



STATE OF OREGON

Impaired Driving Program Assessment

February 2 – 6, 2026

Technical Assessment Team

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This report is based on a review of Oregon's Impaired Driving Program. It is intended to assist the State's efforts to enhance the effectiveness of its impaired driving program by equipping the criminal justice community, prevention and treatment leaders, and law enforcement officials with the knowledge and skills to protect the citizens of Oregon from those who drive impaired. The team believes that this report will contribute to Oregon's efforts to enhance the effectiveness of its impaired driving program in preventing injuries, saving lives, and reducing economic costs of motor vehicle crashes on Oregon's roadways.

INTRODUCTION

The mission of the National Highway Traffic Safety Administration (NHTSA) is to reduce deaths, injuries, and economic and property losses resulting from motor vehicle crashes. In its ongoing pursuit to reduce alcohol-related traffic crashes and subsequent fatalities and injuries, NHTSA offers Highway Safety Program Assessments to the States.

The Highway Safety Program Assessment process is an assistance tool that allows management to review various highway safety and emergency medical services (EMS) programs. Program assessments are provided for EMS, occupant protection, impaired driving, traffic records, motorcycle safety, police traffic services, Standardized Field Sobriety Testing, Drug Evaluation and Classification, drivers education, and pedestrian and bicycle safety.

The purpose of the assessment is to allow State management to review all components of a given highway safety or EMS program, note the program's strengths and accomplishments, and note where improvements can be made. The assessment can be used as a management tool for planning purposes and for making decisions about how to best use available resources. The highway safety and EMS program assessments provide an organized approach, along with well-defined procedures, that states can use to meet these objectives. The assessments are cooperative efforts among state highway safety offices, state EMS offices, and NHTSA. In some instances, the private sector is also a partner in the effort.

Program assessments are based on the *Uniform Guidelines for State Highway Safety Programs*, which are required by Congress and periodically updated through a public rulemaking process. For each highway safety program area, the criteria against which each state program is assessed have been developed through use of the uniform guidelines, augmented by current best practices.

NHTSA staff facilitates the assessment process by assembling an assessment team, a team of experts composed of individuals who have demonstrated competence in impaired driving program development and evaluation.

Under the Infrastructure Investment and Jobs Act (IIJA), states that have an average (most recent three years, FARS) impaired driving fatality rate per 100 million vehicle miles traveled (VMT) that is 0.60 or higher are considered high-range states. States are considered mid-range if their rate is lower than 0.60 but higher than 0.30 and low-range state if it is 0.30 or lower. Oregon is considered a high-range state and is therefore required to have a NHTSA-facilitated assessment of the State's Impaired Driving Program to be eligible for federal funding.

The on-site portion of the Oregon Impaired Driving Program Assessment was conducted at the Sheraton Portland Airport Hotel in Portland, OR, from February 2-6, 2026. Arrangements were made for program experts (see On-Site Agenda) to deliver additional briefings and provide support materials to the team on a wide range of topics over a two-day period.

STATE BACKGROUND

Oregon is located in the Northwest region of the Nation. According to the 2020 Decennial Census, Oregon has a population of 4,237,256. Residents are distributed across 36 counties and 241 municipalities. Approximately 72 percent of the population is White, 13.9 percent is Hispanic or Latino, 4.5 percent is Asian, 1.9 percent is African American, 6.1 percent is two or more races, and the remaining population is spread between Native American, Hawaiian, and other. The median age in Oregon is approximately 39.5 years, and the ratio of females to males is approximately 50.1 percent female and 49.9 percent male.

With an area of 98,352 square miles, Oregon is the 9th largest state. Western Oregon is more populated with the Portland, Salem, and Eugene metropolitan areas along the I-5 corridor. Eastern Oregon is relatively rural, with some areas being identified as “frontier.” There are nine federally recognized tribes in Oregon. Major industries in Oregon include construction, farming, technology, fishing, hydroelectric energy, and tourism.

Oregon has approximately 79,800 miles of public roads, with 7,599 of those miles comprising the state highway system. There are approximately 4.5 million active vehicle registrations and about 3.7 million drivers licensed, according to Oregon Driver and Motor Vehicle Services data.

Oregon had 587 traffic fatalities in 2023. A slightly higher percentage of Oregon’s vehicle miles traveled (VMT) occurs on rural roads (about 53%), with rates of 2.12 per 100 million VMT in 2023. Speed and impaired driving continue to be the top contributing factors to serious injury and fatal crashes on Oregon’s roadways. However, both of these have decreased since 2022, but have not returned to the lower levels seen in 2019 and 2022 (Table 1).

Table 1: Traffic Safety Performance (Core Outcome) Measures for Oregon						
Core Outcome Measures		Crash Year				
		2019	2020	2021	2022	2023
Traffic Fatalities	Total (C-1)	493	507	599	602	587
	Rural	280	284	344	322	311
	Urban	213	223	255	280	276
	Unknown	0	0	0	0	0
Fatalities Per 100 Million VMT	Total (C-3)	1.38	1.57	1.63	1.65	1.59
	Rural	2.06	2.29	2.31	2.20	2.12
	Urban	0.96	1.12	1.16	1.27	1.24
Passenger Vehicle Occupant Fatalities (All Seat Positions)	Total	318	306	373	346	365
	Restrained	172	167	176	190	202
	Unrestrained (C-4)	87	98	118	108	111
	Unknown	59	41	79	48	52
Alcohol-Impaired Driving Fatalities (BAC=.08+) (C-5)		171	184	217	236	200
Speeding-Related Fatalities (C-6)		154	135	161	215	190
Motorcyclist Fatalities	Total (C-7)	57	69	86	98	70
	Helmeted	46	56	79	88	62
	Un-helmeted (C-8)	8	5	5	7	3

	Unknown	3	8	2	3	5
Drivers Involved in Fatal Crashes	Total	657	688	830	819	791
	Aged Under 15	0	0	0	0	0
	Aged 15-20	60	59	43	51	54
	Aged Under 21 (C-9)	60	59	43	51	54
	Aged 21 and Over	581	609	761	741	724
	Unknown Age	16	20	26	27	13
Pedestrian Fatalities (C-10)		82	71	86	123	101
Bicyclist and Other Cyclist Fatalities (C-11)		11	14	18	13	17
Observed Seat Belt Use (B-1)		96	95	95	97	97

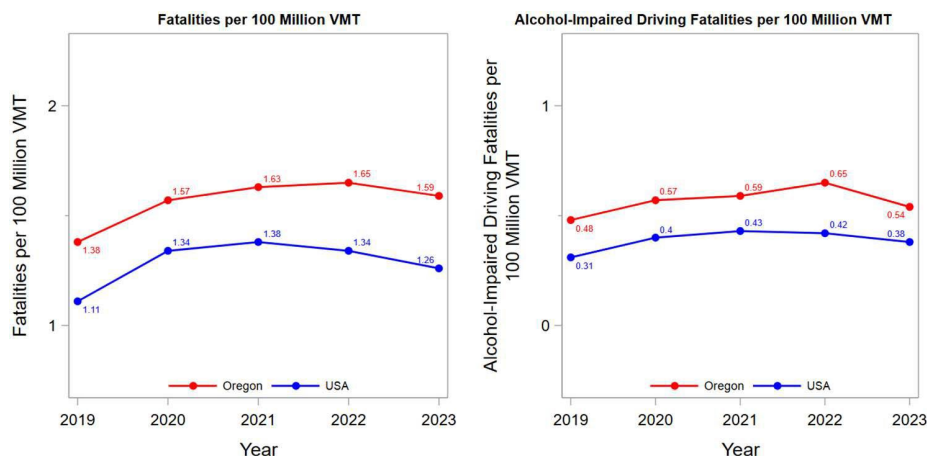
Of note, Oregon's crash fatalities have decreased since 2021 and 2022. Similar to the Nation, the majority of crashes are single-vehicle and involve a roadway departure (Table 2).

Table 2: Oregon Fatalities by Crash Type					
Crash Type	2019	2020	2021	2022	2023
Total Fatalities (All Crashes)*	493	507	599	602	587
(1) Single Vehicle	296	298	331	346	326
(2) Involving a Large Truck	67	73	84	87	97
(3) Involving Speeding	154	135	161	215	190
(4) Involving a Rollover	108	126	133	129	153
(5) Involving a Roadway Departure	295	302	356	343	342
(6) Involving an Intersection (or Intersection Related)	97	97	106	112	126

*A fatality can be in more than one category; therefore, sum of the individual cells will not equal the total due to double counting.

Oregon's fatality rate is currently at 1.59 per 100 million VMT (Figure 1), which is above the national rate. Further, the alcohol-impaired driving fatality rate is also above the national level, having peaked in 2022 at 0.65 but decreased in 2023 to 0.54.

Figure 1: Total and Alcohol-Impaired Fatalities per 100 Million VMT



Fatalities by driver blood alcohol content (BAC) in Oregon, also exceeds the national average at 41 percent for drivers with BAC $\geq .01$; this is also reflected in the alcohol-impaired statistics with 34 percent of drivers at a BAC $\geq .08$ and 22 percent at a BAC $\geq .15$ (Table 3).

Table 3: Traffic Fatalities, by Highest Driver BAC in the Crash, 2023

State	Total Fatalities	No Alcohol (BAC $\leq .00$ g/dL)		BAC $\geq .01$ g/dL		Alcohol-Impaired			
	Number	Number	Percent	Number	Percent	BAC $\geq .08$ g/dL		BAC $\geq .15$ g/dL	
Oregon	587	349	59%	238	41%	200	34%	127	22%
US	40,901	26,284	64%	14,547	36%	12,429	30%	8,272	20%

The Oregon Department of Transportation and its partners have taken steps to combat impaired driving. The recommendations included in this assessment report are designed to assist Oregon as it furthers its efforts to prevent injuries, save lives, and reduce economic costs related to motor vehicle crashes in the State.

PRIORITY RECOMMENDATIONS

I. Program Management and Strategic Planning

- Expand the membership of the Oregon Governor’s Advisory Committee (GAC) on Driving Under the Influence of Intoxicants to include additional members from the community including, but not limited to, probation and parole, representatives from the Department of Education, and the cannabis and alcohol industry.
- Establish a comprehensive Law Enforcement Liaison Program to obtain support and buy-in from law enforcement agency leadership to support traffic safety enforcement efforts.
- Ensure the Transportation Safety Office has a program manager dedicated full-time to impaired driving efforts.
- Direct a portion of the cannabis tax revenue collected to support drug impaired driving training, enforcement, and/or media campaign.

II. Prevention

- Study the potential impact of increasing the excise tax on beer and marijuana (cannabis) in Oregon.
- Expand the membership of the Oregon Governor’s Advisory Committee (GAC) on Driving Under the Influence of Intoxicants to include additional members from the community including, but not limited to, probation and parole, representatives from the Department of Education, and the cannabis and alcohol industry.

III. Criminal Justice System

- Provide funding to Alcohol and Drug Screening Specialists based on evaluation and programmatic outcomes of program placements to ensure that providers are properly adhering to the American Society of Addiction Medicine criteria for each individual client.
- Provide adequate resources to improve the supervision and monitoring of DUII offenders at all stages of pre- and post-adjudication, especially with ignition interlock devices and misdemeanor offenders.
- Repeal the diversion law for all first offender DUII.
- Establish a comprehensive Law Enforcement Liaison Program to obtain support and buy-in from law enforcement agency leadership to support traffic safety enforcement efforts.

- Create an electronic, uniform law enforcement crash report and data entry point for crash data in the State.
- Create an electronic, uniform search warrant and process that can be utilized by all law enforcement and judicial districts throughout the State.

IV. Communication Program

- Conduct a comprehensive paid media campaign focused on cannabis-impaired driving awareness and the consequences associated with it.

V. Alcohol and Other Drug Misuse: Screening, Assessment, Treatment, and Rehabilitation

- Provide funding to Alcohol and Drug Screening Specialists based on evaluation and programmatic outcomes of program placements to ensure that providers are properly adhering to the American Society of Addiction Medicine criteria for each individual client.
- Provide supervised probation services to DUI offenders screened and assessed to be at high risk to recidivate.

VI. Program Evaluation and Data

- Develop statewide integration of impaired driving data across all traffic records components by expanding consistent, real-time access to crash, citation, and enforcement activity data across State and local partners.
- Establish a statewide citation database to enable consistent, cross-jurisdictional tracking of impaired driving violations; improve identification of repeat offenders; and support more targeted enforcement and performance-based evaluation through integration with crash, court, and DMV data systems.

I. Program Management and Strategic Planning

Effective impaired driving programs begin with strong leadership, sound policy development, effective and efficient program management, and coordinated planning, including strategic planning. Program efforts should be data-driven, focusing on populations and geographic areas that are most at risk; are evidence-based; and determined through independent evaluation as likely to achieve success. Programs and activities should be guided by problem identification, carefully managed and monitored for effectiveness, and have clear measurable outcomes. Adequate resources should be devoted to the problem, and the costs should be borne, to the extent possible, by impaired drivers. Strategic planning should provide policy guidance; include recommended goals and objectives; and identify clear measurable outcomes, resources, and ways to overcome barriers.

A. State and Tribal DWI Task Forces or Commissions

Advisory

States and tribal governments should convene Driving While Impaired (DWI) task forces or commissions to foster leadership, commitment, and coordination among all parties interested in impaired driving issues. State-level and tribal task forces and commissions should:

- Receive active support and participation from the highest levels of leadership, including the governor and/or governor's highway safety representative.*
- Include members that represent all interested parties, both traditional and non-traditional, such as representatives of: government – highway safety, enforcement, criminal justice, liquor law enforcement, public health, education, driver licensing and education; business – employers and unions; the military; medical, health care and treatment; multi-cultural, faith-based, advocacy, and other community groups; and others.*
- Recommend goals and objectives, provide policy guidance and identify available resources, based on a wide variety of interests and through leveraging opportunities.*
- Coordinate programs and activities to ensure that they complement rather than compete with each other.*
- Operate continuously, based on clear authority and direction.*

Status

On December 16, 1983, Governor Victor Atiyeh signed Oregon Executive Order EO-83-20 creating the Governor's Advisory Committee (GAC) on Driving Under the Influence of Intoxicants (DUII). A need existed for an advisory committee to formulate administrative and legislative goals and objectives for reducing the incidences of DUII and to monitor their implementation.

The GAC on DUII was formed to generate public support for increased enforcement of State and local DUII laws and to educate the public on the dangers of DUII and its effects on life, property, and public safety. The Governor's Office appoints GAC on DUII members to serve a four-year term. Committee members are tasked with heightening public awareness of the seriousness of the DUII problem, and to persuade communities to address the DUII problem in an organized and systematic manner. This includes plans to eliminate blockages in the arrest, trial, and sentencing process that impair the effectiveness of many DUII laws.

The Governor appoints a chairperson from among the members of the Committee. The Committee vice-chairperson is selected by the Committee. The Committee meets monthly.

The Oregon Department of Transportation (ODOT), under the authority of the Governor's Highway Safety Representative, is charged with overseeing the GAC on DUII.

Since the inception of the GAC on DUII, members and agency liaisons have worked in partnership, making significant investments of time and effort, and formed a cohesive group. They continue to function in ways that enable the members to broaden perspectives and develop common views of addressing the DUII problem. The GAC on DUII also acts as a multi-disciplinary resource group for the Governor's Office and the legislature. The GAC on DUII reviews proposals to reduce DUII in Oregon. Members represent numerous stakeholders across all geographic areas of Oregon, to include law enforcement, driver licensing, treatment, highway safety, judicial, advocacy, legislative, and non-profit groups whose missions include addressing impaired driving issues. The following agencies are represented on the GAC on DUII:

- Oregon Health Authority Public Health Division
- Department of Public Safety Standards and Training
- Driver and Motor Vehicle Services
- Mothers Against Drunk Driving
- National Highway Traffic Safety Administration
- Oregon Association of Chiefs of Police
- Oregon District Attorneys Association
- Oregon Liquor and Cannabis Commission
- Oregon State Police
- Oregon State Sheriffs' Association
- Oregon Judicial Department
- Traffic Safety Resource Prosecutor(s)
- Oregon DUII Multi-Disciplinary Task Force
- Oregon Impact
- AAA
- Trauma Nurses Talk Tough

A task force has been established for the Trauma Centers in Oregon to identify the extent of impaired driving cases that are seen in the Trauma Centers.

Recommendations

- **Expand the membership of the Oregon Governor's Advisory Committee (GAC) on Driving Under the Influence of Intoxicants to include additional members from the community including, but not limited to, probation and parole, representatives from the Department of Education, and the cannabis and alcohol industry.**
- Ensure that the activities of Trauma Center Task Force and the Governor's Advisory Committee on Driving Under the Influence of Intoxicants are mutually shared.

- Showcase the successful initiatives of the Governor's Advisory Committee on Driving Under the Influence of Intoxicants to the Governor's Office and other partners in the State.

B. Strategic Planning

Advisory

States should develop and implement an overall plan for short- and long-term impaired driving activities. The plan and its implementation should:

- *Define a vision for the state that is easily understood and supported by all partners.*
- *Utilize best practices in strategic planning.*
- *Be based on thorough problem identification that uses crash, arrest, conviction, driver record, and other available data to identify the populations and geographic areas most at risk.*
- *Allocate resources for countermeasures determined to be effective that will impact the populations and geographic areas most at risk.*
- *Include short-term objectives and long-range goals. Have clear measurable outcomes.*
- *Be an integral part of or coordinate with and support other state plans, including the Highway Safety Plan and Strategic Highway Safety Plan.*
- *Establish or adjust priorities based on recommendations provided to the state as a result of reviews and assessments, including this impaired driving assessment.*
- *Assign responsibility and accountability among the state's partners for the implementation of priority recommendations.*

Status

On November 21, 2021, the Infrastructure Investment and Jobs Act (IIJA), was signed into law. The IIJA authorized \$550 billion over fiscal years 2022 through 2026 for new spending on the nation's infrastructure, including roads, bridges, and mass transit. The IIJA created a new triennial framework for the Highway Safety Grant Program, replacing the annual Highway Safety Plan (HSP) with a triennial HSP and an Annual Grant Application (AGA). It requires the HSP to provide for a data-driven traffic safety enforcement program to prevent traffic violations, collisions, and collision fatalities and injuries in areas of the State most at risk for such incidents.

Under the IIJA Section 405d Impaired Driving Countermeasures Grant, states are identified as low-, mid-, and high-range states based on the most recently reported three calendar years of Fatality Analysis Reporting System (FARS) data. The National Highway Traffic Safety Administration (NHTSA) provides range determinations to the states annually.

