

ORANGE COUNTY DRINKING AND DRIVING
2008 COMMUNITY FORUM
DECEMBER 10, 2008

DUI

**CAN YOU PAY
THE PRICE?**



NEW!
Orange County DUI
Prevention Task Force
being formed.
See back cover
for details.

Sponsored and funded by the Alcohol Impaired Driving Task Force of Costa Mesa, Automobile Club of Southern California, County of Orange Health Care Agency Alcohol and Drug Education and Prevention Team (ADEPT), County of Orange Office of the Second District Chairman John Moorlach, University of California Irvine, Center for Trauma and Injury Prevention Research.



EXECUTIVE SUMMARY JUNE 2009

A copy of this Executive Summary and
PowerPoint presentation slides are available online at
www.ohealthinfo.com/adept/publications

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Alcohol Impaired Driving Task Force of Costa Mesa

Automobile Club of Southern California

County of Orange Health Care Agency Alcohol and Drug Education and Prevention Team (ADEPT)

Office of Orange County Supervisor, Second District, John M. W. Moorlach

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EXECUTIVE SUMMARY

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- * **Amy Buch**, *County of Orange Health Care Agency*
- * **Anita Lorz**, *Automobile Club of Southern California*
- * **Chief Christopher Shawkey**, *Costa Mesa Police Department*
- * **Creg Datig**, *California District Attorneys Association*
- * **David Doucette**, *California Office of Traffic Safety*
- * **Federico Vaca, M.D.**, *University of California Irvine, Center for Trauma and Injury Prevention Research*
- * **Gregg Hanour**, *Shark Club, Alcohol Impaired Driving Task Force of Costa Mesa*
- * **Jim Nichols, Ph.D.**, *Nichols and Associates*
- * **Judge Carlton P. Biggs**, *Superior Court of California, County of Orange*
- * **Kathy Moran for Supervisor John Moorlach**, *County of Orange*
- * **Michael Sparks**, *Alcohol Policy Specialist*
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Exhibitors

- * *Automobile Club of Southern California*
- * *Community Service Programs, Inc./Positive Action Toward Health*
- * *County of Orange Health Care Agency, Alcohol and Drug Abuse Services/Prevention*
- * *County of Orange Health Care Agency, ADEPT*
- * *Mothers Against Drunk Driving – Orange County Chapter*
- * *National Council on Alcoholism and Drug Dependence-Orange County Community Alliance Network*
- * *Orange County Department of Education: OC Friday Night Live Partnership (OCFNLP)*
- * *Ventura County Behavioral Health Alcohol and Drug Prevention Services*

The Steering Committee would also like to thank the Alcohol Impaired Driving Task Force of Costa Mesa for hosting the event; the Costa Mesa Neighborhood Community Center for facility space; the Corner Bakery for catering the event; and the Community Forum attendees for their participation in the Community Forum process.

INTRODUCTION

The Centers for Disease Control and Prevention has dubbed December as the National Drunk and Drugged Driving Prevention Month (3-D Month); a time when communities come together to identify strategies that reduce injuries and deaths from impaired driving. The Automobile Club of Southern California and the Orange County Health Care Agency Alcohol and Drug Education and Prevention Team (ADEPT) teamed up with the Alcohol Impaired Driving Task Force of Costa Mesa to host an all day Community Forum after discovering that levels of alcohol-related crashes in the County had increased sharply over the previous 10 years. What started off as a 2-hour town hall event quickly turned into an all day comprehensive and multidisciplinary conference designed to discuss innovative strategies for reducing drinking and driving and to promote local efforts that effectively deal with drinking and driving related issues in Orange County. The Community Forum, held at the Costa Mesa Community Center, attracted over 130 individuals representing a wide range of disciplines with a shared interest and commitment to reducing impaired driving in Orange County.

With a primary purpose of examining drinking and driving related issues in Orange County, the goals of the Community Forum were to identify how drinking and driving is a problem in Orange County; and to highlight (or discover) innovative strategies and approaches Orange County can implement to effectively address the issues. In doing so, it required the participants to:

- A. Understand the Recommendations set forth by the California Strategic Highway Safety Implementation Plan (SHSIP) that addresses driving under the influence (DUI) related issues (see page 6 for detailed information).
- B. Review the best practices in Orange County.
- C. Learn about the legislative and policy recommendations set forth by the California Office of Traffic Safety and the Automobile Club of Southern California. And to,
- D. Identify the necessary action steps Orange County can take to address the issues on a countywide level.

It also required obtaining as much information as possible from experts in the field and allowing the participants to engage in a dialogue with the experts to discuss the issues at length and to develop innovative approaches that will comprehensively (and effectively) address the issues. As such, the Community Forum consisted of morning presentations and an afternoon break out session.

As a by-product (and outcome) of this Community Forum process, this Executive Summary was developed to highlight the day's activities; to summarize the scope of the problem, best practices and lessons learned from the field; to identify innovative and localized approaches that will comprehensively address the issues on a countywide level; and to set the stage for creating **the Orange County DUI Task Force that will be launched in August 2009.**

This Executive Summary is organized in three sections. **Section One** introduces the scope of the problem and the DUI prevention efforts in Costa Mesa. **Section Two** provides a brief summary of the Community Forum format, morning presentations, presenter questions and answers, small group break-out sessions, identified action steps, and media press coverage received. And **Section Three** summarizes the results of the participant evaluations and provides contact information for the Community Forum participants.

SECTION ONE:

Scope of the Problem in California and Orange County

According to the National Highway Traffic Safety Administration (NHTSA), driving under the influence (DUI) continues to be a major Public Health problem in the United States and it estimates that two in five Americans will be affected by alcohol related collisions during their lifetime.¹ The impact of alcohol impaired driving has increased over time. In California, 10.5% of traffic crash injuries in 2005 were alcohol-involved (which was relatively unchanged from 10.4% in 2004)²; the number of alcohol-involved traffic fatalities increased by 7.7% in 2005; and the number of people killed in alcohol-involved collisions has risen from 1,233 in 2000 to 1,489 in 2007.³ Among the DUI arrests, over three-quarters (75.7%) of arrested drivers in alcohol-involved fatal crashes had no prior DUI or reckless driving convictions⁴; 21.3% of all 2005 California DUI arrests occurred in Los Angeles County. Four California counties (Los Angeles, San Diego, Orange, and San Bernardino) had over 10,000 DUI arrests each, which accounted for 43.9% of all arrests⁵; and the rate of DUI arrests rose 0.7% (13,742 in 2003; 13,492 in 2004; and 13,586 in 2005) in Orange County⁶. The good news is, in 2007, alcohol involved fatal collisions decreased by 5.1% and the number of alcohol involved persons killed decreased by 6.8% over the previous year. This is the first decrease in these numbers in the last ten years.⁷

¹ 2008. California Office of Traffic Safety.

² 2007. California Department of Motor Vehicles. Annual Report of the California DUI Management Information System.

