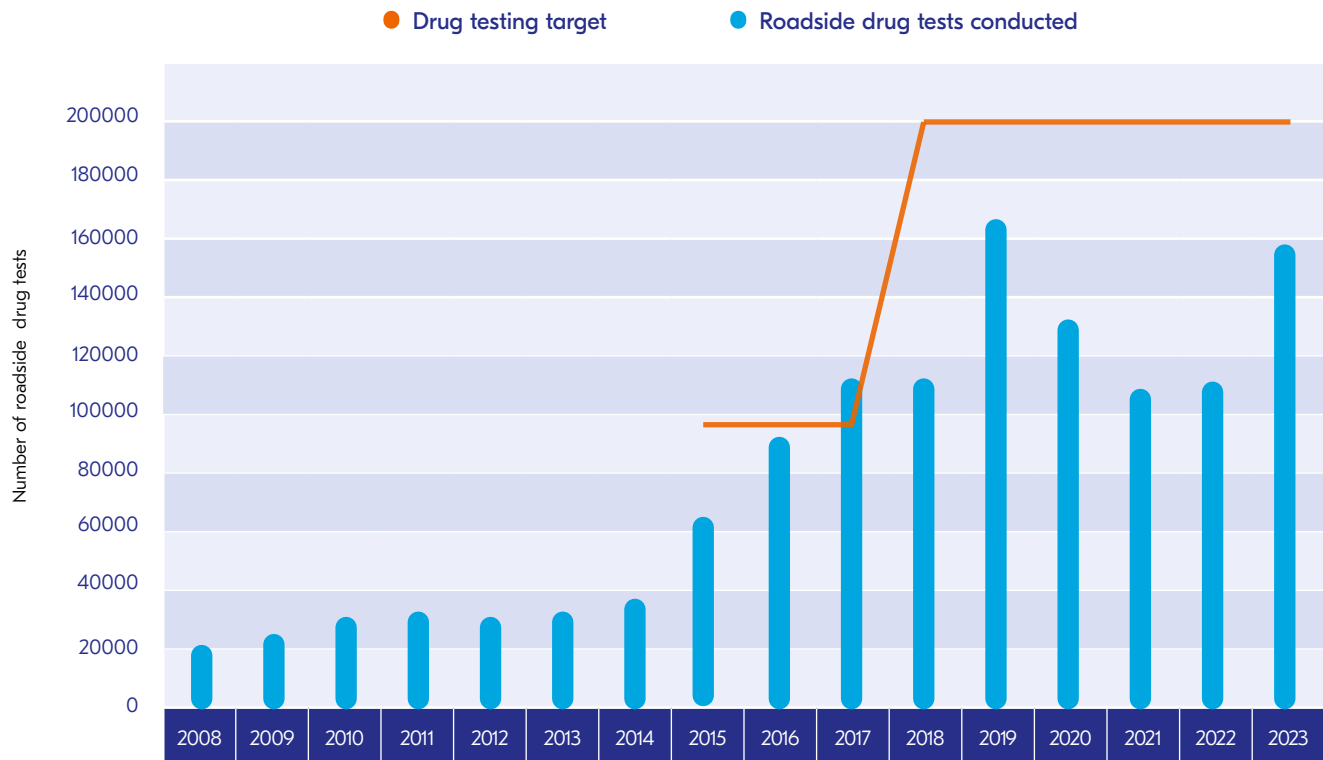
To our knowledge, NSW have set mobile drug testing targets since 2015. The NSW Government committed to tripling the number of roadside drug tests to 97,000 by 2017.⁵ This was achieved with over 110,000 tests conducted.

In 2018, the NSW Government announced plans to double the number of roadside drug tests from 100,000 annually to 200,000 by 2020.⁶ For the past six years, this target has never been met. The closest NSW came to achieving this target was pre-COVID with 166,351 tests conducted in 2019, as shown in Figure 5. In 2023, only 159,610 tests were conducted.² With drug driving contributing to 24 per cent of road fatalities, it is crucial that this target is met by 2026. Any increase in drug testing should not be at the detriment of the existing Random Breath Testing program.

Achieving best practice

The NSW Drug and Alcohol Road Safety Advisory Group was established in 2022 as an action from the 2026 Road Safety Action Plan. One of the Advisory Group's objective was to 'recommend ways to achieve greater efficiency, enforcement levels (including target number of drug and breath tests), and deterrence of drink and drug driving across the state'.⁴ The NRMA would welcome the public release of the group's findings.

Figure 5. Number of roadside drug tests conducted in NSW vs drug testing target.



Source: Australian Government: Department of Infrastructure, Transport, Regional Development, Communication and the Arts.