Oregon was designated as a high-range State for fiscal year (FY) 2025. As a high-range State, one of the requirements is the state must conduct a NHTSA-facilitated Impaired Driving Assessment to obtain federal funding.

The Oregon Department of Transportation (ODOT) Transportation Safety Office (TSO) plans and implements Oregon's highway safety program. During the strategic planning process, TSO utilizes a problem identification process, the NHTSA Countermeasures that Work, and data from various resources to develop projects and programs for Oregon's Triennial Highway Safety Plan. The TSO Problem Identification analysis involves TSO and the Oregon Transportation Safety Committee (OTSC) by reviewing data from the prior grant year's Annual Evaluation Report.

The TSO hosts an annual planning meeting with partner and stakeholder agencies and groups to review proposed performance measures and draft goals or targets that are data-driven. The TSO

involves the public from the beginning and throughout a program or project's cycle to better meet the needs of the community.

During FY 2027, TSO will be implementing a revised grant application process. The process was pilot tested with a few agencies in FY 2026. The potential grantees will be submitting "a letter of intent" through an electronic system rather than a complete application package. TSO will review and score the information submitted and will determine which agencies will receive a grant from TSO. Those agencies will be asked to submit a complete application package. It is anticipated that this will make the process easier for the grantees and ultimately generate additional applications.

The TSO conducts annual grant orientation training.

With funding support from TSO, Oregon has provided an annual Driving Under the Influence of Intoxicants (DUII) Multi-Disciplinary Training Conference for more than 25 years. In 2024, approximately 400 people attended the two-day conference, which focused on numerous impaired driving issues, including cannabis impairment, DUII case law, and reducing the risk of DUII. Each year, the conference includes law enforcement, prosecutors, toxicologists, treatment and prevention providers, health care professionals, judicial, parole and probation, liquor and cannabis control, driver and motor vehicle services, and other transportation safety professionals. The speakers present on a variety of topics, which typically range from prevention, to addiction, to emerging trends. All of these topics assist in heightening the awareness of impaired driving.

Recommendations

- Determine the effectiveness of the new grant application process in generating additional applications, and make adjustments appropriately.

C. Program Management

Advisory

States should establish procedures and provide sufficient oversight to ensure that program activities are implemented as intended. The procedures should:

- Designate a lead agency that is responsible for overall program management and operations;*
- Ensure that appropriate data are collected to assess program impact and conduct evaluations;*
- Measure progress in achieving established goals and objectives;*
- Detect and correct problems quickly;*
- Identify the authority, roles, and responsibilities of the agencies and personnel for management of the impaired driving program and activities; and*
- Ensure that the programs that are implemented follow evidence-based best practices.*

Status

The Administrator of the Oregon Department of Transportation (ODOT) Policy, Data, and Analysis Division serves as the Governor's Highway Safety Representative (GR). Each state is required to have a GR position to qualify for federal highway safety funding. The ODOT Transportation Safety Office (TSO) Manager is the "Coordinator" and serves as the GR's designee providing day-to-day management and oversight of State's highway safety grant program.

The TSO is responsible for coordinating and managing the State and Community Highway Safety Program (Section 402), the National Priority Safety Program – Impaired Driving (Section 405d), and Repeat Offender Funds for Impaired Driving (Section 164). Funds are used for short-term support of highway safety initiatives, with the intent that other sources of funding will be used in the future to sustain programs over the long term. The federal grant program operates on a reimbursement basis; subrecipients expend their own funds and submit a claim with supporting documentation to TSO for reimbursement.

The TSO uses a program management approach, whereby a Program Analyst (PA) or other staff member is assigned to manage a behavioral highway safety program, such as occupant protection, impaired driving, or speed/aggressive driving. Oregon is divided into five regions, and each Region has a PA who manages local individual grant agreements within their region. TSO staff focuses on reducing fatal crashes within their assigned program area to achieve state fatality and serious injury reduction goals. They also are encouraged to identify and engage potential highway safety partners not currently involved in the planning and implementation of traffic safety programs and projects. Encouraging broader community involvement in the highway safety planning process ensures that communities that are overrepresented in the crash data have a voice in the development and implementation of strategies to reduce crashes and fatalities.

The TSO has a robust Policy and Procedure Manual (PPM) that provides guidance in the administration of the TSO behavioral highway safety program.

To ensure compliance with the regulations, projects funded by TSO are monitored on a periodic basis and involve either an on-site visit or desk monitoring. Desk monitoring is an informal

process that involves TSO staff regularly reviewing subrecipient reports and written and/or emailed correspondence and conducting telephone conversations with the subrecipient agency's authorizing official. Subrecipients are required to submit activity reports and financial reimbursement claims as described in the project agreement. These regular and consistent reviews of grant activity are designed to help ensure issues with current grants are both identified and rectified in a timely manner.

On-site monitoring will occur at least once during the federal fiscal year based on the project's award amount, if the subrecipient is new and/or considered high risk. Subsequent visits during the federal fiscal year will be determined by the PA based on the on-site review and level of risk.

A site visit report must be completed for on-site monitoring. The PA will collect relevant documents discussed during the site visit and place these in the subrecipient's grant file.

Recommendations

- None.

D. Resources

Advisory

States should allocate sufficient funding, staffing, and other resources to support their impaired driving programs. Programs should aim for self-sufficiency and, to the extent possible, costs should be borne by impaired drivers. The ultimate goal is for impaired driving programs to be fully supported by impaired drivers and to avoid dependence on other funding sources. States should:

- *Allocate funding, staffing, and other resources to impaired driving programs that are:*
 - *Adequate to meet program needs and proportional to the impaired driving problem;*
 - *Steady and derived from dedicated sources, which may include public or private funds; and*
 - *Financially self-sufficient, and to the extent possible paid by the impaired drivers themselves. Some States achieve financial self-sufficiency using fines, fees, assessments, surcharges, or taxes. Revenue collected from these sources should be used for impaired driving programs rather than returned to the State Treasury or General Fund.*
- *Meet criteria to enable access to additional funding through various incentive programs.*
- *Identify opportunities and leverage resources on behalf of impaired driving efforts.*
- *Determine the extent and types of resources available from all sources (local, state, and federal; public and private) that are dedicated to impaired driving efforts.*
- *Designate a position and support the individual in that position with sufficient resources to adequately serve as a focal point for impaired driving programs and issues.*

Status

The goal of the behavioral highway safety program is to ensure all roadway users arrive at their destination safely. To accomplish this, the Oregon Department of Transportation (ODOT) Transportation Safety Office (TSO) develops the Triennial Highway Safety Plan (3HSP) for a three-year planning cycle and an Annual Grant Application (AGA) that is submitted in each year of the three-year planning cycle. The 3HSP and the AGA outline and implement a data-driven highway safety program that identifies the proven and innovative countermeasures the State and its partners will implement to address unsafe driver behaviors that cause motor vehicle crashes resulting in property damage, serious injuries, and/or fatalities.

The TSO funds projects through a combination of federal Section 402 (State Highway Safety Program Grant), Section 164 (Federal Highway Transfer Funds), and Section 405d (Impaired Driving Countermeasure Grant), State, and other local funding sources.

The TSO plans to obligate the following federal funds to impaired driving projects:

Section 164	\$1,630,000
Section 405d	\$2,522,200
Section 402	\$2,860,000

Total	\$6,912,200

The TSO is the lead agency for the impaired driving program.

The TSO's Impaired Driving Program Manager is also serving as the interim TSO Operations and Policy Manager.

Oregon does not currently have a Law Enforcement Liaison (LEL) Program.

The Oregon State Police serves as the coordinating agency for the Advanced Roadside Impaired Driving Enforcement (ARIDE) and the Drug Evaluation and Classification (DEC) Programs.

The Standardized Field Sobriety Testing (SFST) Program and the Drugs that Impair Driving (DID) are taught in the Basic Law Enforcement Academy. Refresher SFST training is provided.

Oregon has two Traffic Safety Resource Prosecutors (TSRP) to assist with the prosecution of impaired driving cases. The TSRPs are responsible for providing technical assistance and training on impaired driving cases.

Oregon does not currently have a Judicial Outreach Liaison (JOL) but uses the resources provided by the Regional JOL; however, the Regional JOL is unable to address the issues specific to Oregon.

There is a 17 percent tax levied on cannabis sales in the State. Cities and counties can collect an additional three percent tax on cannabis. The distribution of the funds is dictated by legislation. It is unclear how the funds are distributed in the State.

Recommendations

- **Establish a comprehensive Law Enforcement Liaison Program to obtain support and buy-in from law enforcement agency leadership to support traffic safety enforcement efforts.**
- **Ensure the Transportation Safety Office has a program manager dedicated full-time to impaired driving efforts.**
- Fill the vacant State Judicial Outreach Liaison position.
- **Direct a portion of the cannabis tax revenue collected to support drug impaired driving training, enforcement, and/or media campaign.**

II. Prevention

Prevention programs are most effective when they utilize evidence-based strategies, that is, they implement programs and activities that have been evaluated and found to be effective or are at least rooted in evidence-based principles. Effective prevention programs are based on the interaction between the elements of the public health model: 1) using strategies to develop resilient hosts, e.g., increase knowledge and awareness or altering social norms; 2) reducing exposure to the dangerous agent (alcohol), e.g., alcohol control policies and; 3) creating safe environments, e.g., reducing access to alcohol at times and places that result in impaired driving. Prevention programs should employ communication strategies that emphasize and support specific policies and program activities.

Prevention programs include responsible alcohol service practices, transportation alternatives, and community-based programs carried out in schools, at work sites, in medical and health care facilities, and by community coalitions. Programs should prevent underage drinking or drinking and driving for persons under 21 years of age, and should prevent over-service and impaired driving by persons 21 or older.

Prevention efforts should be directed toward populations at greatest risk. Programs and activities should be evidence-based, determined to be effective, and include a communication component.

A. Responsible Alcohol Service

Advisory

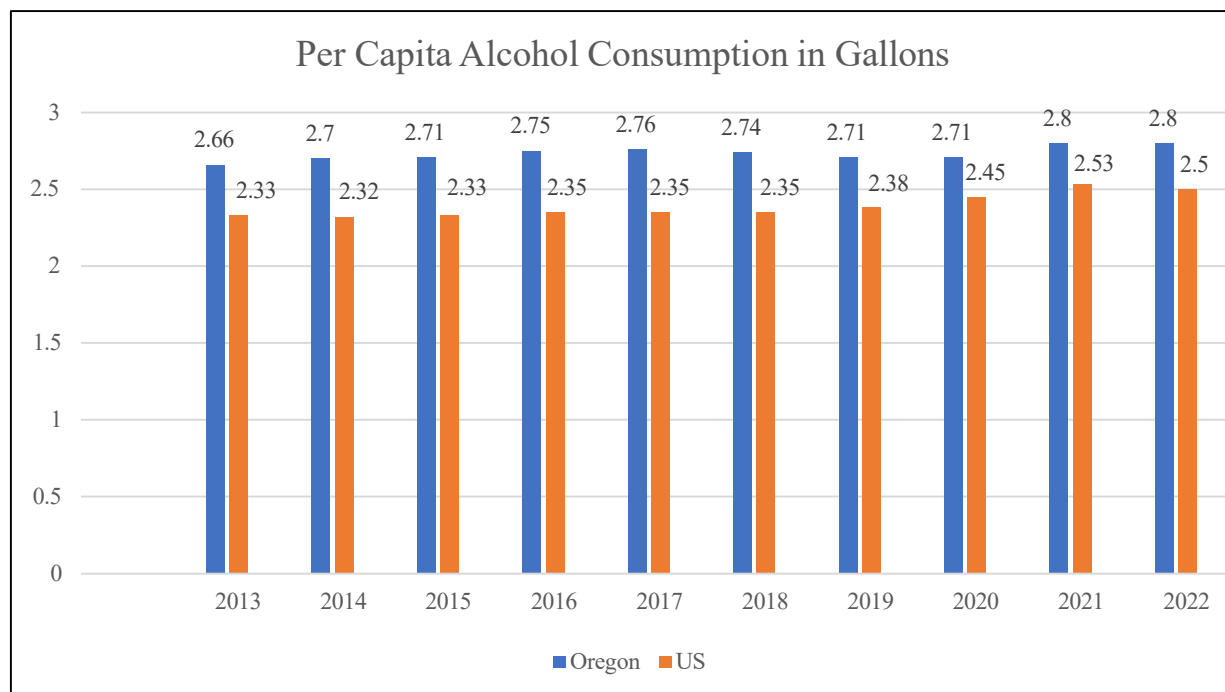
States should promote policies and practices that prevent underage drinking and over-service by anyone. States should:

- Adopt and enforce programs to prevent sales or service of alcoholic beverages to persons under the age of 21. Conduct compliance checks and “shoulder tap” activities and support the proper use of technology in alcohol retail establishments, particularly those catering to youth, to verify proper and recognize false identification.*
- Adopt and enforce alcohol beverage control regulations to prevent over-service, service in high-risk situations, and service to high-risk populations. Prohibit service to visibly intoxicated patrons; restrict alcohol sales promotions, such as “happy hours”; limit hours of sale; establish conditions on the number, density, and locations of establishments to limit impaired driving, e.g., zoning restrictions; and require beer keg registration.*
- Provide adequate resources including funds, staff, and training to enforce alcohol beverage control regulations. Coordinate with state, county, municipal, and tribal law enforcement agencies to determine where impaired drivers had their last drink and use this information to monitor compliance with regulations.*
- Promote responsible alcohol service programs, written policies, and training.*
- Provide responsible alcohol service guidelines such as best practices tool kits to organizations that sponsor events at which alcohol is sold or provided.*
- Encourage alcohol sales and service establishments to display educational information to discourage impaired driving and to actively promote designated driver and alternative transportation programs.*
- Hold commercial establishments and social hosts responsible for damages caused by a patron or guest who was served alcohol when underage or visibly intoxicated.*

Status

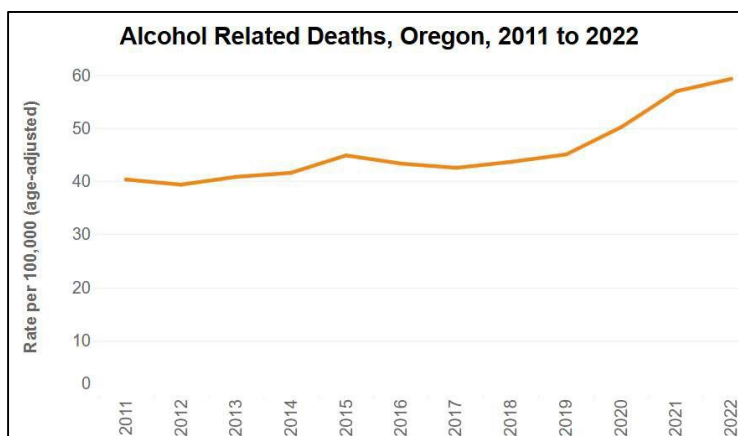
According to the National Institute on Alcohol Abuse and Alcoholism (NIAAA), per capita consumption of alcohol in Oregon in 2023—the last year for which complete data were

available—was the equivalent of 2.74 gallons of ethanol per capita. This number has been fairly consistent since 2013 and is higher, year-over-year, than the national per capita average. Oregon ranks 14th in per capita alcohol consumption in the United States.



Year	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Oregon	2.66	2.70	2.71	2.75	2.76	2.74	2.71	2.71	2.80	2.80
U.S.	2.33	2.32	2.33	2.35	2.35	2.35	2.38	2.45	2.53	2.50

Excessive alcohol use remains the third leading cause of preventable death among Oregonians and is responsible for over 2,500 deaths annually. This is the 8th highest death rate by state in the country. Excessive alcohol use has serious consequences for public health. It can lead to significant problems including liver disease, diabetes, cancer, alcohol dependence, and injuries from motor vehicle crashes and violence. Conversely, consuming less alcohol lowers a person's risk for injuries and for developing a chronic disease.



The federal government collects approximately \$1 billion per month from alcohol excise taxes on spirits, beer, and wine. Federal taxes on spirits are significantly higher than beer and wine at \$13.50 per gallon, while beer is taxed at \$18 per barrel and wine is \$1.07-\$3.40 per gallon. Distilled spirits continue to lead American alcohol sales. With 42.2 percent of market share in 2024, spirit sales slightly outpaced beer sales for the third straight year.

Oregon's distilled liquor excise tax ranks fourth in the United States at \$22.86 per gallon. Oregon's beer tax is \$.084 per gallon, ranking 45th in the country. By contrast, Tennessee has the highest excise tax for beer at \$1.287 per gallon. Oregon lawmakers proposed a bill to increase taxes on beer and wine, but it was not signed into law in the 2025 legislative session. By raising the price of beer through taxation, the public may be less likely to purchase the product because of the increased cost. This could lead to reduced consumption overall and potentially prevent some instances of alcohol-related harm. Additionally, the potential revenue increase created by these taxes could be used for impaired driving enforcement and prevention programming.

Oregon has 15.5 marijuana dispensaries per 100,000 people. Their rapid growth has resulted in the State imposing a moratorium on the licensing of new dispensaries. Oregon imposes a 17 percent sales tax on recreational (adult-use) cannabis purchases. Additionally, local jurisdictions may impose an additional tax of up to three percent, making the total possible tax rate for recreational cannabis up to 20 percent. The exact rate can vary depending on the specific city or county where the purchase is made. In 2025, the monthly marijuana tax revenues for state and local jurisdictions ranged between \$11,000,000 and \$16,000,000 a month. Other U.S. states with legal recreational marijuana vary widely in their methodologies of taxing marijuana. Oregon's marijuana tax rate is in the upper range nationally though Washington State, Oregon's neighbor to the north, has a 37 percent tax rate on recreational marijuana. Given that drug impaired driving has outpaced alcohol in Oregon, consideration should be given to increase the tax on marijuana to reduce potential harm.

The Oregon Liquor and Cannabis Commission (OLCC) is the agency responsible for regulating the sale and service of alcoholic beverages in Oregon by administering the state's Liquor Control Act and regulating the production, processing, and sale of recreational marijuana in Oregon through the Control, Regulation, and Taxation of Marijuana and Industrial Hemp Act. The OLCC also regulates the production, processing, and sale of medical products sold to Oregon Medical Marijuana Program (OMMP) cardholders in OLCC-licensed marijuana retail shops.

The agency is comprised of four major operational programs: the Distilled Spirits Program, the Recreational Marijuana Program, the Public Safety Program, and the Medical Marijuana Program. All four programs are supported by the Administration, Financial Services, and Support Services divisions. Revenue generated from these programs helps support state and local government programs.