³ 2009. California Highway Patrol News. A Green Light For Designated Drivers.

⁴ 2007. California Department of Motor Vehicles. Annual Report of the California DUI Management Information System.

⁵ 2007. California Department of Motor Vehicles. Annual Report of the California DUI Management Information System.

⁶ 2007. California Department of Motor Vehicles. Annual Report of the California DUI Management Information System.

⁷ 2007 California Quick Collision Facts

According to the Automobile Club of Southern California, the number of fatalities in crashes caused by drinking and driving in Orange County rose 48% (from 31 to 46), which is far higher than the increase recorded for the state as a whole – just 13%. In particular, alcohol-related fatal crashes on Orange County roads rose 74% (from 43 to 75), far higher than the increase recorded for the state as a whole – 41%. In addition, the County of Orange Health Care Agency Alcohol and Drug Education Prevention Team released a report on the Circumstances of Last Drink Survey (COLD) identifying the cities where people end their nights of drinking before getting arrested for DUI. Laguna Beach, Newport Beach, and Costa Mesa ranked as the top three cities (56.87, 29.60, 17.45 per 10,000 adults) as the place of last drink prior to arrest; and Laguna Beach, Costa Mesa, and Brea as the top three cities (76.09, 21.07, and 19.45 per 10,000 adults) as the place of DUI arrests⁸.

Costa Mesa DUI Prevention Efforts: Alcohol Impaired Driving Task Force of Costa Mesa

The Alcohol Impaired Driving Task Force of Costa Mesa was formed in November 2005 in response to the 2002 COLD Report ranking Costa Mesa as one of the top 3 cities for the place of last drink prior to a DUI arrest and the city with the highest number of DUI arrests in Orange County. With a membership mailing list of 40 plus individuals (from within the county and across the state), 10-15 active members attend the monthly meetings representing county government; law enforcement; education (K-12 and higher education); alcohol establishments; and community based organizations (i.e., Automobile Club of Southern California, Chamber of Commerce, MADD, RADD, etc.). As a primary goal to

reduce and/or prevent alcohol impaired driving in Costa Mesa, the Task Force has three primary focus areas:

- A. Provide Responsible Beverage Service (RBS) trainings to Costa Mesa alcohol servers and staff;
- B. Increase awareness on the social, legal, and financial consequences of alcohol impaired driving through media campaigns and educational opportunities; and,
- C. Establish a framework for encouraging (and/or mandating) alcohol establishments to participate and complete a RBS training program for all employees within a certain timeframe.

As a result of putting these projects in place, the Task Force has provided eleven RBS trainings and trained over 139 alcohol servers (and related staff); expanded the RBS training curriculum to include a 14 to 30 - day follow up component; implemented three media campaigns; and established relationships with key community stakeholders to develop (and implement) a RBS training requirement program for alcohol establishments.

SECTION TWO:

Community Forum Format

To effectively achieve the goals of the day, the Community Forum was organized in five components.

1. Morning Presentations:

The first component consisted of morning presentations by local, state and national experts in the field of drinking and driving who provided an overview of the issues at hand and identified some innovative intervention strategies cities and counties can adopt.



From Left to Right. Top Row: Tom Brennan, Mary Beth Griffin, Steve Bloch, Gregg Hanour, Linda Kearns, Anita Lorz, Diane Winn, and Anthony Pang. Bottom Row: Heather Green, Monica Venable, Marianne Cadiz, Kathy Kendrick, Pauline Stauder, Camille Coronel, and Irene Umipig.

⁸ 2008. County of Orange Health Care Agency, Circumstances of Last Drink Survey

To help facilitate the day's activities and maintain the timing of the agenda, Anita Lorz, of the Automobile Club of Southern California, moderated the event and introduced the speakers and Community Forum activities.

I. Welcome / Opening Remarks

Anita Lorz, Automobile Club of Southern California
Gregg Hanour, Shark Club, Alcohol Impaired Driving Task Force of Costa Mesa
Chief Christopher Shawkey, Costa Mesa Police Department
Kathy Moran, for Supervisor John Moorlach, County of Orange

II. An Overview of Impaired Driving – US, California, Orange County

Federico Vaca, M.D., University of California Irvine, Center for Trauma and Injury Prevention Research

III. How Impaired Driving is Being Addressed and Recommendations for the Future

David Doucette, California Office of Traffic Safety
Steve Bloch, Ph.D., Automobile Club of Southern California
Judge Carlton P. Biggs, Superior Court of California, County of Orange
Steven Beeuwsaert, California Highway Patrol
Creg Datig, California District Attorneys Association
Michael Sparks, Alcohol Policy Specialist

IV. An Historical View of Efforts to Reduce Alcohol Impaired Driving: What Holds Promise for the Future?

Jim Nichols, Ph.D., Nichols and Associates (formerly with the National Highway Traffic Safety Administration)

V. Strategic Highway Safety Implementation Plan (SHSIP) Overview

Patrice Rogers, California Department of Motor Vehicles

Presentation Summaries

Forum sponsors and stakeholders offered opening remarks and briefly defined expectations. **Anita Lorz**, Public Affairs Specialist, Automobile Club of Southern California, briefly spoke about the organization's commitment to the reduction of DUI; introduced the findings of their recent DUI research to be presented later in the program; and highlighted several pending legislative bills that may be of interest. In addition, she moderated the day's activities and made sure the presentations were in alignment with the timing of the agenda.

Kathy Moran from the Office of Chairman John M.W. Moorlach, Supervisor-Second District, presented Gregg Hanour, owner of the Shark Club and member of the Alcohol Impaired Driving Task Force of Costa Mesa, with a Proclamation from the County of Orange Board of Supervisors to acknowledge the work of the Alcohol Impaired Driving Task Force of Costa Mesa and the prevention efforts taking place in Costa Mesa.

Chief Christopher Shawkey, Costa Mesa Police Department, discussed the importance of responsible beverage service (RBS) to deter serving of alcohol to under age-21 patrons in the city's restaurants and bars, and plans for expanded DUI checkpoints and patrols.

Expert speakers offered new research, identified issues and challenges, highlighted best practices and discussed innovative strategies to reduce DUI. Federico Vaca, MD, MPH, Professor of Emergency Medicine and Public Health, University of California, Irvine offered the newest impaired driving fatality research statistics and offered a three-pronged approach to more

effectively address impaired driving in Orange County: (1) high visibility law enforcement, (2) DUI courts and special prosecutors, (3) screening and brief intervention and referral for treatment. Using the National Institute of Health (NIH) standards for healthy people who consume alcohol: 40% of the general population are non-drinkers, 35% of the general population are not at-risk, 20% are at-risk and 5% are dependent drinkers.