Release drug testing enforcement data

The NSW Government reports to the Australian Government on the number of roadside drug and alcohol tests they undertake. This data is publicly released each year around late September, once all the data is collated from the other states and territories. Road safety stakeholders and the public are unable to obtain any NSW drug or alcohol enforcement data prior to this release.

Timely data is vital to assess the effectiveness of enforcement measures in addressing the rising road toll. Roadside drug and alcohol testing data should be made publicly available annually, within three months after the end of the calendar year.



Medications

Illicit drugs are not the only substances that can impair driving; prescription and over-the-counter medications can also affect one's ability to drive safely. This includes medication used to treat conditions such as depression, anxiety, cold and flu symptoms, and sleep disorders.

These medications may impact vision, reaction time, mood, decision-making skills, and coordination and thereby impairing the ability to drive. Symptoms may be further exacerbated if medications are taken while consuming alcohol or using illicit drugs, if the prescribed dosage is exceeded, or if a combination of substances is taken.

The public needs to be aware that they can be charged if they are caught driving under the influence of medications. Medications, like all drugs can be detected through blood or urine tests ordered by police if they have a reasonable suspicion that a driver is under the influence of drugs.

Warning labels on medications play an important role in advising people to monitor the effects of the medication and evaluate their own impairment and fitness to drive. A review of the warning labels to improve driver awareness and compliance is warranted. An education campaign advising people on the effects medications may have on their driving is also needed.



A number of common medicines, both prescription and over-the-counter, can impair your ability to drive safely. Some have the equivalent effect of driving with a BAC (Blood Alcohol Content) of 0.05% or more. So it's important for your safety and that of other road users that you always ask your doctor or pharmacist for advice, especially when starting a new medicine or an increased dose.



Medicine and driving campaign by Transport Accident Commission (Victoria) and the Pharmaceutical Society of Australia aimed at providing drivers and riders with information about pharmacy medications and how they affect driving.

Medicinal cannabis

Medicinal cannabis is a prescribed medication that may contain delta-9-tetrahydrocannabinol (THC) the active ingredient of cannabis and/or cannabidiol (CBD). It is most often used to treat chronic pain, cancer symptoms, and anxiety. There has been a growing public debate about drug driving laws, especially when it comes to medicinal cannabis use. Unlike other medication, THC can be detected on the roadside.

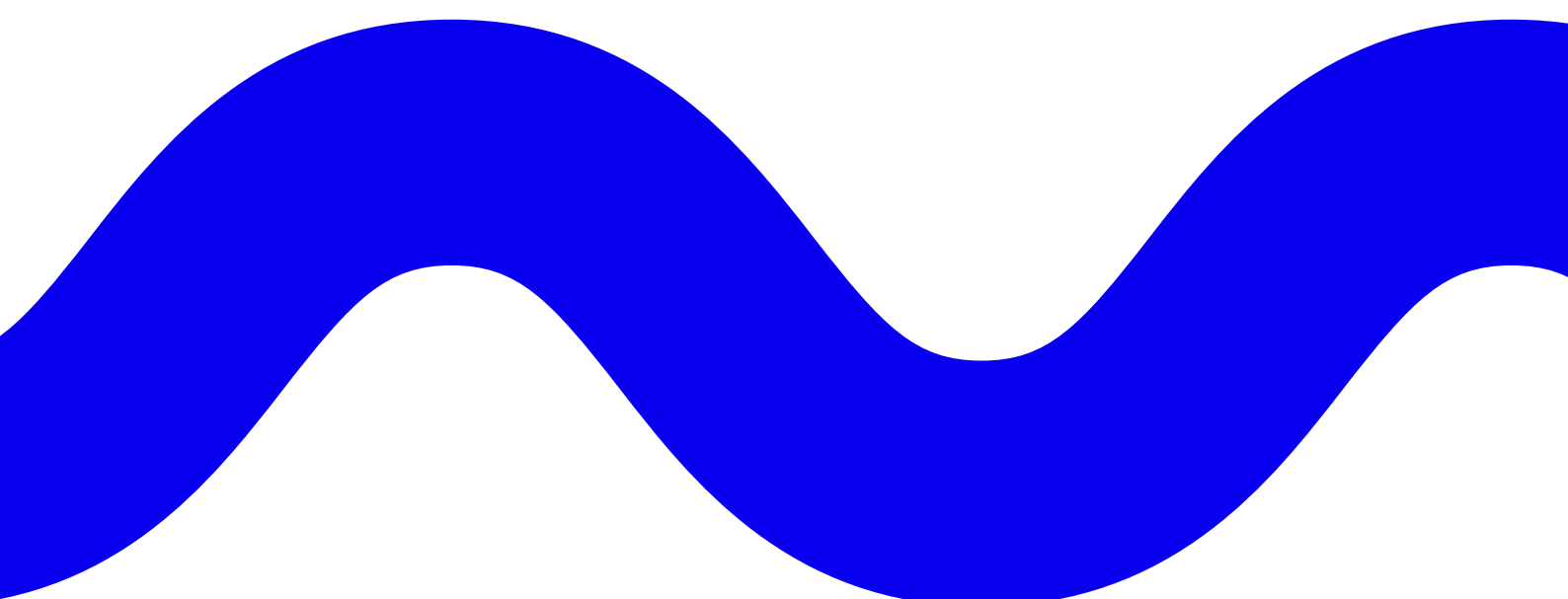
Currently, it is illegal to drive in NSW with the presence of THC in your system, which can be detected on the roadside via MDT. However, people taking medicinal cannabis products containing only CBD are allowed to drive as long as they are not impaired. Tasmania is currently the only Australian jurisdiction that allows a medical defence for driving with the presence of THC.