The Distilled Spirits Program oversees the distribution and sale of distilled spirits in the State. The Distilled Spirits Division centrally purchases, warehouses, and distributes distilled spirits to Oregon's independently operated liquor stores. The OLCC's Public Safety Program licenses and regulates businesses in the alcohol industry such as manufacturers, wholesalers, bars, restaurants, grocery stores, and convenience stores.

A liquor license is required for a person, company, or business that wants to sell, manufacture, import, or distribute alcohol. Servers are required to take an in-person or online Alcohol Server Education Class.

An alcohol service permit is required for:

- A server (waitstaff, bartender, manager, etc.,) working at a business that allows customers to drink alcohol on the premises (like a restaurant, bar, tavern, winery, temporary special event license, etc.) to mix, sell, or serve alcohol.
- A manager who directly supervises servers who mix, serve, or sell alcohol to customers for drinking on the premises.
- An owner who mixes, serves, or sells alcohol or manages servers at that business and whose name is not individually listed on the liquor license.

The OLCC will deny an Alcohol Service Permit Application for:

- Felony drug or felony crimes of violence convictions
 - 1 conviction if the incident occurred within two years of the date of application
 - 2 or more convictions if two if the incidents occurred within four years of the date of application
- Driving under the influence of intoxicants (DUII) or furnishing alcohol to minors diversions or convictions
 - 2 or more diversions or convictions if two of the incidents occurred within four years of the date of application
- A combination of diversions or convictions
 - 4 or more DUII, furnishing, or felony drug or crime of violence convictions if all of the incidents occurred within 10 years and one incident or arrest was within two years of the date of application

The OLCC conducts minor decoy operations to ensure alcohol, marijuana, and other tetrahydrocannabinol (THC) products are not sold by OLCC licensees to people under the age of 21. OLCC employs minors 18-20 years old who look under the age of 26, to attempt to buy alcohol and marijuana at retail outlets. In order to ensure that licensees are not selling to minors, the OLCC conducts both random and targeted minor decoy operations. Targeted operations are in response to community concerns. Minor decoys do not disguise their real age or encourage retailers to sell them alcohol or marijuana. These decoy operations take place throughout the State and results are posted on the OLCC website. A review of the results show that these decoy operations occur at least several times per month.

The Oregon Student Health Survey (SHS) is a comprehensive, school-based, anonymous, and voluntary health survey of 6th, 8th, and 11th graders that is now administered every year. It is a key part of statewide efforts to help local schools and communities ensure that all Oregon youth are healthy and successful learners.

The 2024 SHS included responses from 62,251 Oregon, grade school, middle school, and high school students. 8th and 11th grade students were asked how difficult it would be to obtain alcohol or marijuana. In comparing the results of the 2022 survey with 2024, students generally agreed that it is more difficult to obtain alcohol and marijuana.

Table 127. If you wanted to, how easy would it be for you to get: Beer, wine or hard liquor (for example, vodka, whiskey or gin)?

	State 2022				State 2024			
	6th	8th	11th	Total	6th	8th	11th	Total
Very easy	n/a	14.7	24.6	19.6	n/a	12.0	19.4	15.3
Sort of easy	n/a	15.7	22.1	18.9	n/a	16.1	21.7	18.6
Sort of hard	n/a	15.6	16.2	15.9	n/a	16.2	16.6	16.4
Very hard	n/a	30.6	20.3	25.5	n/a	33.6	23.3	29.1
Don't know/Refused to answer	n/a	23.4	16.9	20.2	n/a	22.0	19.0	20.7
Easy to get	n/a	39.7	56.2	48.1	n/a	36.1	50.8	42.7
Hard to get	n/a	60.3	43.8	51.9	n/a	63.9	49.2	57.3

*Easy to get is the sum of very easy and sort of easy; Hard to get is the sum of sort of hard and very hard. Both measures exclude "Don't know/Refused to answer" from the calculation.

Table 130. If you wanted to, how easy would it be for you to get: Marijuana?

	State 2022				State 2024			
	6th	8th	11th	Total	6th	8th	11th	Total
Very easy	n/a	10.3	25.7	17.9	n/a	7.4	18.5	12.3
Sort of easy	n/a	8.2	16.4	12.2	n/a	7.1	15.1	10.6
Sort of hard	n/a	10.2	13.5	11.8	n/a	11.0	14.3	12.5
Very hard	n/a	48.1	27.4	37.9	n/a	52.7	33.0	44.0
Don't know/Refused to answer	n/a	23.3	17.0	20.2	n/a	21.9	19.1	20.6
Easy to get	n/a	24.0	50.7	37.7	n/a	18.5	41.5	28.9
Hard to get	n/a	76.0	49.3	62.3	n/a	81.5	58.5	71.1

*Easy to get is the sum of very easy and sort of easy; Hard to get is the sum of sort of hard and very hard. Both measures exclude "Don't know/Refused to answer" from the calculation.

In 2010, the Advertising Restrictions rule, [OAR 845-007-0020](#), was amended, removing the prohibition on advertising price reductions for alcohol sold for on-premises consumption, also known as “happy hour” advertising. This rule continued to maintain the prohibitions on advertising that encourage or promote excessive or rapid alcohol consumption.

The Commission prohibits advertising if it contains:

- (a) False or misleading information;
- (b) Claims that the alcoholic beverage has curative or therapeutic effects;
- (c) Claims that any government agency endorses or supports the alcoholic beverage;
- (d) The requirement of purchasing an alcoholic beverage in order to receive a prize or merchandise unless the manufacturer or wholesaler donates the prize or merchandise to a charitable cause or community non-profit entity;
- (e) Material so appealing to minors that it encourages them to purchase, possess, or drink alcoholic beverages;
- (f) A person displayed drinking an alcoholic beverage;
- (g) Material that encourages the use of an alcoholic beverage because of its intoxicating effect;
- (h) Statements or illustrations that an alcoholic beverage causes athletic or artistic success; or
- (i) Material that encourages excessive or rapid consumption.

Oregon's dram shop law states that an injured person can hold an alcohol vendor liable after an alcohol-related accident if the injured person can prove, by clear and convincing evidence, that:

- the vendor provided alcohol to the intoxicated person while that person was “visibly intoxicated,” and
- the injured person did not “substantially contribute” to the intoxicated person's state of intoxication.

An injured person might be found to have “substantially contributed” if he or she bought alcohol for the intoxicated person, encouraged the intoxicated person to buy or drink alcohol, or helped add to the person's intoxication in any other way.

An alcohol vendor can also be held liable for providing alcohol to someone who is underage and causes a crash if “a reasonable person would have determined that identification should have been requested or that the identification exhibited was altered or did not accurately describe the person to whom the alcoholic liquor was sold or served.”

In Oregon, the rules that apply to alcohol vendors also apply to social hosts. Social hosts who provide alcohol to underage or visibly intoxicated guests can be held liable for damages later caused by the guest.

There is a disconnect between the work of the OLCC and many of Oregon’s prevention advocates. This includes a lack of coordination in law enforcement sharing documents to better determine who is overserving alcohol. This lack of communication results in missed opportunities for a strategic focus in addressing underage consumption issues and recognition of some of the successes that the State has realized in alcohol and marijuana sales enforcement.

Recommendations

- Promote the work of Oregon Liquor and Cannabis Commission and other prevention advocates and look for opportunities for collaboration.
- **Study the potential impact of increasing the excise tax on beer and marijuana (cannabis) in Oregon.**

B. Community-Based Programs

B-1. Schools

Advisory

School-based prevention programs, beginning in elementary school and continuing through college and trade school, can play a critical role in preventing underage drinking and impaired driving. These programs should be developmentally appropriate, culturally relevant, and coordinated with drug prevention and health promotion programs. States should:

- Implement K-12 traffic safety education, with appropriate emphasis on underage drinking and impaired driving, as part of state learning standards and comprehensive health education programs;*
- Promote alcohol-and drug-free events throughout the year, with particular emphasis on high-risk times, such as homecoming, spring break, prom, and graduation;*
- Establish and enforce clear student alcohol and substance use policies including procedures for intervention with students identified as using alcohol or other substances, sanctions for students using at school, and additional sanctions for alcohol and substance use by students involved in athletics and other extra-curricular activities;*
- Provide training for alcohol and drug impaired driving, and Screening and Brief Intervention (SBI) to school personnel such as resource officers, health care providers, counselors, health educators, and coaches to enable them to provide information to students about traffic safety and responsible decisions, and identify students who may have used alcohol or other drugs;*
- Encourage colleges, universities, and trade schools to establish and enforce policies to reduce alcohol, other drug, and traffic safety problems on campus, and to work with local businesses and law enforcement agencies to reduce such problems in neighboring communities;*
- Provide training for alcohol and drug impaired driving, and Screening and Brief Intervention (SBI), to college personnel such as student affairs, student housing, health care providers, counselors, health educators, and coaches to enable them to provide information to students about traffic safety and responsible decisions, and identify students who may have used alcohol or other drugs; and*
- Establish and support student organizations that promote traffic safety and responsible decisions; encourage statewide coordination among these groups.*

Status

In the 2024 Oregon Student Health Survey, 6th, 8th and 11th grade students were asked about their involvement with alcohol. In comparing 2022 to 2024 survey results, there is a significant increase in underage drinking among all age groups.

Table 93. How old were you when you had your first drink of alcohol other than a few sips?

	State 2022				State 2024			
	6th	8th	11th	Total	6th	8th	11th	Total
I have never had a drink of alcohol other than a few sips	n/a	64.6	48.8	56.9	n/a	0.0	0.0	0.0
12 years old or younger	n/a	12.6	7.2	10.0	n/a	55.8	14.8	30.1
13 years old	n/a	5.3	4.7	5.0	n/a	31.1	10.5	18.2
14 years old	n/a	0.8	5.8	3.3	n/a	4.2	16.3	11.8
15 years old	n/a	0.0	9.4	4.6	n/a	0.0	25.7	16.1
16 years old	n/a	0.0	8.4	4.1	n/a	0.0	23.1	14.5
17 years old or older	n/a	0.1	1.0	0.5	n/a	0.0	2.5	1.6
Don't know/Refused to answer	n/a	16.5	14.7	15.6	n/a	8.8	7.2	7.8

*Denominator for 2022 data is all respondents; denominator for 2024 data is respondents who responded "Yes" to ever having had a drink of alcohol other than a few sips.

In comparing 2022 to 2024 survey results, there is a significant increase in students within all age groups indicating they had consumed alcohol over the past 30 days.

Table 94. During the past 30 days, did you have at least one drink of alcohol?

	State 2022				State 2024			
	6th	8th	11th	Total	6th	8th	11th	Total
Yes	2.8	5.9	16.6	8.1	19.1	28.8	39.5	32.6
No	90.9	92.0	81.5	88.3	73.3	65.6	55.8	61.9
Don't know/Refused to answer	6.4	2.0	1.9	3.6	7.5	5.6	4.8	5.5

In comparing 2022 to 2024 survey results, there is a significant increase in students within all age groups indicating they had consumed five or more drinks of alcohol “within a couple of hours” over the past 30 days.

Table 95. During the past 30 days, did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?

	State 2022				State 2024			
	6th	8th	11th	Total	6th	8th	11th	Total
Yes	n/a	2.0	7.0	4.5	n/a	35.1	44.4	41.6
No	n/a	97.6	91.9	94.8	n/a	57.7	50.0	52.3
Don't know/Refused to answer	n/a	0.4	1.0	0.7	n/a	7.2	5.6	6.1

Denominator for 2022 data is all respondents; denominator for 2024 data is respondents who responded "Yes" to having at least one drink of alcohol in the past 30 days.

Based on the results of the 2022 student survey (specific questions about marijuana use were not asked in the 2024 survey), Oregon’s legalization of recreational marijuana may have contributed to the large percentage of students who reported driving a vehicle after smoking marijuana. Survey respondents indicated that there is a perception among students that marijuana does not present the same danger as alcohol when driving. This includes misunderstanding of the potency of today’s marijuana along with vaping and the

use of edibles. Traditional impaired driving prevention activities such as crash carts, and drunk goggles are still popular, although research does not support their effectiveness in bringing about behavioral change. There is a need to improve the quality and “dosage” of drug education programming in Oregon’s schools.

School drug, alcohol, and impaired driving prevention materials are often obtained by the districts, as the State does not provide oversight. As a result, there may be inconsistencies between jurisdictions and a lack of quality control.

There is also a need to better advertise the existence and availability of staff training in schools. Contradictory information was provided on the existence of these programs which speaks to the need to promote ongoing efforts.

Based on Oregon’s population size and the increase in juvenile drug use, there is a lack of youth treatment beds available in Oregon.

The Oregon Department of Transportation indicates that impaired driving program guidance explicitly calls for the State to encourage colleges, universities, and trade schools to establish and enforce policies that reduce alcohol, other drug, and traffic safety problems on campus and to work with local businesses and law enforcement to reduce those problems in nearby communities.

Oregon law requires public universities to adopt a comprehensive alcohol and drug abuse policy and implementation plan, developed in consultation with the Oregon Health Authority and the Alcohol and Drug Policy Commission.

The University of Oregon (UO) collaborates with the Eugene Police Department on alcohol and other drug impacts near campus to improve town relationships and neighborhood livability, increase student accountability for alcohol-related problems, share data, and implement programs for the campus community such as a party registration program. UO uses campus programs to reduce traffic safety risk at night. UO transportation services operate Duck Rides, described as a free evening shuttle dedicated to safety and reducing nighttime travel risks. UO requires event organizers to submit a request form before serving alcohol at events on university owned or leased property and certain off premises university sponsored events. UO also runs required prevention modules for first year students and delivers workshops through peer educators.

Oregon does not provide training for alcohol- and drug-impaired driving and Screening and Brief Intervention (SBI) to college personnel such as student affairs, student housing, health care providers, counselors, health educators, and coaches to enable them to provide information to students about traffic safety and responsible decisions.

Recommendations

- Standardize school-based impaired driving materials for Oregon schools through oversight by an appropriate state agency.

- Increase the number and availability of juvenile residential treatment beds throughout the State.
- Provide training for alcohol- and drug-impaired driving, and Screening and Brief Intervention (SBI) to college personnel.

B-2. Employers

Advisory

States should provide information and technical assistance to employers and encourage them to offer programs to reduce underage drinking and impaired driving by employees and their families. These programs can be provided through Employee Assistance Programs (EAP) or Drug Free Workplace programs. These programs should include:

- *Model policies to address underage drinking, impaired driving, and other traffic safety issues, including seat belt use and speeding;*
- *Employee awareness and education programs;*
- *Management training to recognize alcohol and drug use and abuse, and appropriate responses;*
- *Screening and Brief Intervention, assessment and treatment programs for employees identified with alcohol or substance use problems (These services can be provided by internal or outside sources such as through an EAP with participation required by company policy.);*
- *Underage drinking and impaired driving prevention strategies for young employees and programs that address use of prescription or over-the-counter drugs that cause impairment.*

Status

Through Oregon's Substance Use Prevention Coalitions, employers have access to programs designed to reduce underage drinking and impaired driving through education and information dissemination for employees and families. These coalitions or the State can also provide model workplace policies to address underage drinking, substance misuse, impaired driving and other traffic safety issues, and management training to recognize and respond to substance misuse.

Recommendations

- None

B-3. Community Coalitions and Traffic Safety Programs

Advisory

Community coalitions and traffic safety programs provide the opportunity to conduct prevention programs collaboratively with other interested parties at the local level. Coalitions should include representatives of: government; highway safety; enforcement; criminal justice; liquor law enforcement; public health; education; driver licensing and education; employers and unions; the military; medical, health care and treatment communities; multi-cultural, faith-based, advocacy and other community groups. States should:

- *Encourage communities to establish community coalitions or traffic safety programs, comprised of a wide variety of community members and leaders;*

- *Ensure that representatives of local traffic safety programs participate in existing alcohol, substance abuse, injury control, and other related coalitions, (e.g., Drug Free Communities, SPF-SIG), to assure that impaired driving is a priority issue;*
- *Provide information and technical assistance to these groups, including data concerning the problem in the community and information identifying evidence-based underage drinking and impaired driving programs;*
- *Encourage these groups to provide support for local law enforcement and prevention efforts aimed at reducing underage drinking and impaired driving; and*
- *Encourage professionals, such as prosecutors, judges, nurses, doctors, emergency medical personnel, law enforcement officers, and treatment professionals, to serve as community spokespeople to educate the public about the consequences of underage drinking and impaired driving.*

Status

The Oregon Governor's Advisory Committee (GAC) on Driving Under the Influence of Intoxicants (DUII) was formed in 1983. Oregon utilized local Traffic Safety Commissions to serve as a formal body to promote safe driving in 52 Oregon communities. In addition, Oregon has worked with certain higher risk communities to promote safety, including impaired driving, deploying a safety coordinator to local communities. These groups are typically multi-disciplined and have representatives from an array of backgrounds and professions. Examples include law enforcement, engineering staff, elected leaders, school district staff, transit staff, public health staff, medical professionals, and advocacy groups.

The 2024 Impaired Driving Strategic Plan (IDSP) had 10 stated strategic goals for the coming year. Three of these goals focus on the prevention of impaired driving:

#1 – DUII Prevention Program Management and Activities

Oregon's DUII Prevention Programs are based on strong leadership and sound policy development. Programs and activities carried out under the Oregon IDSP are guided by problem identification and monitored for effectiveness. The GAC on DUII will promote its existence and mission in order to make the public aware of its ability to participate in these ongoing conversations.

Strategies for DUII Prevention and Program Management and Activities:

1. Formalize activities of the GAC on DUII
2. Keep official minutes for each GAC on DUII meeting
3. Expand GAC on DUII membership to include key areas not currently represented
4. Formalize the operational procedures for the GAC on DUII
5. Assist in providing timely DUII prevention publications, meetings, conferences and other training and education opportunities
6. Make GAC on DUII resources available to any local, state or national organization interested in or tasked with reducing impaired driving
7. Develop short and long-term objectives in order to meet the goals outlined in the IDSP
8. Assist in enacting legislation that provides resources dedicated to DUII in the state

8. Educate state, county and local officials about the value of DUII initiatives
9. Educate and encourage law enforcement agencies to use DUII enforcement grant funding to assist in the statewide efforts to deter DUII

#3 – Increased DUII Education and Training

The GAC on DUII, through its staff and members, will provide encouragement and technical support to further the education and training of police officers, prosecutors, drug recognition experts (DREs), treatment and prevention providers, traffic safety advocates, and others involved in the efforts to reduce DUII in Oregon and nationally.

#7 – Increased DUII Prevention Communications Through Oregon Department of Transportation (ODOT) Transportation Safety Office (TSO)

Oregon implements a statewide comprehensive transportation safety plan that supports priority policies and program efforts. Campaign materials target at-risk groups who are identified through statewide traffic data and provide special emphasis during high-risk times including the national crackdown periods and high-visibility enforcement efforts. Efforts should be made to identify strategies that reach underserved populations, and messaging should be conscious of contemporary public sentiment and adjusted accordingly.