Steve Bloch, PhD, Traffic Safety Researcher, Automobile Club of Southern California, provided an analysis of California drinking and driving data from 1998 to 2007 showing that alcohol-related crashes involving young adult female drivers increased dramatically, in which female drivers ages 21-24 involved in fatal and injury alcohol-related crashes more than doubled, rising by 116%. Whereas, their male counterparts' crashes rose 39% during the same period. A similar trend is indicated for females ages 18-20, who were involved in 83% more alcohol-related fatal and injury crashes in 2007 than in 1998. Bloch indicated the reporting of celebrity DUI arrests in Hollywood may be indicative of a broader trend. It is a new trend and may reflect changing norms for women, the popularity of alcoholic beverages targeting a younger or female audience, or that female blood alcohol concentration (BAC) will be higher than equivalent male BAC, given the same alcohol consumption over an equivalent period of time. On the positive side, Bloch continued, research indicates women are more amenable to education, prevention and early intervention programs than are their male counterparts.

Judge Carlton P. Biggs, Superior Court of California, County of Orange, started the first DUI Court program in the county four years ago. He presides over DUI Court at Harbor Justice Center in Newport Beach. DUI Court programs are also in place at the Central Justice Center in Santa Ana and the North Justice Center in Fullerton. Biggs was quick to acknowledge that DUI court is not a "silver bullet" to reduce/eliminate alcohol impaired driving. He noted that the court focuses on only one aspect of the problem and that all prevention strategies are necessary to effect behavioral change: education, intervention and law enforcement. For 75% of offenders, one arrest is enough to change their behavior; the remaining 25% are frequent re-offenders. Jail, said the Judge, is most often not effective; the amount of jail time is not enough to lead to a change in behavior. It allows the offender to undergo detoxification, but without treatment a return to offending is highly likely.

The purpose of the DUI Court is to protect the public, reduce recidivism and assist offenders in addressing and solving the problems that cause them to make irresponsible decisions. It is designed for offenders who have received their second or third arrest for DUI and are ready to address their addiction. DUI Courts offer offenders a program of services: access to support, treatment and therapy groups; monitoring; and positive reinforcement for behavioral change throughout the program. DUI Court offenders are tested three times per week or more, with spot checks at home. A follow-up study has been conducted on 250 offenders who graduated from Judge Biggs' DUI Court program; only three have been rearrested for DUI.

Former Chief Deputy District Attorney **Creg Datig**, a prosecutor for over 25 years and director of the Traffic Safety Resource Prosecutor (TSRP) Program for the California District Attorneys Association, addressed the goals of the TSRP program. Datig launched the TSRP program in February 2007, the first state in the nation to offer a DUI TSRP program. Now TSRP serves five regions, including Northern California, Central Valley, Central Coast, Greater Los Angeles and Southern/Inland Empire with six prosecutors and a training coordinator. The goal of the TSRP program is to provide training and support to local prosecutors to increase conviction rates and frequency in DUI and DUI-related cases. The program offers local prosecutors technical assistance on specific cases and general policy, plus frequent specialized training including the annual vehicle homicide seminar and quarterly regional seminars featuring trial advocacy, defense experts, crash reconstruction, DUI/drugs and other pertinent topics.

Michael Sparks, M.A., an Alcohol Policy Specialist, addressed drinking and driving issues from a public health and environmental prevention perspective and differentiated between individual based and community based prevention strategies. Individual based strategies focus on the lack of information, knowledge, and/or skills individuals have about alcohol and other drugs (AOD). Whereas, environmental based strategies focus on the social, physical or public environment where the sale and/or use occur. The AOD problems are not just individual addiction, but rather a collective reflection of community norms, values and practices. These strategies also seek to change the physical, legal, economic & social processes of communities. In essence, the strategies are based on behavior being powerfully shaped by the environment that consists of community-based (and community-driven) interventions that can affect the whole population. Common effective and science based strategies target social and retail availability of alcohol, social norming, perceived risk of detection and sanctions of DUIs, and promotion of alcohol of use.

David Doucette, Assistant Director of the California Office of Traffic Safety (OTS), provided a brief overview of the California Impaired Driving Technical Assessment that was conducted in September 2007 in response to OTS's desire to assess the state's alcohol and drug impaired driving countermeasures program. As a result of this assessment process, 5 subject areas and 17 priority recommendations were identified.

In addition, effective impaired driving programs should begin with strong leadership, sound policy development, program management, strategic planning, and an effective communication program. The program efforts should also be data driven and science based that focus on populations and geographic areas that are most at risk. Last, but not least, the programs should be guided by problem identification and carefully managed (and monitored) for effectiveness and supported with dedicated resources to address the issues.

To view this report in its entirety, an electronic copy can be obtained from the California Office of Traffic Safety's website at <http://www.ots.ca.gov/pdf/Publications/CaliforniaImpairedDrivingTechnicalAssessment.pdf>

Former National Highway Traffic Safety Administrator (NHTSA) Director, **Jim Nichols, PhD**, consultant, provided a brief historical overview of U.S. efforts to reduce alcohol impaired driving. During the 1960s, the Highway Safety Act of 1966 was passed and it created state and federal agencies (and funding) to address the problem. In 1968, a Report to Congress on Alcohol and Highway Safety documented the depth and breadth of alcohol impaired driving issues in the United States (which set the stage for developing "systems" based programs in the 1970s) and it resulted in a reduction in motor vehicle fatalities; in better understanding the complexities of the issue; and demonstrated the need for a reporting and surveillance system. The 1970s was a time when the first administrative licenses revocation law was enacted in Minnesota. During the 1980s, "activism and deterrence" were key themes of the decade. State task forces and legislation were created; sobriety checkpoints and enforcement activities were heightened; and media interest/coverage highlighted the issues. As a result, there was a decline in the number of fatalities associated with alcohol impaired driving; fewer individuals reported driving after drinking; and there was a shift in social acceptability of drinking and driving. Unfortunately, as these (and other) strategies continued, fatality rates leveled off and efforts became less clearly categorized. However, several key milestones were achieved. Sobriety checkpoints were approved by the United States Supreme Court in 1990; the National Highway Safety Designation Act of 1995 was enacted, which established the "zero tolerance law" for drivers under the age of 21; and the U.S. Congress adopted the National Blood Alcohol Concentration level of 0.08 as the standard measure legal definition of intoxication. And finally, during the past decade, national media campaigns continue to take place during key times of the year; sobriety checkpoints continue in local communities; high visibility enforcement activities take place throughout the country; ignition interlock systems/legislation are being expanded; and grassroots prevention strategies continue to address local community concerns. As we take a look into the future, strengthening deterrence, prevention, seat belt use, and technology based strategies will continue to be at the forefront in addressing the issues.