In NSW, THC was the most common illicit drug involved in fatal crashes by drivers or riders during 2019-2023 (69 per cent). The increased crash risk with THC is well supported by research. As stated in the Queensland Government's Cannabis and Driving in Queensland consultation paper:

"There is an extensive body of research literature that describes the increased crash risk associated with THC (the active ingredient in cannabis). Driving related impacts that may occur include slower reaction time, increased lane deviations, decreased car handling performance, impaired time and distance estimation, inability to maintain distance between vehicles and impaired sustained vigilance (Couper and Logan, 2014). Studies on crash risk in medicinal cannabis patients are less common and have less clear results (for example, Bosker et al, 2012)".⁸

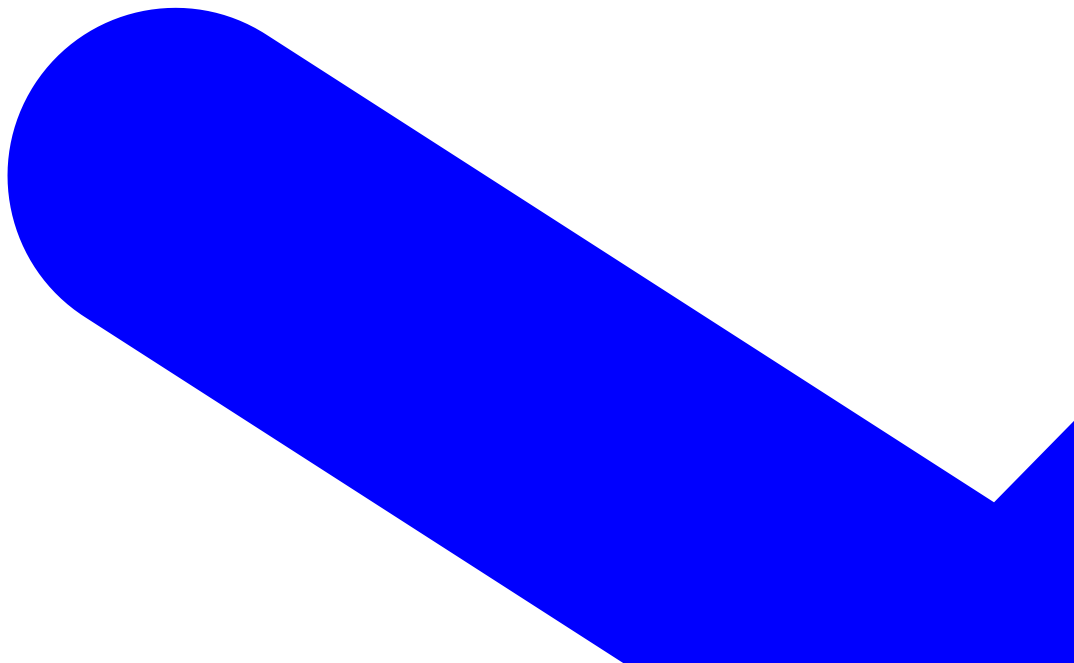
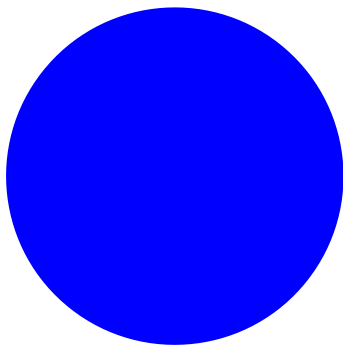
The Victorian Government, in partnership with Swinburne University, is currently undertaking a world-first medicinal cannabis driving trial to see whether people can drive with any level of medicinal cannabis without compromising road safety. The results of the 18-month trial will play a key role in shaping future drug driving reforms.

Due to the current drug driving laws, people who take prescribed medicinal cannabis continue to face mobility issues. However, with a high road toll and drug driving contributing to 24 per cent of lives lost on NSW roads a cautious approach is needed to ensure road safety is not compromised. Continued investment into drug driving research and developments around medicinal cannabis is needed.



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