Strategies in the Area of DUII Prevention Communications:

- Whenever possible, work cooperatively with the media in promoting and publicizing DUII prevention, enforcement activities, and related events that assist in educating the public on the hazards of DUII
- Whenever possible, prepare articles dealing with DUII and transportation safety
- Routinely distribute DUII prevention materials to the media and other organizations
- Continue to conduct periodic public survey polls regarding DUII, including questions about marijuana and driving
- Continue to assist in the implementation of Oregon's statewide Triennial Highway Safety Plan and Annual Grant Application processes
- Use focus groups in the development of DUII campaign materials whenever possible

Assist TSO to ensure Oregon DUII-related publications and data resources are prepared in a timely manner and provided to appropriate stakeholders in support of, or involved in DUII enforcement, prevention, treatment, and educational programs

Oregon has a myriad of impaired driving prevention programs throughout the State. They include:

- **Mothers Against Drunk Driving**, whose purpose is to “end drunk and drugged driving, support the victims of these violent crimes, and prevent underage drinking and other drug use.”
- **Oregon Impact**, whose mission is to provide programs to “ensure that our children are riding safely on our roadways, teens understand the consequences of

impaired and distracted driving, and the adults in their lives are given the tools to guide them.”

- **The Oregon Council for Behavioral Health**, whose focus is to promote, develop, and maintain the highest quality community programs and services for the treatment of problems related to behavioral health and to promote the recovery of Oregonians with substance use disorder and/or psychiatric disabilities.

There is a significant lack of coordination between coalitions and providers. Information is not shared and there is a vacuum in receiving impaired driving information from the State. Rather than being proactively disseminated, impaired driving information may only be available at the request of an interested agency or coalition.

Recommendations

- Disseminate Oregon impaired driving statistics, initiatives, and prevention activities to committees and coalitions focused on impaired driving.
- Improve the distribution of impaired driving statistics and relevant information to coalitions to maximize information sharing.
- Expand the membership of the Oregon Governor’s Advisory Committee (GAC) on Driving Under the Influence of Intoxicants to include additional members from the community including, but not limited to, probation and parole, representatives from the Department of Education, and the cannabis and alcohol industry.
- Address communication challenges that Oregon traffic safety leaders experience in providing outreach to traffic safety partners.

B-4. Transportation Alternatives

Advisory

Alternative transportation describes methods by which people can get to and from places where they drink without having to drive. Alternative transportation includes normal public transportation provided by subways, buses, taxis, and other means. Designated driver programs are one example of these alternatives. States should:

- *Actively promote the use of designated driver and safe ride programs, especially during high-risk times, such as holidays or special events;*
- *Encourage the formation of public and private partnerships to financially support these programs;*
- *Establish policies and procedures that ensure designated driver and alternative transportation programs do not enable over consumption by passengers or any consumption by drivers or anyone under 21 years old; and*
- *Evaluate alternative transportation programs to determine effectiveness.*

Status

Studies have shown that approximately half of arrested intoxicated drivers had their last alcoholic drink at a licensed bar or restaurant. Current efforts to prevent intoxicated

patrons from leaving licensed establishments and driving home have been only partially successful. Since a high proportion of drinkers drive to their drinking destination, promoting the use of alternative transportation (AT)—including safe ride shuttles, free or subsidized taxi and ridesharing services, voluntary or paid designated driver programs, and more accessible public transportation—is an important strategy for preventing impaired driving.

The State has actively promoted the use of designated drivers as well as AT options. As might be expected, rideshare, public/AT programs are not financially feasible in rural and frontier portions of the State. State and local funding via grants may help promote the use of these alternatives.

The Oregon Department of Transportation (ODOT) Transportation Safety Office (TSO) has worked with rideshare providers in the Portland Metro area to encourage alternative/safe ride participation in areas most affected by impaired driving crashes. There have been efforts to increase these initiatives throughout the State.

The TSO uses impactful public service announcements that emphasize the importance of designated drivers. The use of signage in drinking establishments that promote rideshare and designated drivers along with warnings on the penalties for impaired driving may encourage compliance.

Recommendations

- Develop formal private/public partnerships with rideshare companies.
- Require bars and other alcohol retailers to post signage warning of penalties for impaired driving and providing alcohol to underage persons, and promoting the use of designated driver and safe ride alternatives.
- Secure funding and incentives for rideshare companies to operate in rural and frontier areas of Oregon.

III. Criminal Justice System

Each State should use the various components of its criminal justice system – laws, enforcement, prosecution, adjudication, criminal penalties, administrative sanctions, and communications, to achieve both specific and general deterrence.

Specific deterrence focuses on individual offenders and seeks to ensure that impaired drivers will be detected, arrested, prosecuted, and subject to swift, sure, and appropriate criminal penalties and administrative sanctions. Using these measures, the criminal justice system seeks to reduce recidivism. General deterrence seeks to increase the perception that impaired drivers will face severe and certain consequences, discouraging individuals from driving impaired.

A data-driven, evidence-based, integrated, multidisciplinary approach and close coordination among all components of the criminal justice system are needed to make the system work effectively. In addition, coordination is needed among law enforcement agencies, on the State, county, municipal and tribal levels to create and sustain both specific and general deterrence.

A. Laws

Advisory

Each State should enact impaired driving laws that are sound, rigorous, and easy to enforce and administer. The laws should clearly: define the offenses; contain provisions that facilitate effective enforcement; and establish effective consequences. Monitoring requirements should be established by law to assure compliance with sanctions by offenders and responsiveness of the judicial system.

Noncompliant offenders should be adjudicated swiftly. The offenses should include:

- *Driving while impaired by alcohol or other drugs (whether illegal, prescription, or over-the-counter), and treating both offenses with similar consequences;*
- *A Blood Alcohol Concentration (BAC) limit of .08, making it illegal per se to operate a vehicle at or above this level without having to prove impairment;*
- *Zero Tolerance for underage drivers, making it illegal per se for persons under age 21 to drive with any measurable amount of alcohol;*
- *High BAC (e.g., .15 or greater), with enhanced penalties above the standard impaired driving offense;*
- *Repeat offender, with increasing penalties for each subsequent offense;*
- *BAC test refusal, with administrative sanctions at least as strict as the state's highest BAC offense;*
- *Driving with a license suspended or revoked for impaired driving (DWS), vehicular homicide or causing personal injury while driving impaired as separate offenses, with additional penalties;*
- *Open container, which prohibits possession or consumption of any open alcoholic beverage in the passenger area of a motor vehicle located on a public highway or right-of-way; and*
- *Primary seat belt provisions that do not require that officers observe or cite a driver for a separate offense other than a seat belt violation.*

Facilitate effective enforcement by enacting laws that:

- *Authorize law enforcement to conduct sobriety checkpoints, in which vehicles are stopped on a nondiscriminatory basis to determine whether operators are driving while impaired by alcohol or other drugs;*
- *Authorize law enforcement to use passive alcohol sensors to improve the detection of alcohol in drivers;*
- *Authorize law enforcement to obtain more than one chemical test from an operator suspected of impaired driving, including preliminary breath tests, evidentiary breath tests and screening and confirmatory tests for alcohol or other impairing drugs;*

- *Authorize law enforcement to collect blood sample by search warrant in any chemical test refusal situation, consistent with other provisions of criminal jurisprudence which allows body fluids to be collected as evidence of a crime; and*
- *Require mandatory BAC testing of drivers involved in fatal and serious injury producing crashes.*

Effective criminal penalties and administrative sanctions should include:

- *Administrative license suspension or revocation (ALR), for failing or refusing to submit to a BAC or other drug test;*
- *Prompt and certain administrative license suspension of at least 90 days for first offenders determined by chemical test(s) to have a BAC at or above the State's per se level or of at least 15 days followed immediately by a restricted, provisional or conditional license for at least 75 days, if such license restricts the offender to operating only vehicles equipped with an ignition interlock;*
- *Enhanced penalties for test refusals, high BAC, repeat offenders, driving with a suspended or revoked license, driving impaired with a minor in the vehicle, vehicular homicide, or causing personal injury while driving impaired, including: longer license suspension or revocation; installation of ignition interlock devices; license plate confiscation; vehicle impoundment, immobilization or forfeiture; intensive supervision and electronic monitoring; and imprisonment;¹*
- *Separate and distinct criminal penalties for alcohol- and drug-impaired driving to be applied individually or in combination to a single case;*
- *Assessment for alcohol or other drug abuse problems for all impaired driving offenders and, as appropriate, treatment, abstention from use of alcohol and other drugs, and frequent monitoring.*

Effective monitoring should include:

- *supervision of out-of-state offenders;*
- *proven technology (e.g., ignition interlock device, electronic confinement and monitoring) and its capability to produce reports on compliance;*
- *impaired driver tracking systems; and*
- *periodic reports on offender compliance with administrative or judicially imposed sanctions;*
- *Driver license suspension for persons under age 21 for any violation of law involving the use or possession of alcohol or illicit drugs; and*
- *Statutory and rule support for DWI Courts as a sentencing alternative for persistent DWI offenders.*

Status

Overall, Oregon has enacted impaired driving laws that are sound, rigorous, and somewhat easy to enforce and administer if all of the governmental participants are operating in cooperation and properly utilizing the statutes and tools afforded to them. The entire impaired driving statutory scheme is neatly arranged under Oregon Revised Statutes (ORS) §813; however, enforcement is challenged by the statutes' wordiness.

The Driving Under the Influence of Intoxicants (DUI) laws fall into several categories as follows:

- Offenses and other laws;
- Mandatory penalties;
- Enhanced charges and penalties for certain statuses;

¹ Limited exceptions are permitted under Federal statute and regulation, 23 U.S.C. 154 and 23 CFR Part 1270.

- Driving while suspended or revoked;
- Youthful offenders;
- Implied consent to alcohol concentration test and other evidence;
- Administrative license revocation (ALR) also known as statutory summary suspension;
- Special evidentiary and jurisdictional qualifications;
- Alcoholic beverage control; and
- Sentencing tools, including ignition interlock device (IID), vehicle forfeiture, and mandatory alcohol evaluation and treatment.

Offenses and Other Laws

The primary offense in Oregon's campaign against impaired driving is DUII. The crime applies to a person who drives a vehicle upon premises open to the public or the highways of Oregon. It can be charged under one of three elemental burdens of proof:

- Has 0.08 percent or more by weight of alcohol in the blood of the person as shown by chemical analysis of the breath or blood of the person (alcohol per se);
- Is under the influence of an intoxicant or a combination of intoxicants (DUII impairment);
- Within two hours after driving a vehicle, and without consuming alcohol in the intervening time period, has 0.08 percent or more by weight of alcohol in the blood of the person, as shown by chemical analysis of the breath or blood of the person.

Intoxicants include intoxicating liquor, a controlled substance, an inhalant, cannabis, psilocybin, or any drug, as defined in ORS 475.005 (Definitions for ORS 475.005 to 475.285 and 475.752 to 475.980), that, when used either alone or in combination with intoxicating liquor, an inhalant, psilocybin, cannabis, or a controlled substance, adversely affects a person's mental or physical faculties to a noticeable or perceptible degree. (ORS 801.321)

"Under the influence" means that as a result of taking into the body alcohol, drugs, or any combination of alcohol and drugs, a person's mental or physical faculties are adversely affected to a noticeable or perceptible degree and affects one's ability to safely operate a vehicle.

The alcohol per se offense is independent from DUII. It is distinguished from the DUII offenses by the absence of a proof element of the offender being under the influence. The alcohol per se law carries a burden of proof element that the concentration is based upon grams of alcohol in one hundred milliliters of blood or grams of alcohol in two hundred ten liters of breath. Merely being at or over a statutory measurable limit is illegal.

There are no per se levels or designations for any drugs or other substances other than alcohol.

DUII begins as a misdemeanor charge. It elevates to a felony upon a third offense within 10 years of the current offense. In practicality, a felony conviction does not occur until an offender's fourth arrest, as the first arrest often results in a diversion agreement that does not result in a conviction.

A DUII conviction in Oregon that is beyond 10 years old cannot be used for enhancement

purposes. Once a felony conviction is attained, the look back period for past DUII convictions no longer applies. A juvenile court guilty adjudication of DUII serves as a prior conviction when determining felony status. The DUII offense applies to riding a bicycle, however a bicycle conviction does not count as a prior offense when determining felony status.

Monetary, jail, licensing, monitoring, and treatment sanctions increase with each subsequent conviction after the first.

Oregon law allows diversion for most first offense DUII offenders. For example, Commercial Driver License holders are excluded. Most first offenders including underage wrongdoers, take advantage of this program and do not face the array of DUII penalties. An Oregon DUII diversion program is typically one year in length. It requires paying a court fee, attending a drug/alcohol evaluation, completing a treatment program if recommended by the evaluation, abstaining from intoxicant use for one year (although monitoring of the offender is typically only during the 90 days of treatment), and only driving a vehicle equipped with an ignition interlock device (IID). Attending a Victim Impact Panel is an elective condition. To enter a diversion program, a defendant must plead guilty or no contest. Successful completion of the program leads to a dismissal of the DUII charge. Failure of the program will result in a conviction and the corresponding penalties for a first offense. Diversion is viewed by many as an enabling tool for intoxicant abuse and future impaired driving episodes.

Enhanced penalties for Aggravated DUII rests upon one of the following additional DUII elements:

- Blood alcohol concentration of 0.15 or greater.
- There was a passenger under age 18 when the offense was committed.
- DUII offense while under IID court order.
- DUII offense while under a suspended, canceled, or revoked license due to a prior DUII.

The DUII charge can also be enhanced if the driving episode causes another's death (DUII Vehicular Homicide), or causes another's serious bodily injury (Negligent Vehicular Assault). Charging an offender with DUII Vehicular Homicide is hampered by the fact that the prosecutor must choose between proving either Manslaughter Level 1, Manslaughter Level 2, or Criminal Negligent Homicide.

Refusal to submit to an implied consent chemical test for intoxication is a traffic violation independent of any DUII charge arising from the refusal scenario.

Post-DUII conviction criminal offenses include:

- Operating a vehicle in violation of a DUII related suspension.
- Operating a vehicle in violation of an IID.
- Tampering with an IID.
- Improperly assisting a DUII offender to bypass an IID.
- Providing a DUII offender with a vehicle not equipped with an IID when required.

Laws aimed at youthful offenders include: underage DUII; graduated driver license; minor consuming, possessing or purchasing alcohol; false age representation; unlawful sale to a minor;

and unlawful purchase on behalf of a minor. Driver license suspension penalties are tied to the underage alcohol offenses. A minor possessing alcohol charge is enhanced if committed while in a vehicle. Assessment and treatment are possible sanction conditions for underage alcohol offenses and is mandatory for a repeat underage offender.

Juvenile DUII offenses are prosecuted under the adult criminal code and create an adult driver record. A juvenile DUII conviction counts as a prior conviction for adult repeat DUII status. Juvenile DUII and underage alcohol violators are eligible for diversion. Oregon does not have a zero tolerance criminal law for underage DUII. Underage DUII is prosecuted at the adult standard of 0.08 percent. Underage zero tolerance is only incorporated into the implied consent administrative license suspension process.

Oregon imposes dram shop liability against businesses and individuals licensed to sell, serve, or provide alcohol. Oregon law also assigns liability to a social host who furnishes alcohol to a guest resulting in injury or damages caused by the guest's intoxication. Social host liability is guided by case law and is not as strict as liability imposed on businesses.

Out-of-state drivers who run afoul of Oregon's DUII laws are treated the same as in-state drivers. Oregon relies on the Interstate Compact to assist with enforcement of DUII penalties for out-of-state drivers. There is little monitoring of drivers that are living in other states who have violated DUII laws in Oregon.

Oregon has an open alcohol container law that applies to all occupants of the passenger compartment of the vehicle whether the vehicle is moving or parked. A similar law prohibits the use of marijuana in a motor vehicle upon a highway.

Oregon allows municipalities to enact DUII ordinances that are enforced within the municipal judicial system. If any DUII municipal ordinances exist, it is believed that the State criminal statutes are still the sole legal authority cited by law enforcement.

Oregon DUII offenses extend to watercraft (both motorized and non-motorized), snowmobiles, farm vehicles, airplanes, and all-terrain vehicles.

Plea bargaining of DUII is prohibited in Oregon. An offender cannot plead "guilty" or "no contest" to any other offense in exchange for a dismissal of the DUII offense charged.

Oregon has a primary seat belt law.

Penalties and Monitoring

Oregon DUII Penalties

FIRST DUII CONVICTION Misdemeanor	• Two days (or 80 hours community service) to one-year in jail; • \$1,000 to \$6,250 in fines; • Probation; • One-year loss of license;
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	• IID for one year; • Alcohol/drug evaluation; • Treatment if required; and • An Optional Victim Impact Panel.
SECOND DUUI CONVICTION Misdemeanor	• Two days (or 80 hours community service) to one-year in jail; • \$1,500 to \$6,250 in fines; • Probation; • Three-year loss of license; • IID for two years; • Alcohol/drug evaluation; • Treatment if required; and an • An Optional Victim Impact Panel.
THIRD DUUI CONVICTION Felony	• 90 days (or 80 hours community service) to five-year incarceration; • \$2,000 to \$125,000 in fines; • Probation/Parole; • Permanent loss of license; • IID for two to five years; • Alcohol/drug evaluation; and • Treatment if required.

Alcohol education, assessment, or treatment are available for all DUUI offenders in four different stages of case administration:

- As a condition of pre-trial release.
- As sentencing criteria after conviction.
- As a condition of receiving a hardship driver license.
- As a condition of reinstatement of a revoked or suspended license.

The Alcohol and Drug Screening Specialist (ADSS) is a designated court agent that each court must appoint and utilize to conduct intoxicant dependency screening and referral. ADSS is an arm of the court but is also an independent contractor. ADSS must meet qualifying standards in order to serve a court.

Screening and treatment requirements have led to a cottage industry for service providers with some giving the appearance of being driven by profit rather than education and rehabilitation. Behavior modification goals appear to have been supplanted by a propensity to sanction offenders for intoxicant re-use during treatment. The offender must re-start assessment and treatment thus resulting in the service provider sustaining revenue for a longer period of time.

The problem-solving court model (DUUI Court and Drug Court) exists in Oregon in various components. Oregon has four dedicated DUUI Courts. There are at least 50 treatment courts.