Steve Beeuwsaert, Assistant Chief, California Highway Patrol (CHP) discussed statewide DUI enforcement, stated that although DUIs have been vigorously pursued with aggressive media campaigns, impaired driving continues to be a persistent traffic safety problem in California and throughout the county. There is a lack of public outrage, he said; during 2006, for California alone, more people died in alcohol-related vehicle crashes (1,509) than died in the Iraq war in 2007 (901 U.S. troops). Nationally, someone dies approximately every 31 minutes in an alcohol-involved vehicle crash, while someone is injured every two minutes. Beeuwsaert provided an overview of California Vehicle Codes relative to DUI, the enforcement and

public education programs offered by the CHP, and reinforced the need for continued focus on prevention strategies, such as:

- *Education – to change the culture of drivers*
- *Law enforcement*
- *Law enforcement training*
- *Review effectiveness of existing sanctions*
- *Strong legislation*
- *Enhance treatment*
- *Streamline and ensure adjudication*
- *Develop new and innovative measures*

Patrice N. Rogers, Research Program Specialist, California Department of Motor Vehicles and co-leader of the California Strategic Highway Implementation Safety Plan (SHSIP) DUI Team, summarized the SHSIP and highlighted Challenge Area 1, which is to reduce impaired driving related fatalities. The SHSIP was developed as a result of the 2005 Federal Transportation Bill (SAFETEA-1,U) that required the California Department of Transportation (or CalTRANS) to develop a statewide strategic highway safety plan. As an overarching goal of reducing vehicle related fatalities to 1.0 fatality per 100 million vehicle miles traveled by 2010, the SHSIP established 16 challenge areas to address in order to achieve this goal and impaired driving was identified as the number one challenge area for California. With the primary goal of reducing alcohol and drug related highway traffic fatalities by 15 percent, this challenge area has 17 Safety Needs Action Plans (SNAPs) that can be categorized in one or more of the following areas.

- **Improve enforcement and deterrence** by increasing the number of sobriety checkpoints; providing evidential breath testing equipment; increasing the number of Drug Recognition Expert (DRE) trainings; and strengthening license suspension provisions.
- **Streamline and ensure consistent adjudication of arrested impaired drivers** by providing prosecution mentoring and training opportunities; establishing vertical prosecution protocols; and developing judicial reference materials.
- **Strengthen offender and system monitoring and evaluation** with localized assessment of DUI rates by court or county; track and monitor DUI class enrollment and completion rates; evaluate innovative DUI countermeasures; and improve (and publicize) DUI management information systems.
- **Restrict youth access to alcohol and drugs** by strengthening minor decoy; shoulder tap; and TRACE (Target Responsibility for Alcohol Connected Emergencies) programs
- **Increase the emergency medical response system** by developing a hospital notification system and hospital screening and brief intervention programs.
- **Enhance prevention and intervention programs** by developing a community coalition tool kit; providing Responsible Beverage Service (RBS) trainings, etc.

For a detailed description of the SHSIP, its 16 challenge areas, and the 17 SNAPs associated with impaired driving, the California Department of Transportation developed and maintains a website dedicated to the development and implementation of the SHSIP, which can be accessed at <http://www.dot.ca.gov/SHSP/>

You Got A Question: The Speakers Have An Answer

In recognizing that time for questions and answers would be very limited, “You Got A Question: The Speakers Have An Answer” index cards were supplied at each table for attendees to use if they wanted to ask one of the speakers a question. Unfortunately, as predicted, time was not available to respond to the questions; however, below are the questions presented and the answers provided by the experts in the field.

All Speakers

1. **Can we get a list of e-mails of those that attended today and the speakers’ e-mails? It would be helpful to be able to have e-mails for networking beyond today with those you didn’t have the opportunity to meet.**

Yes, you may post my contact information, but please limit it to telephone number and email address. Please do not give my office address.

2. **How many laws are there on drunk driving? I thought all the laws addressed driving under the influence. Maybe we should separate alcohol & automobile and stop talking about acceptable levels**

Nichols: There are several types of laws that address “drunk driving.” Most notably there are Driving Under the Influence (DUI); Driving While Intoxicated (DWI); or Operating Under the Influence (OUI) laws, which define an illegal “behavioral” state (i.e. DWI, DUI, or OUI). With such laws, a blood alcohol concentration level, along with results of behavioral tests (e.g. standardized field sobriety tests) and other observed behavior are used as evidence to convict on the charge.

In addition to these “behaviorally based” laws, there are Illegal Per Se laws that state that it is illegal to be in control of a motor vehicle with a BAC >= some limit (e.g., 0.08). In these cases, all that has to be proven is that there was probable cause to be stopped, that the defendant was in control of the vehicle; that a BAC test was properly administered; and that the BAC was >= the prescribed limit.

Vaca: We should ultimately move to ...“no level of alcohol is acceptable whenever you get behind the wheel.”

Datig: “Drunk driving” is certainly a misnomer. Impairment is the critical determination, and a person can be clearly impaired for purposes of driving without being “drunk.”

Bloch: I stated in my talk that there are no acceptable BAC levels from a traffic safety standpoint. Research shows that all BACs above zero increase crash risk. So the setting of the “acceptable” BAC level is purely political—a function of what the public will accept.

3. What are your thoughts about using the drunk goggles to prevent drinking and driving?

Nichols: Probably not very effective

Bloch: It’s a nice idea. But there is no research I’m aware of that they are effective in reducing DUI.

Creg Datig

1. Why or what part of the “Ambriz” law does not allow for the automatic prosecution on all D.U.I. death cases?

The “Ambriz Act,” that enacted Vehicle Code Section 13385 effective July 1, 2008, does not mandate or permit any “automatic” charging in a vehicular homicide case involving DUI. What this law requires is that all persons who obtain or renew a California driver’s license on or after January 1, 2009, must sign a declaration indicating that they are aware that DUI is dangerous, and that DUI causing death “could” (but not “will” or “must”) result in a murder charge. California law reflects an escalating scheme of culpability for vehicular homicide, which ranges from misdemeanor manslaughter all the way up to murder, depending on various factors including intoxication, defendant’s mental state, and causation of the fatal collision. It is the duty of the prosecutor to analyze each case on its facts and reach a conclusion as to what charge is appropriate under the circumstances, whether misdemeanor or felony, murder or manslaughter, etc. The “Ambriz Act” did not change existing law in that respect, although it was described by some misinformed members of the media as California’s “new” murder law. The primary benefit of the law was to provide another opportunity to inform licensed drivers that DUI is dangerous. It did nothing in regards to unlicensed drivers, and did not mandate any particular sort of charge be filed in DUI-related vehicular homicide cases.

2. In OC, the DA’s are reluctant to prosecute DUI by marijuana offenders. Is anything being done to change this?

During the last legislative session, a bill was introduced that would have set “per se” levels of various controlled substances, including tetrahydrocannabinol (the psychoactive component of MJ), similar to Vehicle Code

Section 23152(b), the “per se” .08% BAC law. This bill failed to pass. Efforts to enact legislation in this area are continuing, both in California as well as nationally. Some states do have laws that make it a violation to drive with any measurable amount of a controlled substance in one’s system, whether it causes actual impairment or not.

Frederico Vaca, M.D.

1. He stated the best state at .20 for alcohol impaired driving fatalities-what state is that?

Utah

2. What have you done to trace injuries/deaths back to the licensed bars/restaurants i.e. How do you see maps informing alcohol “supply side”?

