



## INFORMATION SHEET: BLOOD ALCOHOL CONCENTRATION LIMITS

### Background

- Since 1996, public attitudes to drink driving in New Zealand have changed considerably. This is because of the introduction of Compulsory Breath Testing and other enforcement measures, harsher penalties, social marketing, and an increase in community road safety programmes focusing on alcohol.
- As a result there has been a positive downward trend in drink-drive crashes and the number of alcohol-related deaths and injuries over the last two decades. This positive trend has now stalled.
- As blood alcohol levels increase, so does the risk of having an alcohol-related crash.
- Decreases in blood alcohol limits generally appear to reduce the risk of crashing, reduce death and injury and improve attitudes towards traffic safety and drinking behaviour.<sup>i</sup>
- Since the present blood alcohol concentration of 80mg alcohol/100ml blood (0.08) was established in New Zealand in 1978, research has shown that important driving skills including vision, steering, and braking are adversely affected by even small amounts of alcohol.<sup>ii</sup>
- Blood alcohol limits are covered by transport related law, not by the Sale of Liquor Act.

### Current situation

- At the current blood alcohol limit New Zealand drivers are still at least five times more likely to have a crash than before drinking.<sup>iii</sup> The relative risk of having a crash is even higher for those aged 16-19 years old.<sup>iv</sup>
- Alcohol and speed are the two biggest contributing factors to the road toll. In 2007 alcohol-related crashes accounted for 30% of our road toll.<sup>v</sup>
- In 2007 alcohol was a contributing factor in 97 fatal traffic crashes resulting in 105 deaths.
- In 2007 there were a further 1389 alcohol-related crashes resulting in 419 serious injuries and 1256 minor injuries.
- The social cost of alcohol/drug related crashes in New Zealand was estimated at about \$838 million for 2007.<sup>vi</sup>
- There was a significant increase in the number of alcohol-related crashes for the 15-19 year old age group following the lowering of the purchase age for alcohol in 1999.<sup>vii</sup>
- Research concludes that lowering the blood alcohol concentration for driving is a cost effective measure to reduce alcohol-related crashes, deaths and injuries on our roads.<sup>viii</sup>

## **Key Themes from the Law Commission report – Alcohol in our Lives**

- The Commission acknowledges the reduction of alcohol-related road toll since the 1990s and that progress has now stalled.
- New Zealand does not compare well with other countries when considering drink drive crashes as a proportion of total crashes.
- There is a strong case for blood alcohol limits to be reduced from 80mg alcohol/100ml blood to 50mg alcohol/100ml blood for all drivers, and to zero for all drivers under 20 years of age.
- Consideration should be given to requiring all convicted drink drivers to have alcohol interlock devices installed in their vehicles.
- While the Law Commission includes a range of options related to Blood Alcohol Concentrations in their issues paper they advise they will not be reporting further on this matter. Rather will leave this to the Ministry of Transport and its Minister.

***Please note that submissions should be directed to the Ministry of Transport on their "Safer Journeys" Discussion document due 2 October 2009.***

*For a full list of the Law Commission's options and the Alcohol Healthwatch response please refer to our Law Commission Tool-kit at [www.ahw.org.nz](http://www.ahw.org.nz).*

### **An evidence-based response**

- A 50mg alcohol/100ml blood alcohol limit (0.05) for all fully licensed drivers 20 years and over, and zero for all drivers under age of 20 years and those on restricted and learner licences.
- Introduction of alcohol ignition locking devices for all convicted drink drivers in a programme accompanied by appropriate treatment.
- Introduction of a legal blood alcohol limit for a person in charge of a pleasure craft e.g. yacht.

### **What we can expect from lowering blood alcohol concentration limits**

- Fewer alcohol-related crashes, deaths and injuries on our roads.
- Improve public attitudes and behaviours towards drink driving.
- Lower levels of drinking amongst drink drivers

### **What else is needed**

Other effective strategies to reduce alcohol related harms include:

- Ban all alcohol advertising and sponsorship.
- Increase the price of alcohol through increased taxation and introduce a minimum price.
- Return the minimum purchase age to 20 years
- Reduce the number and density of liquor outlets and the hours they are permitted to sell alcohol.
- Lower the Blood Alcohol Concentration to at least 50mg/100ml and zero for all those under 20 years and on restricted and learner licenses.
- Increase and improve access and availability to appropriate treatment and rehabilitation options.

- Provide for a range of brief and early intervention options across health, education, justice and other sectors.
- Require prominent, specific and bold health warning labels on all alcohol products, at point of sale and to accompany any permitted liquor advertising.

## References

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- <sup>i</sup> Chamberlain E, Solomon R. 2002. *The case for a 0.05% criminal law BAC limit for driving*. Injury Prevention 8 (III): 1111-1117.
- <sup>ii</sup> Chamberlain E, Solomon R. 2002. *The case for a 0.05% criminal law BAC limit for driving*. Injury Prevention 8 (III): 1111-1117.
- <sup>iii</sup> Acquire. 2002. *Alcohol Concern Quarterly Information and Research Bulletin*. Summer 2002.
- <sup>iv</sup> Chamberlain E, Solomon R. 2002. *The case for a 0.05% criminal law BAC limit for driving*. Injury Prevention 8 (III): 1111-1117.
- <sup>v</sup> Law Commission. 2009. *Alcohol in our lives: An issues paper on the reform of New Zealand's liquor laws*. Issues Paper 15.
- <sup>vi</sup> Ministry of Transport. 2008. *Alcohol and drugs: Crash Fact Sheet*.
- <sup>vii</sup> Kypri K et al. 2006. *Traffic crash injuries among 15 to 19-year-olds and minimum purchasing age for alcohol in New Zealand*. AJ Pub Health. 96,126-131
- <sup>viii</sup> Babor T, Caetano R, Casswell S, et al. 2003. *Alcohol: No ordinary commodity. Research and public policy*. New York: Oxford University Press.

## For further information

See other Alcohol Healthwatch information sheets and comprehensive policy briefing papers at <http://www.ahw.org.nz>

To speak with a Health Promotion Advisor for assistance with your submission please call (09) 520 7036