Probation supervision of misdemeanor DUUI offenders is locally funded and available on a county-by-county basis. In most DUUI cases, there is little supervision, no required periodic

reports on offenders, and monitoring is not widespread. Technology, including IIDs, is loosely used for monitoring offenders. The ability to fully enforce sentence compliance, especially treatment and license sanctions, is diminished when no misdemeanor probation exists. The impact of this void is enhanced by the possibility of sentence non-compliance being undetected for at least two convictions due to DUII only becoming a felony on the third conviction. Some minimal supervision of misdemeanor DUII sanctions is tied to the Driver and Motor Vehicles Services' oversight of licensing and reinstatement.

Offender supervision is also lacking in the administration of DUII diversion. A diverted offender realistically only needs to maintain alcohol and drug abstinence during the 90-day treatment period, despite the diversion period being typically one year.

Probation supervision of felony DUII rests with the county level probation agency. Full enforcement of sentence compliance is likely to occur for felony DUII offenders.

IID statutes are cumbersome and complicated. IID installation is statutorily mandated for all DUII convictions, as well as any DUII offender seeking a hardship license. IID can also be utilized in some other license suspension situations such as pre-conviction implied consent suspension. Despite statutory allowance of IID, it is estimated that there is only 19 percent compliance with installation. Difficulty in monitoring IID compliance is cited as a reason for not fully embracing this DUII behavior modification tool.

Vehicle seizure and forfeiture is a possible sanction for a second or subsequent DUII conviction within three years of a prior DUII related conviction. No information was provided as to whether this sanction is utilized.

Administration and Evidence

a) Implied Consent and Administrative License Revocation

Any person who operates a motor vehicle upon premises open to the public or the highways of Oregon is deemed by statute to have given consent to a chemical test of the person's breath for the purpose of determining the alcoholic content of the person's blood. Urine testing is the sole implied consent test for drug impaired driving. Implied consent also applies to field sobriety tests. A person who refuses to submit to an implied consent test is subject to administrative license revocation.

The testing of a blood sample is subject to two different standards. The implied consent standard applies to blood testing in the limited situation where a person is receiving medical care in a health care facility immediately after a motor vehicle crash. In all other situations, a blood draw for determining the presence of alcohol or drugs is only permitted via a search warrant or a valid warrant exception. A refusal to comply with a search warrant blood draw, whether as a result of a chemical test refusal or not, does not constitute an implied consent refusal. Oregon now has in-state laboratory capacity to test blood for drugs in antemortem cases which eliminates the need to send blood samples out-of-state for analysis.

Implied consent administrative driver license suspension is imposed upon the following breath or

blood chemical test results:

- 0.08 percent or more by weight of alcohol in the blood of the person
- 0.04 percent or more by weight of alcohol in the blood of the person if the person was driving a commercial motor vehicle
- Any amount if the person was under age 21

Challenges to an implied consent administrative license suspension are heard by an administrative law judge working out of the Oregon Office of Administrative Hearings and serving under contract with the Oregon Department of Transportation Driver and Motor Vehicle Services Division. The arresting police officer must prosecute the administrative case without involvement of a State's attorney. Appeal of the administrative law decision goes to the Circuit Court.

Oregon currently uses the Intoxilyzer 8000 as its chemical breath alcohol test for intoxication. Preliminary breath test (PBT) devices are not utilized as a roadside DUII investigatory tool because of an appellate court decision that interprets a PBT as a test under the statutory "one test" provision.

Refusal to submit to a chemical test for intoxication results in a civil administrative suspension of the person's driver license for one year. If a person fails the breath test with a result at, or above, the legal limit, then a civil administrative suspension is imposed of varying lengths of time tied to aggravating factors. The sanction for refusing a field sobriety test is admission of that fact in any criminal or civil legal proceeding. Additionally, refusal to submit to an implied consent chemical test for intoxication is a traffic violation independent of any DUII charge arising from the refusal scenario.

Pre-trial release on one's own recognizance is statutorily presumed unless unwarranted. If unwarranted, then conditions of release can be imposed.

A hardship license is possibly available after 30 days of the administrative suspension is served for a person who fails a chemical test for intoxication. The waiting period is extended to between 90 days and three years for a person who refuses a chemical test for intoxication.

b) Other Evidence

The results of a chemical test shall be admissible in a civil or criminal action or proceeding arising from an arrest for an impaired driving offense. However, there is no provision in Oregon law to deem as relevant evidence of intoxication a chemical test result of between 0.05 and 0.08 percentage of alcohol by weight in a person's blood.

Blood draw search warrants are permitted if a person refuses to submit to a chemical test for intoxication. However, the blood alcohol test result cannot serve as a basis for an implied consent administrative license suspension.

Oregon statutes do not require mandatory testing for drivers involved in fatal and serious injury crashes.

The Oregon Supreme Court has deemed sobriety checkpoints unconstitutional under the State Constitution.

Oregon repealed a keg registration law in 2021.

Recommendations

- **Provide funding to Alcohol and Drug Screening Specialists based on evaluation and programmatic outcomes of program placements to ensure that providers are properly adhering to the American Society of Addiction Medicine criteria for each individual client.**
- **Provide adequate resources to improve the supervision and monitoring of DUII offenders at all stages of pre- and post-adjudication, especially with ignition interlock devices and misdemeanor offenders.**
- Eliminate the prohibition of implied consent license suspension when a person's blood sample is procured by a search warrant due to the person refusing a breath test.
- **Repeal the diversion law for all first offender DUII.**

B. Enforcement

Advisory

States should conduct frequent, highly visible, well publicized, and fully coordinated impaired driving (including zero tolerance) law enforcement efforts throughout the State, utilizing data to focus on locations where alcohol-related fatalities most often occur. To maximize visibility, the State should conduct frequent sobriety checkpoints, periodic saturation patrols, and sustained efforts throughout the year. Both periodic and sustained efforts should be supported by a combination of paid and earned media. To maximize resources, the State should coordinate highly visible, multi-jurisdictional efforts among State, county, municipal, and tribal law enforcement agencies to include liquor control enforcement officers. To increase the probability of detection, arrest, and prosecution, participating officers should receive training in the latest law enforcement techniques. States should:

- *Ensure that executive levels of law enforcement and State and local government make impaired driving enforcement a priority and provide adequate resources;*
- *Develop and implement a year-round impaired driving law enforcement plan supported by a strategic communication plan which includes:*
 - *periods of heightened enforcement, e.g., three consecutive weekends over a period of 16 days, and frequent sustained coverage throughout the year; and*
 - *high levels of participation and coordination among State, liquor enforcement, county, municipal, and tribal law enforcement agencies, such as through law enforcement task forces.*
- *Deploy enforcement resources based on problem identification, particularly at locations where alcohol-related fatal or other serious crashes most often occur;*
- *Conduct highly visible enforcement that maximizes contact between officers and drivers, including frequent, ongoing sobriety checkpoints and saturation patrols, and widely publicize these efforts - before, during, and after they occur;*
- *Use technology (e.g., video equipment, portable evidentiary breath tests, passive alcohol sensors, and mobile data terminals) to enhance law enforcement efforts;*
- *Require that law enforcement officers involved in traffic enforcement receive standardized state-of-the-art training in the latest law enforcement techniques such as Standardized Field Sobriety Testing (SFST), Advanced Roadside Impaired Driving Enforcement (ARIDE), emerging technologies for the detection of alcohol and other drugs; selected officers should receive training in media relations and Drug Evaluation and Classification (DEC);*
- *Ensure that officers involved in traffic enforcement receive ongoing refresher training in SFST;*
- *Evaluate the effectiveness of advanced training in the identification and apprehension of drug impaired drivers;*
- *Provide training to enhance law enforcement officers understanding of ignition interlock devices;*
- *Expedite the arrest process, e.g., by reducing paperwork and processing time from the time of arrest to booking and/or release;*
- *Evaluate program effectiveness and efficiency through the use of both output and outcome based performance measures including:*
 - *the level of effort, e.g., number of participating agencies, checkpoints conducted, arrests made;*
 - *public awareness;*
 - *reported changes in behavior, e.g., reported number of drinking driving trips; and*
 - *consequences including alcohol-related fatalities, injuries, and crashes.*
- *Use law enforcement professionals to serve as law enforcement liaisons within the State. Their activities would include:*
 - *Serving as a communication bridge between the highway safety office and law enforcement agencies;*
 - *Enhancing law enforcement agencies coordination in support of traffic safety activities;*

- *Encouraging participation in high visibility enforcement of impaired driving, occupant protection, and other traffic safety enforcement mobilizations; and*
- *Improving collaboration with local chapters of police groups and associations that represent state, county, municipal, and tribal law enforcement.*

Status

As in many states, law enforcement agency staffing is far below desired levels in Oregon. The situation has become critical and directly affects the time and staffing that can be dedicated to impaired driving enforcement. This is a concern for law enforcement executives, legislators, government leaders, community partners, current and future officers, and the public. While this does not deter the desire to address the problem of impaired driving effectively and assertively, it does affect law enforcement agencies' abilities.

Law Enforcement Executives need to stress the importance of vigorous enforcement of impaired driving laws to their officers, troopers, and deputies. This includes emphasizing impaired driving enforcement during field training of new law enforcement officers (LEO); providing them with the knowledge and confidence to address impaired drivers when encountered. This ensures the safety of their citizens and road users within their jurisdictions.

Oregon's substance impaired driving fatal crashes increased by 34 percent from 2019 to 2022 and decreased by nine percent in 2023. The substance-impaired serious injury crashes increased 60 percent from 2019 to 2023. The number of substance-impaired crashes as a percentage of all crashes has declined six percent from 2019 to 2023.

	2019	2020	2021	2022	2023
Fatal Crashes involving alcohol and/or drugs	318	326	387	427	388
Serious Injury crashes involving alcohol and/or drugs	334	291	356	497	535
As a percentage of all fatal and serious injury crashes.	27	28	23	22	21

Oregon Revised Statutes (ORS) Chapter 813 addresses Driving Under the Influence of Intoxicants (DUII) in two ways. It states that it is a violation if the person drives a vehicle when they:

- Have 0.08 percent or more by weight of alcohol in the blood as shown by chemical analysis of the breath or blood.
- Are under the influence of an intoxicant or a combination of intoxicants. An intoxicant means an intoxicating liquor, a controlled substance, an inhalant, cannabis, psilocybin, or any drug (as defined in ORS 475) that adversely affects a person's mental or physical faculties to a noticeable or perceptible degree.

ORS 475 describes the definition of drug as it relates to DUII in Oregon and includes:

- A drug classified in Schedules I through V under the federal Controlled Substances Act

- Substances recognized as drugs in the official United States Pharmacopoeia, official Homeopathic Pharmacopoeia, or official National Formulary
- Substances intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in humans or animals
- Substances (other than food) intended to affect the structure or any function of the body of humans or animals

This broad definition is not restrictive and is advantageous for law enforcement when encountering impaired drivers. The definition allows the inclusion of new substances as drug culture changes and sustains prosecution and adjudication.

ORS Chapter 813 enhances criminal penalties for repeat offenders, alcohol concentration tests 0.15 percent or greater, and the presence of a child (under 18 years of age and at least three years younger than the person driving the motor vehicle) in the vehicle at the time of the DUII violation.

ORS Chapter 813 creates a specific traffic offense fine for refusing to take a test (breath or urine) for intoxicants upon request of law enforcement.

ORS Chapter 813, Implied Consent for breath or blood, states that: Any person who operates a motor vehicle...shall be deemed to have given consent...to a chemical test of the person's breath or of the person's blood...for the purpose of determining the alcoholic content...if the person is arrested for driving a motor vehicle while under the influence of intoxicants. A test shall be administered upon the request of a police officer having reasonable grounds to believe...the person...had been driving while under the influence.

ORS Chapter 813, Implied consent to field sobriety tests, states that: Any person who operates a vehicle...shall be deemed to have given consent to submit to field sobriety tests...for the purpose of determining if the person is under the influence of intoxicants. If the person refuses to consent to field sobriety tests, the person shall be asked to provide only physical cooperation to submit to nontestimonial field sobriety tests, and the person shall be informed of the consequences of failing to physically submit to those tests.

Preliminary Breath Test (PBT) devices are not utilized for impaired driving arrests in Oregon. ORS regarding the implied consent process states that "a test shall be administered upon the request of a police officer." Oregon courts have determined that the submission of a breath sample utilizing a PBT meets the language of this law. As such, no further test can be administered, since that driver has provided a sample.

Search warrants are required for obtaining impaired driver fluid tests in certain situations. This presents a unique problem for DUII enforcement. There is no consistent search warrant process or format across Oregon's 36 counties. Law enforcement struggles with these unique processes, unnecessarily delaying the collection of evidentiary samples and weakening prosecution and adjudication.

ORS defines who may draw blood (phlebotomist) for evidence of a DUII violation as a person who has been trained in phlebotomy by an academic or medical institution. This definition will allow for the assessment of the feasibility of a law enforcement phlebotomy program in Oregon.

Oregon case law has ruled that DUII checkpoints violate the Oregon Constitution and are considered an unreasonable, warrantless search and seizure. In lieu of sobriety checkpoints, Oregon makes extensive use of saturation patrols. These high-visibility efforts focus on impaired driving as well as the leading driving violations that contribute to vehicle crashes. These highly visible enforcement events, combined with media, serve to educate the entirety of the public about vehicle crash causal factors, maximizing the ability to change behaviors.

The Oregon State Police established a High Visibility Enforcement Unit in 2023. The team consists of twenty troopers and supervisors. The team focuses their enforcement on the Fatal-5 traffic safety concerns (speed, impaired, occupant safety, lane departure, and distraction) at various specialty events throughout the State; approximately 30+ events annually. The team's engagement with local law enforcement during their saturation patrol events creates a halo effect on traffic safety elements after the team has departed.

Law enforcement agencies (LEA) receiving Oregon Department of Transportation (ODOT) Transportation Safety Office (TSO) grant funding agree to participate in the two National Highway Traffic Safety Administration (NHTSA) scheduled high-visibility nationwide impaired driving events: Christmas/New Year and Labor Day (mid-August through Labor Day). Law enforcement agencies have the option to participate in seven other scheduled events: Super Bowl, St. Patrick's Day, 4/20 (April 20) Day, Cinco de Mayo, Memorial Day, Fourth of July, Hash Oil Holiday (July 10), in addition to any local-specific events or activities (county fair, city celebrations, festivals, etc.).

Pre- and post-event media releases are required only during the two NHTSA scheduled events. LEAs awarded enforcement grant funding, may create post-event media releases for their enforcement saturations at their discretion. LEAs are required to match agency paid enforcement hours in the amount of twenty percent (annually) of the amount awarded in their grant. All LEOs who work grant-funded enforcement shifts must have received Standardized Field Sobriety Testing (SFST), Advanced Roadside Impaired Driving Enforcement (ARIDE), or Drug Evaluation and Classification (DEC) training. LEOs must maintain this requirement by attending an SFST Refresher training course within the past three years prior to participating in grant-funded enforcement activities. There is no training requirement for the remaining four tenets of the Fatal-5 traffic safety emphases. In federal fiscal year 2024-25 (October 2024 - September 2025) grantees utilized 4,882 hours (straight time, overtime, and matched hours) and made 629 DUII arrests (alcohol and/or drugs).

Data are an integral part of a LEA's plan to maximize enforcement strategies and directly affect impaired drivers. The timely reporting and collection of data are critical for agencies for problem identification and responsiveness to real-time traffic safety issues. These data include crash, arrest, and citation information. In Oregon, some data are automated, some are manually collected and entered, and some are not centrally collected. These data do not overlay for a comprehensive analysis for problem identification. As a result, the data are often stale and do not

afford LEAs or TSO the opportunity to recognize current traffic safety issues and address them immediately.

One particular group of data of note is information from vehicle crashes. Most LEAs utilize a standardized crash report form. Agencies do not submit crash data in a consistent, reliable system. Some crash data collection is automated, but most of the data are collected on paper reports and entered manually into a database.

Training in DUII investigations and drugs that impair driving are mandated by the State of Oregon Department of Public Safety Standards and Training for all LEOs at the basic police academy level. The NHTSA and International Association of Chiefs of Police approved 24 hours of training on impaired driving including SFST, DUII report writing, DUII legal issues, DUII scenarios, and wet labs. This ensures that all law enforcement officers have the basic knowledge in the detection, recognition, and processing of impaired drivers, giving them the tools and confidence required to actively address the issue of impaired driving.

SFST refresher courses are offered at various locations throughout the State. There were 66 classes held in federal fiscal year 2025. These classes are based on the NHTSA SFST Refresher training but are Oregon specific, presenting case law, implied consent issues and processes, ignition interlock device (IID) detection and enforcement, and cannabis impairment. Officers wishing to work grant-funded enforcement shifts must have attended an SFST Refresher training course within the past three years prior to participating in grant-funded enforcement activities. These courses must be at least four hours in length in order to meet the training requirement of the grant.

Infrared breath testing instrument operator training is included in the basic academy curricula. It is mandatory training resulting in all Oregon LEOs trained as breath test operators. A breath test operator permit is valid for two years. If an LEO administers one breath test during the two-year permit period, their permit automatically renews for another two-year cycle. A valid breath test operator permit is required for LEOs working grant-funded enforcement shifts.

ORS Chapter 813 states that a police officer may not request a urine test from a DUII suspect unless the officer is certified by the Department of Public Safety Standards and Training as having completed at least eight hours of training in recognition of drug impaired driving. Providing this training at the basic police academy level guarantees that all LEOs in Oregon meet this statutory requirement and are authorized to request a urine sample when necessary.

ARIDE training is offered approximately 12 times throughout the year at various locations around Oregon. There were 10 ARIDE classes with 153 students in 2024 (slightly below the 177 students in 2023). DUII drug-impaired arrests and convictions since the inception of ARIDE training for law enforcement have increased.

The Oregon DEC Program has seen an incremental drop in the number of Drug Recognition Experts (DREs) since 2020. Concurrently, the number of evaluations of drug DUII drivers has dropped significantly from an average of five evaluations per DRE annually in 2020 to less than three in 2024.

DRUG CATEGORY	2020	2021	2022	2023	2024
Depressants	244	196	114	60	69
Stimulants	285	329	127	160	154
Hallucinogens	7	10	10	4	3
Dissociative Anesthetics	6	4	10	1	2
Narcotic Analgesics	212	236	126	102	128
Inhalants	7	5	5	3	2
Cannabis	440	395	15	189	174
Polycategory cases	372	353	171	157	157
Total Enforcement Evaluations	882	855	163	400	454
Total DREs	176	180	163	149	160

In 2023, the Oregon DEC Program issued tablets to all DREs, giving them the ability to load their drug influence evaluation data into a searchable database. This tool enhances the amount and quality of data collected, better preparing law enforcement to determine problem areas and address impaired driving concerns.