We have not done this but there are tracer programs that are effective – law enforcement side. Mapping (GIS) is a great source of data and informative to the community and decision makers regarding enforcement and policies – hot spots

James Nichols, Ph.D.

1. With an unlicensed driver violation in CA being prosecuted as an infraction or even dismissed with proof of correction, are license revocation sanctions really effective?

License revocation laws are among the most frequently demonstrated measures for reducing recidivism (specific deterrence) and reducing deaths and injuries associated with alcohol related crashes (general deterrence). Your own California DMV has conducted several studies showing the effectiveness of license revocation. I suggest that you contact the DMV for the specific studies.

2. Small Group Break Out Session:

The second component consisted of an afternoon breakout session in which the Community Forum participants were pre-assigned to one of four small groups and tasked with developing recommendations that will address drinking and driving related issues in Orange County. As a resource to the breakout session, each morning presenter participated in the break out session and was available to answer questions, respond to challenges or barriers and to share ideas.

Among the four groups, two focused on Prevention and two focused on Criminal Justice. To ensure equal distribution of participants and expertise diversity, the Forum participants were pre-assigned to a group prior to the Forum. In addition, each group had a facilitator and scribe to lead the process and to take notes accordingly.

Although there were two primary group themes, 6 general categories (and sub-themes) emerged from the group process that spread across all four groups, and they are.

1. **Target Population**
2. **Policy**
3. **Law Enforcement**
4. **Conviction Sentencing Infrastructure**
5. **Education and Training**
6. **Collaboration**

In looking at each category in more detail, the following sub-themes/recommendations were identified:

1. Target Population - When designing initiatives for a specific target population, the initiative should focus on underage drinking and college age drinking (those between the ages of 18 – 24).

- **Underage drinking** - Initiatives should focus on zero tolerance laws, easy access to alcohol, and family support for abstinence.
- **College age population** - Efforts should target binge drinking, disruptive settings, etc.

2. Policy – Policy related issues seemed to be a strong thread throughout all four groups, of which, the following policy areas seemed to be of most interest.

- **Alcohol Outlet Density** – Address the number and proximity of existing and/or new off-sale or on-sale alcohol establishments.
- **Training** - Although training has a category of its own, one policy related suggestion was to mandate Responsible Beverage Service training for all alcohol establishment employees.
- **Alcohol Tax** – Support efforts being made in Sacramento to increase the sales tax for alcohol purchases.
- **Blood Alcohol Concentration (BAC)** – Support BAC infractions on those with violations associated with 0.0 to 0.8 BAC levels.
- **DUI Record Timeframe** – increase the DUI timeframe to “lifetime” on an individual’s record
- **Alcohol Marketing** – Decrease the extent to which the alcohol industry advertises its products in the community and the populations they target.
- **Accountability** – increase measures that would hold entities accountable for their actions.

3. Law Enforcement – in looking at issues related to law enforcement, a number of sub-themes emerged. These are just a sampling of the themes identified.

- **Checkpoints** – Increase the number of checkpoints and supportive services.
- **Visit Alcohol Establishments** – Support police departments that allocate sworn officers to conduct routine alcohol establishment visits and encourage police departments that don’t to start visiting the establishments.
- **Education** – Although education has a category of its own, law enforcement staff should be educated on the value of Responsible Beverage Service

trainings and Drug Recognition Expert (DRE) training opportunities should be increased for law enforcement personnel.

4. Conviction Sentencing Infrastructure – Under the current system, there is a lengthy and time consuming process for processing individuals arrested for DUIs, which negatively impacts those working in the field. To offset this, it was suggested that the courts work with the District Attorney’s office and the Department of Motor Vehicles to streamline the existing infrastructure to increase efficiency, promote consistency, minimize time constraints, and maximize communication between the entities involved. In doing so, one suggestion was to assign a DUI trained District Attorney to a courthouse and be responsible for all DUI related cases.

5. Education and Training – Although training and education was a common theme in all four groups, the types of activities varied within each group. Some activities can be targeted at the individual level while other activities can be targeted at the community or systematic levels. Among the many topics available, below is a listing of topics/themes the groups came up with.

- **Responsible Beverage Service (RBS) Training** – promote and/or provide RBS trainings for on- and off-sale alcohol establishments.
- **Professional training activities** – Provide and/or promote specialized DUI training for law enforcement personnel; district attorneys; judicial officers; and alcohol and drug prevention specialists.
- **Media campaigns** – increase community awareness on the following areas:
 - Consequences of DUIs (legal, social, and/or financial)
 - Social norms/perceptions (or misconceptions) about alcohol consumption and DUIs
 - Acceptance/social acceptance of alcohol consumption and DUIs
 - Family acceptance and/or cultural acculturation of alcohol consumption and DUIs
- **Education** – develop and implement an alcohol consumption and DUIs education curriculum for the driver education classes; high school health classes; PTAs, etc.

6. Collaboration - in an effort to address any of the issues listed above, a strong collaborative system needs to be in place. In doing so, relationships and partnerships need to be created (and fostered) that would be responsible for designing and implementing the activities associated with each issue. Ideally, this collaboration would have representation from the following sectors: community based organizations; faith organizations; health care; law enforcement; legal and judicial; local and county governments; media; private businesses; schools and universities; victims; and youth.

3. Next Steps

After a full day of presentations, small group discussions and action themes identified, a final task of the Community Forum was to develop a series of next steps that need to be accomplished. **Amy Buch**, Division Manager with the County of Orange Health Care Agency, reconvened the small groups into a large group setting and provided a summary of the day's activities; highlighted key findings/innovative strategies revealed during the breakout session; and outlined necessary action steps to comprehensively and effectively address the issues.

As many ideas were explored and discussed throughout the day, it was clearly evident that the first step was to develop a countywide coalition that would specifically focus on DUIs. Although several localized coalitions are currently in place, a countywide coalition would address the issues on a larger scale. Among the multiple issues that can be addressed, a primary activity of the Orange County DUI Coalition would be to review the Community Forum results in more detail; prioritize the issues of importance; strategize on which issues can be feasibly addressed; identify the activities associated with each priority; and develop a logic model/timeline associated with each priority/action item.

As the coalition is being developed, two lead agencies will co-coordinate and co-facilitate the coalition meetings. Staff from The Automobile Club of Southern California and the Orange County Health Care Agency Alcohol and Drug Education and Prevention Team (ADEPT) will serve this function. To help guide this process, a steering committee will be formed and responsible for guiding the direction and decisions of the countywide efforts.

As a second outcome of the Community Forum, an Orange County DUI website will be developed and utilized to showcase the work (and materials) of the Community Forum; the activities of the newly developed countywide Orange County DUI Coalition; and the resources available to the community. As the countywide DUI coalition is being developed and the website is being developed, materials from the Community Forum will be posted on the ADEPT website, which is located at www.ochealthinfo.com/adept/publications.

4. Press Conference:

As part of the Community Forum, the Automobile Club of Southern California coordinated and facilitated a press conference to highlight and bring attention to the activities of the Community Forum and research results on gender differences and alcohol impaired driving in California. Dr. Vaca, Dr. Bloch, Chief Shawkey, and Ms. Rogers spoke on behalf of the Community Forum and the study results. In

total, the press conference received media coverage from a number of television, print/internet, and radio media outlets. Below is a listing of media outlets that highlighted the press conference and 2 sample articles that were developed.

Television

1. CBS Marketwatch
2. KNBC, Ch. 4
3. KOCE, Ch. 50 (reach is countywide)
4. Telemundo
5. Time Warner/CNN Headline News

Radio

1. KFI Radio
2. KFWB Radio

Print/Internet

1. Alcohol and Other Drug Prevention Connection
2. California DUI Lawyer online
3. KEYT-Santa Barbara (reader)
4. La Opinion
5. The Daily Pilot "Cityscapes" in the LA Times and online
6. The LA Times Road Sage online column
7. The Orange County Register, Page 1 Promo, Local Section Cover and online

Two sample articles were posted in the Daily Pilot and the Orange County Register



Crashes increase for women

Auto club investigates alcohol-related accident trends after high-profile celebrity incidents.

BY JOSEPH SERNA

DAILY PILOT, WEDNESDAY, DECEMBER 10, 2008

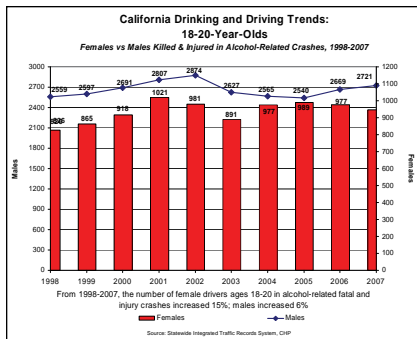
Alcohol-related crashes involving death or injuries among young female drivers more than doubled from 10 years ago, according to a statewide study from the Automobile Club of Southern California released Wednesday in Costa Mesa.

An analysis of drinking and driving data from 1998 to 2007 showed an "enormous" jump of 116% in alcohol-related crashes among women between 21 and 24 years old during that time period while crashes with men behind the wheel increased 39%, club officials said Wednesday during a news conference at the Costa Mesa Neighborhood Community Center.

Statistics like this make the case for increased DUI patrols and alcohol-service training, said Costa Mesa Police Chief Chris Shawkey, who attended the conference.

Costa Mesa regularly leads the county in DUI arrests per capita. Club officials could not provide a local breakdown of statistics in the study.

Costa Mesa and Newport Beach police have joined with the County Health Care Agency for alcohol and drug education to create the Alcohol Impaired Driving Task Force of Costa Mesa, which aims to educate and train establishments on how to properly serve alcohol, Shawkey said.



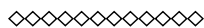
Officers patrol at certain times looking solely for impaired drivers. While men still lead the totals statewide for alcohol-related crashes when they are driving, a passenger or a pedestrian between the ages of 18 and 24, women have quickly made up ground in the last decade.

"We're seeing something that is a broad social trend. These increases do not occur among other age groups," said Steven Bloch, a traffic safety researcher and policy analyst for the Automobile Club of Southern California. Bloch and the club's researchers investigated female drinking trends after some high-profile arrests among young female celebrities, he said.

"Concerns about those arrests and particularly about how those women are serving as role models for other young women led us to try to investigate what was going on and whether those arrests were isolated incidents...or whether they were part of a broader social trend."

Statistics show that 18- to 20-year-old women were killed or injured in alcohol-related crashes 15% more than in 1998. Men showed a 6% increase. Among 21- to 24-year-olds, the increase was more dramatic, with a 46% increase for women and an 18% increase for men. Bloch attributed some of the increases to more drivers, but also to the innovation of "sweet drinks," or flavorful cocktails geared toward women.

"We'd all like to believe that we're moving toward a more egalitarian society, but unfortunately the drinking and driving trend isn't the kind of equality we'd hoped for," he said.



Number of young women drivers in DUI crashes doubles

Auto Club offers sobering statistics as holiday parties are in full swing.

BY SERENA MARIA DANIELS

ORANGE COUNTY REGISTER, WEDNESDAY, DECEMBER 10, 2008

COSTA MESA – Ladies, before taking that sip of Egg Nog Martini this holiday season, know that you're now catching up with the fellows in alcohol consumption and auto accidents.

Just in time for the season of Christmas office parties, family get-togethers and other festivities involving holiday cocktails, the Automobile Club of Southern California released a study that says young women are closing the gender gap in the number of injuries and deaths resulting from driving under the influence.

A community forum educating local law enforcement, social service agencies and bar and restaurant owners about the latest trends in alcohol use was held at the Costa Mesa Community Center on Wednesday.

Between 1998 and 2007, the number of women drivers aged 21 to 24 involved in alcohol-related crashes soared by 116 percent, according to an Automobile Club of

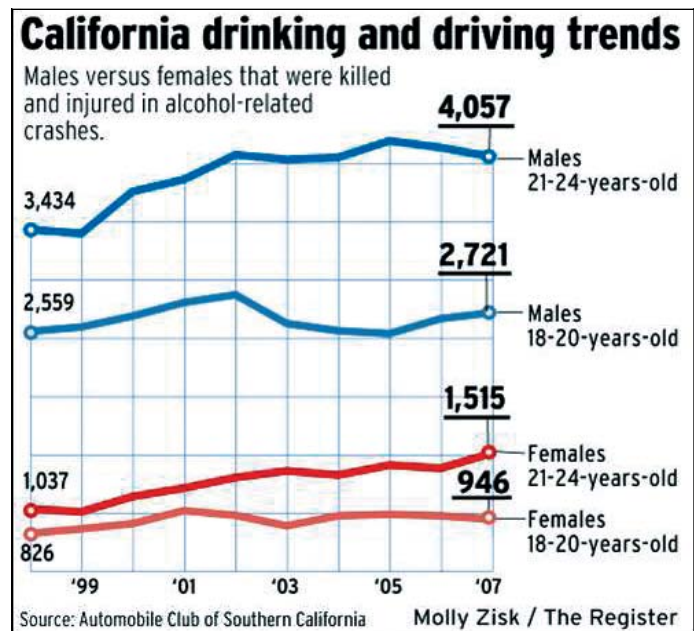


Southern California study. For men, the number jumped 39 percent in the same period. Women aged 21-24 who were killed or injured in DUI crashes, whether as drivers, passengers or pedestrians, increased 46 percent to 1,515 in 2007 from 1,037 in 1998 in California, the study found.

Some 4,057 men of the same age range were killed or injured in DUI accidents in 2007, compared to 3,434 in 1998.

Steven Bloch, a researcher for the Auto Club, said that reports of celebrity DUI arrests involving Paris Hilton, Lindsay Lohan and Nicole Richie are indicative of a broader trend, and not just Hollywood behaving badly.