In 2024, the DEC Program held one school with 21 students (much higher than the 9 students in 2023). The DEC Program continues to utilize a statewide call out system to assist law enforcement officers with drug impaired driving arrests. On average, 55 percent of calls received a response. This has increased year-over-year since the system was activated.

A green lab is a training program where LEOs practice detecting cannabis impairment in a controlled environment. This training helps LEOs identify signs of cannabis impairment effectively through the use of field sobriety tests and general observations of volunteers who have consumed cannabis. An Oregon sheriff's office currently holds green lab training sessions to provide LEOs with the knowledge and tools to better detect cannabis impaired drivers.

Oregon has an IID law that requires an IID to be installed for all DUII offenders upon conviction. ORS stipulates violations of the IID law when:

- a person knowingly provides a vehicle without an IID to a person required to have the device
- soliciting another to blow into an IID for a driver
- blowing into an IID for a person required to have the device

It is also a violation for a person required to have an IID to tamper with the device in order to circumvent the device's operation.

The compliance rate for individuals required to install an IID is low. This results in many drivers driving with a suspended license status. A person who drives a motor vehicle owned by their employer as part of their employment may apply for a hardship waiver exempting the employer from installing an IID on a company vehicle.

There is training for law enforcement in how to recognize the order for required IID installation and use on a driver record. There is not, however, coordinated or standardized training for the investigation of IID alteration or circumvention at the academy or in-service level. Ancillary

conversations occur during other impaired driving enforcement classes. The Oregon State Police created a training video in 2020 to assist in the detection of alteration or circumvention of an IID. This video is available online for use by all law enforcement agencies. There are no current resources for law enforcement to utilize during traffic law enforcement stops to assist with the determination of alteration or circumvention.

Oregon does not currently have a Law Enforcement Liaison (LEL) program. At one point, LEL law enforcement training duties fell to the Regional Traffic Safety Training Coordinator. Recognizing that these additional job duties were burdensome, these duties are no longer delegated to that position. TSO Regional Program Analysts currently conduct outreach with law enforcement officers throughout Oregon. The connection to law enforcement executives is not as robust. LELs are a key conduit to law enforcement executives. The TSO recognizes the value of an LEL program and also the level of effort needed to build a program from the ground up.

Recommendations

- Produce a reference guide (electronic and printed) describing the most common ignition interlock device installation and circumvention violations to increase law enforcement officers' confidence and better prepare them for the inspection of these devices during enforcement stops and at crash scenes.
- Address legal obstacles to the use of preliminary breath testing devices to enhance law enforcement's tools to remove impaired drivers from Oregon's roads and strengthen prosecution and adjudication.
- Study the viability of making sobriety checkpoints compliant with the Oregon State Constitution.
- **Establish a comprehensive Law Enforcement Liaison Program to obtain support and buy-in from law enforcement agency leadership to support traffic safety enforcement efforts.**
- Create a real-time data collection point so enforcement statistics can be collected and reviewed immediately following a grant-funded enforcement event.
- Require pre- and post-event media releases from law enforcement agencies receiving grant funding to maximize visibility during impaired driving enforcement saturation patrols.
- **Create an electronic, uniform law enforcement crash report and data entry point for crash data in the State.**
- **Create an electronic, uniform search warrant and process that can be utilized by all law enforcement and judicial districts throughout the State.**

C. Prosecution

Advisory

States should implement a comprehensive program to visibly, aggressively and effectively prosecute, and publicize impaired driving-related efforts, including use of experienced prosecutors, to help coordinate and deliver training and technical assistance to those prosecutors handling impaired driving cases throughout the State. Effective prosecution can include participation in a DWI Court program.

Prosecutors who handle impaired driving cases often have little experience, are responsible for hundreds of cases at a time, and receive insufficient training.² States should:

- Make impaired driving cases a high priority for prosecution and assign these cases to knowledgeable and experienced prosecutors;*
- Encourage vigorous and consistent prosecution of impaired driving (including youthful offender) cases, particularly when they result in a fatality or injury, under both impaired driving and general criminal statutes;*
- Provide sufficient resources to prosecute impaired driving cases and develop programs to retain qualified prosecutors;*
- Employ experienced prosecutors, such as State Traffic Safety Resource Prosecutors, to help coordinate and deliver training and technical assistance to prosecutors handling impaired driving cases throughout the State;*
- Ensure that prosecutors who handle impaired driving cases receive state-of-the-art training, such as in Standardized Field Sobriety Test (SFST), Drug Recognition Expert (DRE), and emerging technologies for the detection of alcohol and other drugs. Prosecutors should learn about sentencing strategies for offenders who abuse these substances and participate in multi-disciplinary training with law enforcement personnel;*
- In drug-impaired driving cases, encourage close cooperation between prosecutors, state toxicologists, and arresting law enforcement officers (including DRE). Their combined expertise is needed to successfully prosecute these cases;*
- Establish and adhere to strict policies on plea negotiations and deferrals in impaired driving cases and require that plea negotiations to a lesser offense be made part of the record and count as a prior impaired driving offense; and*
- Encourage prosecutors' participation in DWI Courts as a sentencing alternative for persistent DWI offenders.*

Status

Prosecuting attorneys have a significant responsibility in the prosecution of criminal Driving Under the Influence of Intoxicants (DUI) cases in Oregon. Prosecution occurs in a court either at the State or municipal level. DUI prosecutions in State Circuit and Justice Courts are handled by the local District Attorney's Office. There are 36 nonpartisan elected District Attorneys, one for each county. DUI prosecution in Municipal Courts is handled by City Attorneys appointed and hired by the city administration. Both District Attorney and City Attorney offices vary in size depending on caseload and population.

Prosecutors are all licensed attorneys. The responsibility of each prosecutor includes the preparation and presentation of criminal cases, including DUI cases. Cases are initiated by any of Oregon's law enforcement agencies, but the District or City Attorneys have the final decision

² Robertson, Robyn D. and Herb M. Simpson "DWI System Improvement for Dealing with Hard Core Drinking Drivers: Prosecution." Ottawa, Traffic Injury Research Foundation, 2002.

on whether to pursue a case. Most prosecution offices prioritize DUII cases in their offices; however, some District Attorney's Offices have lessened their focus on DUII cases in recent years due to external forces such as funding and personnel.

The Oregon Transportation Safety Office funds two Traffic Safety Resource Prosecutor (TSRP) positions. The TSRPs are housed in the Attorney General's Office and act as liaisons between prosecutors, the judiciary, law enforcement, and community groups. In addition, the TSRPs provide a variety of services, such as training for law enforcement and prosecutors and preparation of publications. When needed, the TSRPs also serve as trial consultants. Oregon has seen direct TSRP assistance and training have a significant impact on the effectiveness of prosecutorial efforts.

Another role of the TSRPs is diplomacy, whether it be with legislative relations, law enforcement strategy buy-ins, professional witness courtesy, or DUII Court promotion and education. TSRPs organize an annual traffic law prosecution course that is widely praised and maintain a web page with a menu of multiple document and research resources. The TSRPs also serve as a referral source to public domain online DUII resources, as well as courses presented by other jurisdictions. The TSRPs manage a listserv that has over 600 members.

The Oregon District Attorneys Association (ODAA) is a statewide non-partisan organization comprised of the elected district attorneys and their staffs throughout Oregon's 36 counties. Part of its mission includes providing legal education to its constituents. Oregon's prosecutors must maintain state bar-required continuing legal education hours, but prosecution-related education is not mandated. ODAA offers quality DUII prosecution education yearly.

Oregon's DUII prosecutors are generally more inexperienced attorneys because there is turnover in most district attorney offices. Traffic court is where new assistant prosecutors learn to be litigation lawyers. Experienced prosecutors are more likely to be involved with felony DUII cases. The prosecutor population is subject to regular turnover due to elections, appointments, and career moves resulting in a need for recurring DUII continuing education. Retention of prosecuting attorneys is difficult due to salaries and benefits below those provided in private practice. This is especially acute in rural and frontier communities. In addition to turnover, prosecutors also graduate to more serious criminal caseloads. DUII is highly complex litigation. The benefit of having more experienced litigators for DUII cases is obvious.

The Oregon State Police has two toxicology labs. Toxicologists analyze both blood and urine in drug impairment cases. Oregon prosecutors have a good working relationship with the State toxicologists. Long delays in completing specimen analysis are caused by the volume of samples and further hampered by an appellate court ruling couched in the legal doctrines of chain of custody and the confrontation clause of the U.S. Constitution.

There are seven Indian reservations in Oregon populated by nine federally recognized tribes. Each tribe is a sovereign nation governed by its own set of laws and justice system. The relationship between tribal justice systems and State district attorneys varies from tribe to tribe. Tribal prosecutors interact with the TSRP and participate in State DUII training programs.

There is no statewide uniform criminal case management system that follows a DUII case in real time from arrest until disposition or release from probation. A potential impediment to a monitoring tool of this sort is the Oregon law that requires arrest and release of a DUII offender without jail booking if certain conditions are absent.

Criminal offense plea bargain reduction, as well as diversion programs are controversial in the area of DUII adjudication nationwide. Oregon has a statutory prohibition against a DUII charge being reduced to a lesser offense; however, Oregon has a robust diversion program which allows first-time offenders to have their DUII case dismissed in most cases. Diversion proponents claim this program is necessary due to the high volume of DUII cases, time restrictions, cramped jail space, and limited court resources.

An Oregon DUII diversion program is typically one year in length. It requires a fee, drug/alcohol use assessment, treatment referral and compliance, intoxicant abstinence for the duration of the agreement, but only monitored for 90 days, and vehicle ignition interlock device (IID) installation and compliance. A defendant must plead guilty or no contest to the DUII before beginning the diversion program. Successful diversion completion leads to charge dismissal. Diversion failure will result in DUII conviction and the corresponding penalties for a first offense. Diversion opponents see it as an enabling tool for intoxicant abuse and future impaired driving episodes.

Expansion of DUII Courts, as well as eliminating barriers to access, is a goal of many entities involved in Oregon DUII administration. Favorable graduation and recidivism data has led to evolving acceptance of DUII courts among law enforcement, the judiciary, and the legislature.

Recommendations

- Maintain and fund the Traffic Safety Resource Prosecutor program.
- Increase the number of DUII/Hybrid Courts.
- Expand DUII Court access in Oregon.
- **Provide adequate resources to improve the supervision and monitoring of DUII offenders at all stages of pre- and post-adjudication, especially with ignition interlock devices and misdemeanor offenders.**
- **Repeal the diversion law for all first offender DUII.**

D. Adjudication

Advisory

States should impose effective, appropriate, and research-based sanctions, followed by close supervision, and the threat of harsher consequences for non-compliance when adjudicating cases. Specifically, DWI Courts should be used to reduce recidivism among repeat and high BAC offenders. DWI Courts involve all criminal justice stakeholders (prosecutors, defense attorneys, probation officers, and judges) along with alcohol and drug treatment professionals and use a cooperative approach to systematically change participant behavior. Where offender supervision³ is housed within the judicial branch, the guidelines of Section V(A)(1) should be utilized by the judiciary.

The effectiveness of enforcement and prosecution efforts is strengthened by knowledgeable, impartial, and effective adjudication. Each State should provide the latest state-of-the-art education to judges, covering Standardized Field Sobriety Testing (SFST), Drug Recognition Expert (DRE), alternative sanctions, and emerging technologies, such as ignition interlock devices (IID).

Each State should utilize DWI Courts to help improve case management and to provide access to specialized personnel, speeding up disposition and adjudication. DWI Courts also improve access to assessment, treatment, and sentence monitoring. Each State should provide adequate staffing and training for community supervision programs with the necessary resources, including technology, such as IID, to monitor and guide offender behavior. States should:

- Involve the State's highest court in taking a leadership role and engaging judges in effectively adjudicating impaired driving cases and ensuring that these cases are assigned to knowledgeable and experienced judges;*
- Encourage consistency in the adjudication of impaired driving (including youthful offender) cases, and the imposition of effective and appropriate sanctions, particularly when impaired driving resulted in a fatality or injury;*
- Provide sufficient resources to adjudicate impaired driving cases in a timely manner and effectively manage dockets brought before judges;*
- Ensure that judges who handle criminal or administrative impaired driving cases receive state-of-the-art education, such as in technical evidence presented in impaired driving cases, including SFST and DRE testimony, emerging technologies, such as IID, for the detection of alcohol and other drugs, and sentencing strategies for this class of offenders;*
- Use court strategies to reduce recidivism through effective sentencing and close monitoring by either establishing DWI Courts, encouraging drug courts to hear impaired driving cases, or encouraging other courts to adopt DWI/Drug Court practice. These courts increase the use of drug or alcohol assessments; identify offenders with alcohol or drug use problems; apply effective and appropriate sentences to these offenders, including abstinence from alcohol and other drugs; and closely monitor compliance, leading to a reduction in recidivism;⁴*
- Eliminate ethical obstacles, such as ex parte or commitment communications, by adopting the current Model Code of Judicial Conduct so that judges can participate more freely in DWI Court administration;*
- Provide adequate staffing and training for community supervision programs with the necessary resources, including technology such as IID and electronic confinement, to monitor and guide offender behavior and produce periodic reports on offender compliance; and*

³ Robertson, Robyn D. and Herb M. Simpson "DWI System Improvement for Dealing with Hard Core Drinking Drivers: Prosecution. Ottawa, Traffic Injury Research Foundation, 2002.

⁴ Freeman-Wilson, Karen and Michael P. Wikosz, "Drug Court Publications Resource Guide, Fourth Edition." Alexandria, VA: National Drug Court Institute, 2002.

- *Incorporate into judicial education and outreach administration the position of Judicial Outreach Liaison as a judicial educator and resource on highway traffic safety issues including impaired driving, and as an agent to create more DWI Courts.*

Status

Court Structure

The State-funded judicial system of Oregon is a four-level hierarchy consisting of the Supreme Court, an intermediate Court of Appeals, a Tax Court, and Circuit Courts. Circuit Courts are the general jurisdiction trial courts for Oregon. There are also two levels of local, limited jurisdiction courts that are not state-funded: Municipal Courts and Justice Courts which hear violations, ordinances, and misdemeanor crimes.

Misdemeanor driving under the influence of intoxicants (DUI) cases are filed in Municipal, Justice, or Circuit Courts. Felony DUI, including vehicular homicide and vehicular assault, is prosecuted solely in the Circuit Courts. There are 32 Justices of the Peace serving in 21 of Oregon's 36 counties. There are 130 Municipal Judges sitting in 137 Municipal Courts in some of the larger cities in the State. There are 179 Circuit Court Judges elected to serve in 27 state judicial districts.

Municipal and Justice Courts are generally not courts of record, and appeal of their decisions is a trial de novo in the Circuit Court of the county in which the local court exists. However, there are eight Municipal Courts that have elected to be courts of record. Municipal and Justice Court judges are not required to be lawyers, however, most of them are. These local courts are created by the municipality or county where they sit and are not under the administration of the Oregon Judicial Department, nor are they part of the State's unified court structure.

Circuit and Justice Court judges are elected to six-year terms. Municipal judges are appointed and serve at the pleasure of their city or town administration.

Specialized Courts

Oregon has treatment courts that are heavily focused on the treatment of repeat offenders, providing intensive oversight, substance abuse testing, and additional treatment. In exchange for the additional supervision, offenders may avoid periods of incarceration, gain sobriety, and become more productive members of society. Members of the judiciary are supportive of the concept and success has been shown in Oregon. There are approximately 50 treatment courts including drug courts, DUI courts, Veterans' courts, and mental health courts. There are four DUI specific courts in the State.

Expansion of DUI courts, as well as eliminating barriers to access, is a goal of many entities involved in Oregon DUI administration. Favorable graduation and recidivism data has led to evolving acceptance of DUI courts among law enforcement, the judiciary, and the legislature. Remotely located offenders are at a disadvantage to participate in DUI court treatment programs which motivate lifestyle changes. It is believed that some Oregon drug courts serve a hybrid role by accommodating both DUI and drug offenders.

The Oregon Supreme Court has shown support for treatment courts; however, it has not adopted provisions in the Model Code of Judicial Conduct that shield a treatment court judge from the restrictions on ex parte communications and making commitment statements to a particular adjudicated outcome.

Judicial Education

To promote competency and professionalism, judges must attend continuing legal education each year. All lawyer judges must obtain a minimum of 45 hours of education during each three-year reporting cycle. Oregon judges have in-person seminars and computer-based training and education through remote electronic means. Non-lawyer judges must attend judicial orientation at the National Judicial College and must meet periodic qualification review to maintain their position. No mandatory training is required on the topics of traffic and DUII cases.

The Oregon Judges Association (OJA) is a professional membership organization that primarily serves municipal, justice, and tribal court judges. The OJA stages two seminars a year and provides monthly online offerings. The OJA also coordinates with the Oregon Department of Transportation to present to its constituents an annual conference on traffic safety and impaired driving topics.

Tribal court judges are invited and participate in the regular education programs offered by the OJA. The OJA provides judicial learning resources and traffic safety adjudication best practices to Oregon's tribal courts.

Circuit court judges receive education at their annual Circuit Court Judges' Conference and at a second annual judicial conference hosted by the Oregon Judicial Department. However, circuit court judges receive little education on traffic safety and impaired driving topics.

Impaired driving education resources include the National Highway Traffic Safety Administration Region 8 Judicial Outreach Liaison (JOL), the State JOL (currently vacant), and the Traffic Safety Resource Prosecutors (TSRP). All are trained adult learner educators.

The Oregon Transportation Safety Office has previously funded a State JOL to assist the judiciary. A State JOL functions as a teacher, writer, consultant, and subject matter expert to share the latest research and best practices in impaired driving and recidivist adjudication. The position is currently vacant. The former State JOL was an effective advocate for legislative change, treatment courts, and DUII education.

Case Disposition and Offender Supervision

The Alcohol and Drug Screening Specialist (ADSS) is a designated court agent that each court, both local and state, must appoint and utilize to conduct intoxicant dependency screening and referral. ADSS is an arm of the court but is also an independent contractor. ADSS must meet qualifying standards in order to serve a court.

Screening and treatment requirements have led to a cottage industry for service providers with some giving the appearance of being driven by profit rather than education and rehabilitation. Behavior modification goals appear to have been supplanted by a propensity to sanction offenders for intoxicant re-use during treatment. The offender must re-start assessment and treatment thus resulting in the service provider sustaining revenue for a longer period of time.

Criminal offense plea bargain reduction, as well as diversion programs are controversial in the area of DUII adjudication nationwide. Oregon has a statutory prohibition against a DUII charge being reduced to a lesser offense; however, Oregon has a robust diversion program which allows first offenders to have their DUII case dismissed. Diversion proponents claim this program is necessary due to the high volume of DUII cases, time restrictions, cramped jail space, and limited court resources.