This is part of a larger social trend," Bloch said. "We like to think of our society as one of equality, but the drinking and driving is not the kind of equality we're looking for."



A study by Richard Gruzca of the Washington University School of Medicine that was published in the August issue of the medical journal "Alcoholism: Clinical and Experimental Research," says that the prevalence of alcohol dependence among women has increased in the decades since World War II, but has not increased significantly among men.

The study finds that women are starting to drink at a younger age, which researchers believe is linked to alcohol dependence.

Costa Mesa Police Chief Christopher Shawkey spoke about the department's alcohol-impaired task force, in which officials offer local bar and restaurant employees training in recognizing when someone is too drunk to be served and how to deny serving them without sounding confrontational.

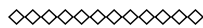
The city created the program two years ago after the California Department of Motor Vehicles released a report ranking the cities in which people end their nights of drinking before getting arrested for DUI.

Costa Mesa ranked No. 3, with 17.45 per 10,000 adults having had their last drink in that city. The city ranked No. 2 in DUI arrests, with 21.07 arrests for every 10,000 adults, records show. The findings illustrate a trend of people are drinking in coastal cities, officials say.

Aside from Costa Mesa's training, the police agency will join other departments in the county by holding increased DUI checkpoints and patrols.

Officials said that if you're going to drink, have a plan for who will be the designated driver, or keep the number of a taxi dispatcher handy. And keep in mind your limit. If a woman who weighs 130 has had four dry martinis within two hours, her estimated blood alcohol level will be .18, the Auto Club says. Four glasses of champagne over the same time period can result in a blood-alcohol level of .08.

While the legal limit is .08, a blood-alcohol level of .05 can deteriorate motor skills, leaving drivers' muscles more relaxed and coordination slowed.



5. Resources:

A fifth and final component consisted of printed material resources that were made available to the Community Forum participants. Each registered participant received a comprehensive binder of conference materials (listed below) and eight organizations (listed below) showcased their work in hosting an exhibit table and distributing printed materials.

Orange County Drinking and Driving 2008 Community Forum Binder Contents

- Community Forum Agenda
- Presenter Biographies
- Reference Materials
- California Strategic Highway Safety Implementation Plan Fact Sheet
- California Strategic Highway Safety Implementation Plan – Safety Needs Action Plan (SNAPs) for Challenge #1 – “Reduce Impaired Driving Related Fatalities”

- Impaired Driving Technical Assessment of the State of California (2007)
- Countermeasures That Work: A Highway Safety Countermeasure Guide for State Highway Safety Officers – 3rd Edition, (2008). NHTSA
- Circumstances of Last Drink Survey, 2005, ADEPT*

SECTION THREE:

Evaluation Results

As the Community Forum came to an end, the attendees had an opportunity to evaluate the effectiveness of the Community Forum and provide feedback on the morning presentations; the break-out session; and the materials that were provided. Among the 130 people who attended the Forum, 95 (or 73.1%) attended the small break out session and 62 (or 47.7%) completed the evaluation surveys. Of whom, the following area of expertise was represented: 40.3% (or 25) alcohol and drug prevention, 22.6% (or 14) law enforcement, 14.5% (or 9) education, 9.7% (or 6) Public Health, 3.2% (or 2) Criminal Justice, 1.6% (or 1) traffic safety, and the remaining 8.1% (or 5) were blank.

Program Satisfaction:

When asked about the overall satisfaction of the Community Forum, 25 (or 40.3%) indicated that it was “excellent” and 32.3% (or 20) indicated that it was “very good”. When combined, this means that 57 (or 60.6%) of the attendees were satisfied with the Community Forum. In addition, 17 (or 27.4%) left this question blank and no one indicated that the Community Forum rated “average” or “poor”.

a. Speaker Satisfaction: Among the nine speakers who presented, 5 out of 9 (or 55.6%) were rated as “excellent” speakers, with the highest rating being 66% for one speaker; 2 (or 22.2%) tied for being “excellent” or “above average”; and 4 (or 44.4%) were rated “above average”. However, when combined, 7 out of 9 (or 77.8%) speakers were rated as being “above average” or “excellent”, with Dr. Frederico Vaca and Creg Datig having the highest rating of 66% (or 41) each among the speakers. In addition, only 32 blank responses were recorded among the 9 speakers, indicating that only 6.6% of the respondents did not have a response for a given speaker.

b. Handout Materials: When asked about the hand out materials, 54.8% (or 34) indicated that the handout materials were excellent and 35.5% (or 22) were above average. When combined, this means 90.3% (or 56) of the respondents indicated that the handout materials were well liked. Of the remaining 6 responses, no one rated the materials as being average or poor and 100% (or 6) left the question blank.

c. Break-out Sessions: As evidenced by the well attended break-out session and excellent feedback received, over three quarters of attendees rated the break-out sessions as being “very good” or “excellent”. Of the remaining 19 attendees who did not rate the break-out session as being “very good” or “excellent”, 18 (or 29%) left this question blank. As such, if the number of blank responses were excluded from the analysis, that means 97.7% (or 43 out of 44) of respondents indicated that the break-out session was “very good” or “excellent”.

d. Items / Next Steps: Finally, when asked about the final component of the Community Forum, 46.8% (or 26) indicated that the Next Steps section was “very good” or “excellent”, however, 30 (or 48.8%) did not respond to this question. Unfortunately, it is unclear why there were so many blank responses and whether or not the 52.1% of responses were truly reflected. As such, the only conclusion that can be made is that 46.8% of the respondents felt the “next steps” section was “very good” or “excellent”.

1. **Generally speaking**, the respondents noted that the Community Forum was great, very informative, fantastic, and very effective. Several respondents noted that the information on the technological advances and enforcement strategies was outstanding and well done.

2. Some respondents noted that the **statistical and data information** was excellent, current, provided a good historical perspective and it raised awareness on existing trends and projected goals.

3. Several comments were made about the **speakers** and noted that the Community Forum provided a good avenue to network with the presenters during the lunch hour and during the break-out session; some speakers were better than others; and the diversity of presenters and topics was well done and well organized.

4. In fact, the diversity of the entire Community Forum was well appreciated. The topic and speaker diversity provided a good perspective on the issue as a whole and the impact it has on the varying community sectors. One

To further illustrate the satisfaction level of the Community Forum, below is a table depicting the results of the 62 respondents.

Overall satisfaction of the Community Forum and components

	Blank	Excellent	Very Good	Average/Poor
Overall Program	17/27.4%	25/40.3%	20/32.3%	0/0.0%
Presentation Speakers	6.6%	41.2%	32.8%	19.2%
Handout Materials	6/9.7%	34/54.8%	22/35.5%	0/0.0%
Break Out Sessions	18/29.0%	22/35.5%	21/33.9%	1/1.6%
Items / Next Steps	30/48.4%	12/19.4%	17/27.4%	3/4.8%

Most Useful and Least Useful

During the second component of the evaluation process, respondents were asked to identify the “most” and “least” useful components of the Community Forum and in doing so, the following themes and /or trends were revealed.

Motivation for Action

Among those who identified the “most” useful parts, six general themes emerged from the comments that were received.

respondent noted that they didn’t know there were so many community groups and organizations in Orange County interested in working on this issue.

5. As far as the **break-out session** goes, respondents commented that this was a good opportunity to provide direct feedback, insight, and ideas with the speakers on how the issues can be addressed.

And 6. In reference to **program logistics**, several respondents noted that the facility was fantastic, the food was excellent, and the exhibit tables added a nice component to the Forum.

When asked to identify the “least” useful part of the Community Forum, 36 (or 58.1%) participants provided feedback on how to improve the Community Forum, and among those who provided feedback, three general themes emerged.

1. Although the **information and data section** was well received, it was also very repetitive; the information was at times too overwhelming; there was too much emphasis on data and research; and some data could have been presented in a written (or oral) format.

2. Of the speakers who did not do as well as other speakers, some participants noted that the speakers did not provide practical application of the information provided; it was evident that some speakers were “experts” in the field, and yet, not experts in “public speaking” or in “presenting in an engaging manner”; and some of the topics were very dry.

And finally 3. Some respondents had negative comments regarding the Forum logistics and noted that there was no time for questions; the Forum was too long; having a speaker during the lunch hour was not conducive to the environment; the lunch price was listed on the box; there were too many speakers; the morning session was too long; and the Forum may have been more effective in a four (not eight) hour period of time.

In a third component of the Community Forum, participants were asked whether or not the Community Forum fulfilled their reason for attending; motivated them to take action; and whether or not they would be interested in participating in a county-wide DUI coalition. Among the 62 participants who completed the evaluation, 80.6% (or 50) indicated that the Forum fulfilled their reason for attending; 80.6% noted that they were motivated to take action as a result of attending the Forum; and 54.8% (or 34) commented that their agency would be interested in participating in a countywide DUI coalition. On further review of these questions, there were only 5 blank responses on the fulfillment and motivation questions and 21 blank responses on the interest in a countywide coalition question. If the blank responses were taken out of the analysis, then that means, 84.7% of respondents were fulfilled with the Forum; 83.3% were motivated to take action; and 82.9% expressed interest in participating on a countywide DUI coalition.

And finally, when asked for final comments, 48.4% left this question blank and among those who did provide a comment, the following generalized comments were made: 13 (or 21.0%) said “thank you”; 7 (or 11.3%) indicated that the Community Forum was “excellent”; 5 (8.1%) stated that the food was great, the information was excellent and yet at times redundant, and the diversity of speakers and topics

was well planned and organized; 4 (or 6.5%) commented that the networking was good, however, time was needed for questions and answers; and finally 3 (or 4.8%) noted that there were too many speakers, the facility was excellent, and the agenda flow and timing was excellent. Among the remaining comments made, some alluded to suggesting that the Forum be an annual event; some provided insight on some logistical items (such as a podium banner, larger font size on the name tags, provide an email directory of attendees, and the moderator did a great job) and several respondents noted that the Community Forum could be (and is) a “model forum” for addressing impaired driving related issues.



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County of Orange Board of Supervisors Proclamation

December is National Drunk and Drugged Driving (3D) Prevention Month 2008

WHEREAS, each year in the United States, impaired driving leads to one death every 39 minutes and one injury every two minutes, and

WHEREAS, nationally, 1.5 million people are arrested each year for impaired driving, and

WHEREAS, in 2007, 12,998 people were killed in alcohol-impaired driving crashes in the United States, and

WHEREAS, in 2007, 83 people were killed and 2,153 people were injured in alcohol-impaired driving collisions in Orange County, and

WHEREAS, the December holiday season is traditionally one of the most deadly times of the year for alcohol-impaired driving, and

WHEREAS, for thousands of families across the nation, the December holidays bring a somber reminder of the loved ones they have lost to an impaired driver during a previous holiday season or at any time during the year, and

WHEREAS, community-based programs involving consumer education, responsible beverage service trainings and strong police enforcement have proven to be successful in reducing impaired driving, and

WHEREAS, it is the goal of the Alcohol Impaired Driving Task Force of Costa Mesa and the County of Orange Health Care Agency to involve schools, businesses, law enforcement agencies and service organizations in strengthening community efforts that reduce alcohol impaired driving incidents.

NOW, THEREFORE, BE IT RESOLVED that the ORANGE COUNTY BOARD OF SUPERVISORS does hereby proclaim December 2008 as National Drunk and Drugged Driving Prevention Month in Orange County and hereby calls upon all citizens, government agencies, business leaders, hospitals, schools, and public and private institutions in Orange County to promote awareness of the impaired driving problem, to support programs to reduce the incidence of impaired driving, and to promote safer and healthier behaviors regarding the use of alcohol and other drugs this holiday season and throughout the year.

ATTENTION

IS YOUR AGENCY...

- CONCERNED ABOUT IMPAIRED DRIVING IN ORANGE COUNTY?
- INTERESTED IN ADDRESSING ISSUES ON A LOCAL LEVEL?
- CONCERNED ABOUT THE HEALTH, SAFETY, AND WELL BEING OF YOUR COMMUNITY? OR,
- CONCERNED ABOUT THE RESPONSIBLE BEVERAGE SERVING PRACTICES OF ALCOHOL ESTABLISHMENTS?

If you answered "**YES**" to any of these questions,
then the Orange County DUI Prevention Task Force is the place for you.

COMING SOON

Come join us in August 2009 as Orange County embarks on a new journey
in forming the Orange County DUI Prevention Task Force.

Using a multidisciplinary and comprehensive approach to address DUs,
the Orange County DUI Prevention Task Force will address DUI related issues by:

- Assessing the scope of the problem in Orange County;
- Identifying innovative prevention and intervention strategies on a countywide and local level;
- Developing and implementing comprehensive approaches to effectively address the issues; and,
- Evaluating the effectiveness of the approaches identified and implemented.

SAVE THE DATE – SEPTEMBER 16, 2009

9:00 AM to 11:00 AM Costa Mesa Community Center 1845 Park Blvd., Costa Mesa

Come be part of the solution, come be part of the Orange County DUI Prevention Task Force.

DUI

**CAN YOU PAY
THE PRICE?**

\$13,500

Sponsored and funded by the Alcohol Impaired Driving Task Force of Costa Mesa, Automobile Club of Southern California, County of Orange Health Care Agency Alcohol and Drug Education and Prevention Team (ADEPT), County of Orange Office of the Second District Chairman John Moorlach, University of California Irvine, Center for Trauma and Injury Prevention Research.

For additional information and/or to be added to the mailing list, contact Kathy Kendrick at 714-834-3294 or kkendrick@ochca.com or visit the ADEPT website @ www.ochealthinfo.com/adept