An Oregon DUII diversion program is typically one year in length. It requires a fee, drug/alcohol use assessment, treatment referral and compliance, intoxicant abstinence for the duration of the agreement but generally only monitored for 90 days, and vehicle ignition interlock device (IID) installation and compliance. A defendant must plead guilty or no contest to the DUII before beginning the diversion program. Successful diversion completion leads to charge dismissal. Diversion failure will result in DUII conviction and the corresponding penalties for a first offense. Diversion opponents see it as an enabling tool for intoxicant abuse and future impaired driving episodes.

In Oregon, there is a lack of sentencing consistency and sentence compliance monitoring in the courts. This is primarily due to the non-centralized structure of the limited jurisdiction courts and the lack of a unified, real-time case management system. A thorough examination of the practice of diversions, sentencing, and treatment monitoring which would result in data-driven uniformity and enforcement of terms would be a positive initial step in achieving sanction accountability for offenders.

There is no statewide uniform criminal case management system that follows a DUII case in real time from arrest until disposition or release from probation. A potential impediment to a monitoring tool of this sort is the Oregon law (Senate Bill 48) that requires release of a DUII offender without jail booking if certain conditions are absent.

Justice and Municipal Courts generally do not utilize formal probation services for misdemeanor DUII cases. Circuit Courts, while having more established probation services, still do not utilize probation in an in-depth manner. Probationary services for DUII offenders are generally useful in securing treatment and lifestyle changes for offenders. Adding more effective probation services will likely require additional resources for support staff and probation personnel. Exceptions in some counties and cities exist where DUII Courts or Drug Courts are active. Those counties have provided some oversight services and positive results have been shown.

Recommendations

- Fill the vacant State Judicial Outreach Liaison position.

- **Provide funding to Alcohol and Drug Screening Specialists based on evaluation and programmatic outcomes of program placements to ensure that providers are properly adhering to the American Society of Addiction Medicine criteria for each individual client.**
- Increase the number of DUII/Hybrid Drug Courts.
- Expand DUII Court access in Oregon.
- **Provide adequate resources to improve the supervision and monitoring of DUII offenders at all stages of pre- and post-adjudication, especially with ignition interlock devices and misdemeanor offenders.**
- Build a statewide uniform case management system that serves all court and justice partners in real time.
- **Repeal the diversion law for all first offender DUII.**

E. Administrative Sanctions and Driver Licensing Programs

Advisory

States should use administrative sanctions, including the suspension or revocation of an offender's driver's license; the impoundment, immobilization, or forfeiture of a vehicle; the impoundment of a license plate or suspension of a vehicle registration; or the use of ignition interlock devices. These measures are among the most effective actions that can be taken to prevent repeat impaired driving offenses.⁵

In addition, other driver licensing activities can prove effective in preventing, deterring, and monitoring impaired driving, particularly among novice drivers.

E-1. Administrative License Revocation and Vehicle Sanctions

Advisory

Each state's Motor Vehicle Code should authorize the imposition of administrative penalties by the driver licensing agency upon arrest for violation of the state's impaired driving laws.

Administrative sanctions allow the licensing agency to maintain its authority to determine the safety and competence of the driver to whom it has issued a license and to determine whether, at any time, continued provision of driving privileges is warranted. Administrative sanctions provide for consistency and uniformity of both sanction and treatment of offenders, apart from the political or social viewpoints of the various judicial jurisdictions within a state. The code should provide for:

- *Administrative suspension of the driver's license for alcohol and/or drug test failure or refusal;*
- *The period of suspension for a test refusal should be longer than for a test failure;*
- *Prompt suspension of the driver's license within 30 days of arrest, which should not be delayed, except when necessary, upon request of the State;*
- *Vehicle sanctions, including suspension of the vehicle registration, or impoundment, immobilization, or forfeiture of the vehicle(s) of repeat offenders and individuals who have driven with a license suspended or revoked for impaired driving; and*
- *Installation of ignition interlock device(s) on the offender's vehicle(s) until a qualified professional has determined that the licensee's alcohol and/or drug use problem will not interfere with their safe operation of a motor vehicle. Specific agencies within a State should be given responsibility and authority for oversight of the interlock program, including vendor selection, certification, and monitoring; review of data downloaded from the individual devices; and responsibility for administrative rules that guide sanctions for circumvention or other non-compliance with ignition interlock licensure. Licenses for drivers required to have ignition interlock devices installed on vehicles that they operate should be easily identifiable by law enforcement officers, either by virtue of a different colored background on the license or large print indicating that an ignition interlock device is required.*

Status

The Oregon Department of Transportation (ODOT), through its Driver and Motor Vehicle Services (DMV), has primary responsibility for the administration of driver licensing, including the issuance, suspension, and revocation of driver licenses. The DMV maintains comprehensive driver history records and administers administrative license actions related to impaired driving violations. Oregon continues to enhance its

⁵ Robertson, Robyn D. and Herb M. Simpson "DWI System Improvement for Dealing with Hard Core Drinking Drivers: Prosecution. Ottawa, Traffic Injury Research Foundation, 2002

information systems to support timely data sharing with law enforcement, the courts, and other public safety partners.

Impaired driving in Oregon is governed by Oregon Revised Statutes (ORS) Chapter 813. Under State law, a driver is considered impaired at a blood alcohol content (BAC) of 0.08 percent or higher for drivers age 21 and older, 0.04 percent or higher for commercial motor vehicle operators, and a zero tolerance standard (any measurable BAC) for drivers under age 21. Oregon does not have a per se tetrahydrocannabinol (THC) limit; impairment by controlled substances, marijuana, psilocybin, inhalants, and other drugs is established through observed impairment and evidentiary findings.

Oregon's implied consent law provides that any person who operates a motor vehicle on public roadways is deemed to have consented to breath, blood, or urine testing when a law enforcement officer has reasonable grounds to believe the person is impaired. Refusal to submit to chemical testing results in mandatory administrative sanctions. When appropriate, law enforcement officers may also seek a warrant to obtain breath, blood, or urine samples.

If a driver fails a chemical test or refuses testing, the DMV imposes the following administrative license sanctions:

- Drivers under age 21 (any measurable BAC):
 - First administrative suspension: 90 days
 - Second or subsequent suspension: 1 year
- Drivers age 21 and older ($BAC \geq 0.08$ percent):
 - First administrative suspension: 90 days
 - Second or subsequent suspension: 1 year
- Commercial motor vehicle operators ($BAC \geq 0.04$ percent):
 - First offense: 1-year disqualification
 - First offense while transporting hazardous materials: 3-year disqualification
 - Second or subsequent offense: Lifetime disqualification, with reinstatement eligibility after 10 years
- Refusal to submit to chemical testing (any age):
 - First refusal: 1-year suspension
 - Second or subsequent refusal: 3-year suspension

Upon arrest for driving under the influence of intoxicants (DUI), if the offender holds an Oregon driver license, the license is confiscated, and a temporary driving permit is issued. Drivers are provided with an opportunity to request an administrative hearing to contest the suspension. If a hearing is not requested or if the suspension is sustained, the suspension becomes effective following expiration of the temporary permit. Reinstatement of driving privileges requires compliance with all statutory, court, and DMV requirements, including payment of reinstatement fees.

All impaired driving convictions, diversion participation, and administrative license actions are recorded on the individual's Oregon driving record. These records are

electronically accessible to law enforcement and the judiciary and are used to identify repeat offenders and support enforcement actions, including recognition of out-of-state violations.

Oregon requires the use of ignition interlock devices (IIDs) for drivers convicted of DUII or participating in diversion, making IIDs a central impaired-driving countermeasure. Individuals subject to this requirement may only operate vehicles equipped with an IID, and restricted driving privileges remain in effect until all court, interlock, and DMV reinstatement conditions are satisfied. The DMV monitors compliance with IID requirements; however, ignition interlock failure data are collected and maintained by individual vendors. The DMV receives only a limited report covering the final 90 days of the interlock period (or the final six months for diversion participants seeking device removal), which constrains the State's ability to fully evaluate the effectiveness of the interlock program.

Recommendations

- None

E-2. Driver Licensing Programs

Advisory

Each state's driver licensing agency should conduct programs that reinforce and complement the state's overall program to deter and prevent impaired driving, including:

- (1) Graduated Driver Licensing (GDL) for novice drivers. GDL programs have been widely evaluated and all studies, although results vary significantly, have shown a reduction in crash and fatality rates.*

States' GDL program should involve a three-stage licensing system for beginning drivers (stage 1 = learner's permit; stage 2 = provisional license; and stage 3 = full license) that slowly introduces the young, novice driver to the driving task by controlling exposure to high risk driving situations (e.g., nighttime driving, driving with passengers, and driving after drinking any amount of alcohol). The three stages of the GDL system include specific components and restrictions to introduce driving privileges gradually to beginning drivers. Novice drivers are required to demonstrate responsible driving behavior during each stage of licensing before advancing to the next level.

Each stage includes recommended components and restrictions for States to consider when implementing a GDL system.

Stage 1: Learner's Permit

- *State sets minimum age for a learner's permit at no younger than 16 years of age;*
- *Pass vision and knowledge tests, including rules of the road, signs, and signals;*
- *Completion of basic driver training;*
- *Licensed adult (who is at least 21 years old) required in the vehicle at all times;*
- *All occupants must wear seat belts;*
- *Zero alcohol while driving;*
- *Learner's permit is visually distinctive from other driver licenses;*

- *Must remain crash and conviction free, including violations of the seat belt, zero tolerance, speed, and other GDL provisions, for at least six consecutive months to advance to the next level;*
- *Parental certification of 30 to 50 practice hours; and*
- *No use of portable electronic communication and entertainment devices while driving.*

Stage 2: Intermediate (Provisional) License

- *Completion of Stage 1;*
- *State sets minimum age of 16.5 years of age;*
- *Completion of intermediate driver education training (e.g., safe driving decision-making, risk education);*
- *All occupants must wear seat belts;*
- *Licensed adult required in the vehicle from 10 p.m. until 5 a.m. (e.g., nighttime driving restriction) with limited exceptions (i.e., religious, school, medical, or employment related driving);*
- *Zero alcohol while driving;*
- *Driver improvement actions are initiated at lower point level than for regular drivers;*
- *Provisional license is visually distinctive from a regular license;*
- *Teenage passenger restrictions – not more than 1 teenage passenger for the first 12 months of Intermediate License. Afterward, limit the number of teenage passengers to 2 until age 18;*
- *Must remain crash and conviction free, including violations of the seat belt, zero tolerance, speed, and other GDL provisions, for at least six consecutive months to advance to the next level; and*
- *No use of portable electronic communication and entertainment devices while driving.*

Stage 3: Full Licensure

- *Completion of Stage 2;*
- *State sets minimum age of 18 for lifting of passenger and nighttime restrictions;*
- *Zero alcohol while driving; and*
- *Visually distinctive license for drivers under the age of 21.*

(2) *A program to prevent individuals from obtaining and using a fraudulently obtained, counterfeit, or altered driver's license including:*

- *Training for alcoholic beverage sellers to recognize fraudulent or altered licenses and IDs and what to do with these documents and the individuals attempting to use them;*
- *Training for license examiners to recognize fraudulent documents and individuals seeking to apply for them; and*
- *A means by which to ensure that individuals cannot obtain driver licenses using multiple identities.*

Status

Oregon operates a Graduated Driver Licensing (GDL) system, referred to as the Provisional Licensing Program, to reduce crashes and impaired driving risk among young and novice drivers. The program applies to drivers under the age of 18 and is designed to introduce driving privileges in a phased manner while emphasizing supervised practice and risk reduction.

The first stage of Oregon's GDL system is the Instruction Permit. An applicant must be at least 15 years old and pass a knowledge test, vision screening, and meet eligibility requirements. The instruction permit must be held for a minimum of six months prior to applying for a provisional license. During this period, the teen driver is required to complete either 100 hours of supervised driving practice, including night driving, or 50 hours if the driver completes an Oregon-approved driver education course. Supervision must be provided by a licensed driver at least 21 years of age. Any traffic convictions during the permit period may delay advancement to the next stage.

Upon meeting permit requirements, the driver may be issued a Provisional Driver License. This intermediate stage includes restrictions intended to limit high-risk driving situations. For the first six months, the driver may not carry any passengers under age 20 unless they are members of the driver's immediate family and may not drive between midnight and 5:00 a.m. except for specific exceptions such as employment, school-related activities, or when accompanied by a licensed driver age 25 or older. For the second six months, the passenger restriction is relaxed to no more than three passengers under age 20 who are not immediate family members, while nighttime driving restrictions remain in effect. Oregon law also prohibits all provisional drivers from using mobile electronic devices while driving, including hands-free devices otherwise allowable under Oregon law. These restrictions expire after one year or when the driver turns 18, whichever occurs first.

There is no requirement for a formal driver education course prior to teen licensure which may limit the consistent delivery of critical safety information. Knowledge and skills testing for licensure confirm minimum competency but does not ensure that young drivers receive structured instruction on alcohol- and drug-impaired driving risks, zero tolerance laws, or the long-term consequences of impaired driving decisions. Driver education provides a uniform opportunity to address these risks before teens enter high-exposure driving environments, strengthening early impaired driving prevention during the highest risk period for new drivers.

Oregon regulates alcohol sales and responsible service practices through the Oregon Liquor and Cannabis Commission (OLCC). The OLCC administers mandatory Alcohol Server Education, requiring individuals who sell or serve alcohol to complete State-approved training within 45 days of hire. The training emphasizes responsible service, prevention of underage sales, recognition of intoxication, and compliance with State alcohol laws. Server permits must be renewed every five years.

The OLCC enforces alcohol service requirements through decoy operations and compliance checks to assess whether licensees properly verify age and refuse unlawful sales. Violations may result in administrative sanctions, including fines, license suspensions, or mandatory retraining. These enforcement efforts support impaired driving prevention by reducing underage access to alcohol.

Cannabis sales are also regulated by the OLCC. Cannabis retail employees are required to complete training related to age verification and compliance with State cannabis laws.

Retailers must verify that customers are at least 21 years of age by examining valid, unexpired government-issued photo identification for every transaction. Compliance checks and inspections are conducted to ensure adherence to licensing and age requirements.

Oregon's driver licensing system incorporates several identity verification measures to support impaired driving enforcement and prevent fraudulent licensing. Licensing personnel receive training in fraudulent document recognition, and facial image verification technology is used to ensure the integrity of applicant identities. A one-to-many verification compares a new applicant's facial image against all current license holders to detect attempts to obtain multiple licenses under different identities, while a one-to-one verification confirms the applicant matches their prior record.

The driver licensing system aligns with national standards and integrates with databases such as the Systematic Alien Verification for Entitlements, Social Security Online Verification, the Commercial Driver License Information System, and the State Pointer Exchange Service. These tools allow Oregon to identify individuals who are ineligible or have lost driving privileges in other states and facilitate the exchange of driver history and conviction data, including driving under the influence of intoxicants arrests and convictions, strengthening impaired driving assessment and enforcement across jurisdictions.

Recommendations

- Incorporate impaired driving education into existing teen licensing touchpoints, such as permit testing, provisional licensing requirements, or required parental acknowledgement forms, to ensure all new drivers receive consistent instruction on zero tolerance laws, impairment risks, and long-term consequences without establishing a mandatory driver education course.

IV. Communication Program

States should develop and implement a comprehensive communication program that supports priority policies and program efforts, including high visibility enforcement (HVE). Communication strategies should specifically support efforts to increase the public perception of the risks of detection, arrest, prosecution, and sentencing for impaired driving. Additional communication strategies should address underage drinking, impaired driving, and reducing the risk of injury, death, and the resulting medical, legal, social, and other costs if there are specific programs underway in the community. Communications should highlight and support specific program activities underway in the community and be culturally relevant and appropriate to the audience.

Advisory

States should:

- *Focus their publicity efforts on creating a perception of risk of detection, arrest, prosecution, and punishment for impaired driving;*
- *Use clear, concise enforcement messages to increase public awareness of enforcement activities and criminal justice messages that focus on penalties and direct costs to offenders such as loss of license, towing, fines, court costs, lawyer fees, and insurance;*
- *Employ a communications strategy that principally focuses on increasing knowledge and awareness, changing attitudes, and influencing and sustaining appropriate behavior;*
- *Develop a year-round, data-driven, strategic, and tactical communication plan that supports the state's priority policies and programs such as alcohol's effects on driving and consequences of being caught driving impaired or above the state's zero tolerance limit;*
- *Implement a communication program that:*
 - *Uses messages that are coordinated with National campaigns and messages that are culturally relevant and linguistically appropriate;*
 - *Considers special emphasis during holiday periods and other high-risk times throughout the year, such as New Year's, 4th of July, Labor Day, Halloween, prom season, and graduation;*
 - *Uses paid, earned, and donated media coordinated with advertising, public affairs, news, and advocacy; and*
 - *Encourages communities, businesses, and others to financially support and participate in communication efforts.*
- *Direct communication efforts at populations and geographic areas at highest risk or with emerging problems such as youth, young adults, repeat and high BAC offenders, and drivers who use prescription or over-the-counter drugs that cause impairment;*
- *Use creativity to encourage earned media coverage, use of a variety of messages or "hooks" such as inviting reporters to "ride-along" with law enforcement officers, conducting "happy hour" checkpoints or observing under-cover liquor law enforcement operations, and use of social media;*
- *Monitor and evaluate the media efforts to measure public awareness and changes in attitudes and behavior; and*
- *Ensure that personnel who are responsible for communications management and media liaison are adequately trained in communication techniques that support impaired driving activities.*

Status

The Oregon Department of Transportation (ODOT) Transportation Safety Office (TSO) uses a communications contractor for their media campaigns. The TSO and the contractor discuss the messaging tactics and strategies to be used for campaigns. The media plan that is developed is used by TSO to coordinate a communication strategy with partners and keep everyone informed

of planned media and outreach creatives and actions. Such communication provides partnership opportunities and more efficient use of limited resources. The TSO develops campaigns that can be used by local highway safety advocacy groups to standardize the message and maximize creative impact. The TSO asks all partners to use the media materials; however, some grantees are required to use the materials.

In addition to mobilizing grantees, local agencies, and organizations, TSO continues to use the Governor's Office Proclamation Process, and other state and local agencies to assist with promotional efforts to draw attention to national and Oregon-specific impaired driving initiatives.

All law enforcement operation grants awarded by TSO require, as a condition of the grant, that the subrecipient agency hold a local news conference and/or issue a news release regarding planned enforcement activities during the Christmas/New Year and Labor Day holiday periods. In addition, they are required to issue a news release reporting the results of those specific enforcement operations, and they are encouraged to conduct similar media activities for other high-visibility Driving Under the Influence of Intoxicants (DUII) enforcement operations held throughout the year.

The TSO encourages grantees and other traffic safety partners to include traffic safety related data in their own press releases and newsletters in an effort to generate local media (print and electronic) interest in developing a news story item.

Strategies in the Area of DUII Prevention Communications:

1. Whenever possible, work cooperatively with the media in promoting and publicizing DUII prevention, enforcement activities, and related events that assist in educating the public on the hazards of DUII
2. Whenever possible, prepare articles dealing with DUII and transportation safety
3. Routinely distribute DUII prevention materials to the media and other organizations
4. Continue to conduct periodic public survey polls regarding DUII, including questions about marijuana and driving
5. Continue to assist in the implementation of Oregon's statewide Triennial Highway Safety Plan and Annual Grant Application processes
6. Use focus groups in the development of DUII campaign materials whenever possible
7. Assist TSO in ensuring Oregon DUII-related publications and data resources are prepared in a timely manner and provided to appropriate stakeholders in support of, or involved in DUII enforcement, prevention, treatment, and educational programs

In 2025, ODOT, in cooperation with Gard Communications of Portland, engaged Riley Research Associates (RRA) to plan and execute two focus groups among Portland-area drivers who are users of cannabis products. The purpose of the group was to learn more about drivers' awareness and perceptions of driver safety issues, to gather feedback about their knowledge and use of cannabis products, and to better understand their attitudes about driving while under the influence of cannabis.

Graphics are being developed for posters to be used in cannabis dispensaries to assist in educating the public that cannabis impairs your ability to drive.

Recommendations

- Develop and execute a year-round communication plan that addresses alcohol and other drugged driving.
- Conduct focus groups to ensure that messaging resonates with the intended audience.
- Determine if the data support a media campaign for youth on the consequences of driving impaired by alcohol or other drugs.
- **Conduct a comprehensive paid media campaign focused on cannabis-impaired driving awareness and the consequences associated with it.**
- Develop press materials that law enforcement agencies can use to publicize their high-visibility enforcement campaigns.

V. Alcohol and Other Drug Misuse: Screening, Assessment, Treatment, and Rehabilitation

Impaired driving frequently is a symptom of the larger problem of alcohol or other drug misuse. Many first-time impaired driving offenders and most repeat offenders have alcohol or other drug abuse or dependency problems. Without appropriate assessment and treatment, these offenders are more likely to repeat their crime. One-third of impaired driving arrests each year involve repeat offenders.⁶ Moreover, on average, individuals with alcohol or other drug abuse problems, drive several hundred times within two hours of drinking before they are arrested for driving while impaired.⁷

States should have a system for identifying, referring, and monitoring convicted impaired drivers who are high risk for recidivism for impaired driving.

Nationally, the number and diversity of problem solving courts has grown dramatically. One such problem solving model is the DWI Court. These courts provide a dedicated docket, screening, referral, and treatment and intensive monitoring of impaired driving offenders. States and localities that implement DWI Courts should ensure that they are established and operated consistent with the Guiding Principles recommended by the National Center for DWI Courts.

www.dwicourts.org/sites/default/files/ncdc/Guiding_Principles_of_DWI_Court_0.pdf

In addition, alcohol use leads to other injuries and health care problems. Almost one in six vehicular crash victims treated in emergency departments are alcohol positive, and one third or more of crash victims admitted to trauma centers—those with the most serious injuries - test positive for alcohol. Studies report that 24-31 percent of all emergency department patients screen positive for alcohol use problems. Frequent visits to emergency departments present an opportunity for intervention, which might prevent these individuals from being arrested or involved in a motor vehicle crash, and result in decreased alcohol consumption and improved health.

Each State should encourage its employers, educators, and health care professionals to implement a system to identify, intervene, and refer individuals for appropriate substance abuse treatment.

A. Screening and Assessment

Each State should ensure that all convicted impaired drivers are screened for alcohol or other substance abuse and dependency. The most immediate screening should take place in the criminal justice system. However, states should also encourage its health care professionals, employers, and educators to have a systematic program to screen and/or assess drivers to determine whether they have an alcohol or drug abuse problem and, as appropriate, briefly intervene or refer them for appropriate treatment. Many individuals who are drivers and who have alcohol or other drug abuse problems present themselves in a variety of settings, e.g., emergency departments, in which Screening and Brief Intervention (SBI) and referral are appropriate and serve to prevent the individual from being involved in a future impaired driving crash or arrest.

⁶ Repeat DWI Offenders in the United States. “Washington, DC: NHTSA Technology Transfer Series, Traffic Tech No. 85, February 1995.

⁷ On average, 772 such episodes, according to Zador, Paul, Sheila Krawchuck, and Brent Moore, “Drinking and Driving Trips, Stops by Police, and Arrests: Analyses of the 1995 National Survey of Drinking and Driving Attitudes and Behavior.” Washington, DC: U.S. Department of Transportation, NHTSA Technical Report No. DOT HS 809 184, December 2000.

A-1. Criminal Justice System

Advisory

Within the criminal justice system, people who have been convicted of an impaired driving offense should be assessed to determine whether they have an alcohol or drug abuse problem and to determine their need for treatment. The assessment should be required by law and completed prior to sentencing or reaching a plea agreement. The assessment should be:

- *Conducted by a licensed counselor or other alcohol or other drug treatment professional or by a probation officer who has completed training in risk assessment and referral procedures;*
- *Used to decide whether a treatment and rehabilitation program should be part of the sanctions imposed and what type of treatment would be most appropriate;*
- *Based on standardized assessment criteria, including validated psychometric instruments, historical information (e.g., prior alcohol or drug-related arrests or convictions), and structured clinical interviews; and*
- *Appropriate for the offender's age and culture using specialized assessment instruments tailored to and validated for youth or multi-cultural groups.*

Status

Oregon has specific statutes addressing the screening and assessment of impaired drivers. Oregon Revised Statutes (ORS) 813.021 states that:

- (1) When a court, in accordance with ORS 813.020, requires a person to complete a screening interview and a treatment program, the court shall require the person to do all of the following:
 - (a) Complete a screening interview for the purpose of determining appropriate placement of the person in a program for treatment for alcoholism, drug dependency or dependency on inhalants.
 - (b) Pay directly to the agency or organization conducting the screening interview a fee of \$150.
 - (c) Complete the treatment program to which the person is referred.
 - (d) Pay for the treatment program to which the person is referred.
- (2) The screening interview required by this section shall be conducted by an agency or organization designated by the court. The designated agency or organization must meet the standards set by the Director of the Oregon Health Authority to conduct the screening interviews. Wherever possible a court shall designate agencies or organizations to perform the screening interview that are separate from those that may be designated to carry out a treatment program.
- (3) An agency or organization doing a screening interview under this section may not refer a person to a treatment program that has not been approved by the Director of the Oregon Health Authority.
- (4) The agency or organization conducting a screening interview under this section shall monitor the progress of the person referred to the agency or organization. The agency or organization shall make a report to the referring court stating the person's successful completion or failure to complete all or any part of the screening interview or of the treatment program to which the person was referred

by the agency or organization. The report shall be in a form determined by agreement between the court and the agency or organization. [1999 c.126 §3; 1999 c.619 §8a; 2005 c.303 §1; 2009 c.595 §1140]

All Driving Under the Influence of Intoxicants (DUI) offenders entering a treatment program are required to participate using an American Society of Addiction Medicine (ASAM) Assessment using Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-5) Diagnostic Curriculum. Providers will be moving to the ASAM 4th edition which is to go into effect at some point in the future, though it has not been determined when this will occur. There has been significant confusion and frustration from treatment providers over the lack of communication from the Oregon Health Authority (OHA) on the roll out of the new edition of ASAM. This change will require DUI rule changes and significant training requirements for providers.

Only Substance Use Disorder Providers approved by the OHA may conduct these assessments. The assessment results will determine the most appropriate treatment setting. Typically, DUI assessments cost the client \$150.00, though it may cost more in other areas. There are occasions in which judges ignore these statutes and waive the screening for defendants.

The DUI screening assessment/referral process supports the following:

- Ensures that the individual entering DUI Diversion, or being sentenced for DUI Conviction, is properly referred to a state-certified DUI treatment provider for services.
- Collateral information is obtained from the participant concerning: a) Their legal history, b) Their mental health status (past and present), c) Specifics of their DUI incident, and d) Their substance use history. This information is then provided to the treatment agency along with a recommendation for the level of treatment to be provided.
- The court does not determine the level of care needed/required by a DUI participant; however, the court can order a participant to comply with the level of care being recommended, including up to the entry and completion of residential services. The court also has the authority to order an individual for additional treatment services, should their behavior demonstrate an inability to sustain recovery and/or regression in the Stage of Change module. The court relies on the information provided and recommended by the Alcohol and Drug Screening Specialist (ADSS) and treatment provider.

There are barriers in clients having access to treatment. This is most acute in rural parts of the State. The use of telehealth services offers virtual treatment providing opportunities for participants in rural/frontier communities or with populations with unique needs surrounding language, culture, or gender.

There may be significant lag time to a treatment referral as this cannot occur until the client presents themselves. A client is given one year to complete treatment and there are no consequences for non-compliance. It appears there are loopholes that may result in delay

from sentencing to treatment. These delays place the community at risk when an individual with a substance use disorder remains untreated.

When in treatment, drug and alcohol testing occurs three to six times per month. A positive test will result in restarting the requirement of three months of enforced sobriety. There is a concern, that rather than placing an emphasis on sobriety, treatment providers may be more concerned with “checking the box” for client compliance, rather than recovery.

The DUII Screening Assessment utilized by the ADSS is conducted through a face-to-face interview and the responses received from the participant include age-appropriate information coupled with environmental factors. The ADSS conducts the screening interview in the language requested by the participant, including assistance from state-certified language providers. The ADSS may also use the Impaired Driver Assessment or Computerized Assessment Referral System to supplement the assessment and better determine criminogenic risk and needs.

Recommendations

- Hold discussions with the Oregon judiciary to ensure that the screening requirements outlined in Oregon Revised Statutes 813.021 are consistently followed.
- Work with the Oregon Health Authority to provide clear communication and information to treatment providers on the future roll out of the American Society of Addiction Medicine 4th edition as well as DUII rule changes.
- **Provide funding to Alcohol and Drug Screening Specialists based on evaluation and programmatic outcomes of program placements to ensure that providers are properly adhering to the American Society of Addiction Medicine criteria for each individual client.**
- Revise existing orders to include and shorten timelines from sentencing to assessment and assessment to treatment.

A-2. Medical and Other Settings

Advisory

Within medical or health care settings, any adults or adolescents seen by health care professionals should be screened to determine whether they have an alcohol or drug abuse problem. The American College of Surgeons mandates that all Level I trauma centers, and recommends that all Level II trauma centers, have the capacity to use Screening and Brief Intervention (SBI). SBI is based on the public health model which recognizes a continuum of alcohol use from low risk, to high risk, to addiction. Research from the Centers for Disease Control and Prevention indicates that an estimated 25 percent of drinkers are at risk for some harm from alcohol including impaired driving crashes. These individuals' drinking can be significantly influenced by a brief intervention. An estimated four percent of the population has a

serious problem with alcohol abuse or dependence. A brief intervention should be conducted and, if appropriate, the person should be referred for assessment and further treatment.

SBI can also be implemented in other settings including: Employee Assistance Programs (EAP), schools, correctional facilities, at underage drinking party dispersals, and any setting in which at-risk drinkers are likely to make contact with SBI providers. Screening and brief intervention should be:

- Conducted by trained professionals in hospitals, emergency departments, ambulatory care facilities, physicians' offices, health clinics, employee assistance programs, and other settings;*
- Used to decide whether an assessment and further treatment is warranted;*
- Based on standardized screening tools (e.g., CAGE, AUDIT or the AUDIT-C) and brief intervention strategies;⁸ and*
- Designed to result in referral to assessment and treatment when warranted.*

Status

In Oregon, unintentional injuries are the third leading cause of death behind cancer and heart disease. The rates of unintentional injuries are climbing significantly, with drug overdoses and motor vehicle crashes among the main causes. Hospital officials indicate that there is consistency in testing incoming patients for alcohol, but drug testing is at the discretion of the attending physician as drug tests can be expensive. This discretion may result in an unintended bias based on the client's race, place of residence, or socioeconomic status.

There has been a significant number of individuals who are injured while riding electric scooters and e-bikes. A large percentage of injured riders admitted to the Oregon Health and Science University (OHSU) Hospital are positive for alcohol and/or drugs. There is a need to educate the public on the dangers of riding these vehicles while impaired.

Screening, Brief Intervention, and Referral to Treatment (SBIRT) is one of the incentive measures for Oregon's hospitals. As part of this program, hospitals are working to implement SBIRT in emergency departments throughout the State. Technical assistance on this measure is being provided by the Oregon Health Authority and the Oregon Association of Hospitals and Health Systems. SBIRT is encouraged throughout the State but is not exclusively focused on the DUII population.

Recommendations

- Continue to promote the use of Screening, Brief Intervention, and Referral to Treatment for alcohol/drug use in medical settings.

⁸ For a discussion of assessment instruments, see: Allen, John and M. Colombus (Eds.), NIAAA Handbook on Assessment Instruments for Alcohol Researchers (2nd edition). Rockville, MD: National Institute on Alcohol Abuse and Alcoholism, 2003. For an overview of alcohol screening, see: "Screening for Alcohol Problems – An Update," Bethesda, MD: National Institute on Alcohol Abuse and Alcoholism, Alcohol Alert No. 56, April 2002. For a primer on helping patients with alcohol problems, see: "Helping Patients with Alcohol Problems: A Health Practitioner's Guide," Bethesda, MD: National Institute on Alcohol Abuse and Alcoholism, NIH Publication No. 04-3769, Revised February 2004.

- Educate Oregonians on the dangers of riding electric scooters and e-bikes while impaired.

B. Treatment and Rehabilitation

Advisory

Each State should work with health care professionals, public health departments, and third party payers, to establish and maintain programs for persons referred through the criminal justice system, medical or health care professionals, and other sources. This will help ensure that offenders with alcohol or other drug dependencies begin appropriate treatment and complete recommended treatment before their licenses are reinstated. These programs should:

- Match treatment and rehabilitation to the diagnosis for each person based on a standardized assessment tool, such as the American Society on Addiction Medicine (ASAM) patient placement criteria;*
- Provide assessment, treatment, and rehabilitation services designed specifically for youth;*
- Provide culturally appropriate treatment and rehabilitation services;*
- Ensure that offenders that have been determined to have an alcohol or other drug dependence or abuse problem begin appropriate treatment immediately after conviction, based on an assessment. Educational programs alone are inadequate and ineffective for these offenders;*
- Provide treatment and rehabilitation services in addition to, and not as a substitute for, license restrictions and other sanctions; and*
- Require that offenders, who either refused or failed a BAC test, and/or whose driver's license was revoked or suspended, complete recommended treatment, and that a qualified professional has determined the offender has met treatment goals before license reinstatement.*

Status

The 2024 National Survey on Drug Use and Health ranks Oregon as 18th in drug use overall and is one of the top five states with the highest percentage of illicit drug use. This is a decline from 2019, when Oregon ranked fourth worst for addiction and was 47th for access to treatment. The most recent survey ranks Oregon worst in the nation for Illicit Drug Use other than Marijuana in the Past Month and Hallucinogen Use in the Past Year. Oregon ranks higher than the national average in all substance use metrics including binge drinking and alcohol and drug use disorders.

Oregon offers education, intensive outpatient, and residential services to Driving Under the Influence of Intoxicants (DUI) offenders screened, assessed, and found to be in need of treatment. Oregon requires specific topics to be covered within DUI education and requires a minimum number of treatment contact hours, per level of care.

The 2024 Oregon Governor's Advisory Committee (GAC) on DUI Strategic Plan referenced specific challenges that have been addressed through the 2024 modification of Measure 110. Specifically, it indicated that "Oregon's drug-impaired driving problem has continued to worsen in recent years, which has correlated with the passage of voter-approved Ballot Measure 110 in 2020, which decriminalized possession of user quantities of hard drugs such as methamphetamine, cocaine, fentanyl, and others. In addition to seeing astronomical rises in overdose deaths not related to driving, drug-only impaired driving fatalities has risen nearly 28 percent since Measure 110 took effect.

In 2024, the Oregon Legislature passed House Bill 4002 which recriminalizes drug possession. Measure 110 had obligated funds to support substance abuse treatment, and those resources

remain in place with the new legislation. Proponents of the new legislation have suggested the renewal of criminal penalties for drug possession will encourage more people to make use of the treatment resources that have been available since Measure 110 was enacted.

The Oregon GAC on DUII Strategic Plan Strategy #9 recommends supporting DUII Treatment and Rehabilitation Programs. It states:

Impaired driving is frequently an indicator of serious alcohol or substance use disorders. These problems reflect the importance of assessing impaired driving offenders for substance use disorders and implement early treatment interventions. Often, DUII behavior can be eliminated if the substance use disorder, and underlying trauma, is recognized and treated in its early stages. The GAC on DUII understands and supports statewide efforts to properly and effectively treat and rehabilitate DUII offenders. Unfortunately, treatment providers are chronically understaffed and are often faced with industrywide roadblocks to providing the most effective therapies. It is important that key stakeholders assist in determining the effectiveness of treatment in meeting the needs of impaired drivers and develop recommendations to enhance those efforts and reduce the incidents of repeat DUII.

Oregon Impaired Driving Strategic Plan (IDSP) Strategies in the Area of Supporting DUII Treatment and Rehabilitation Programs:

1. Support the concept that prevention and education are critical components in deterring DUII and an effective piece of the IDSP
2. Continue to promote effective strategies to reduce impaired driving and address underage drinking by developing a multi-faceted approach to reach the highest number of targeted individuals
3. Support and promote effective and mandatory treatment of DUII offenders
4. Continue efforts with the various workgroups to improve programs and reduce DUII recidivism rates among offenders
5. Continue to expand the partnership with the DUII courts to provide access to the proper DUII and substance use disorder treatment providers for high-risk offenders
6. Assist in increasing access to treatment services for those individuals needing substance use disorder treatment
7. Support provider training opportunities to enhance treatment practices and understanding of co-occurring disorders

Oregon Health Authority, Health Systems Division: Behavioral Health Services thoroughly outline treatment requirements for service providers:

Upon completion of court-ordered treatment after a DUII conviction, the client must comply with:

813.022 Proof of treatment. (1) A person who has been convicted of driving while under the influence of intoxicants under ORS 813.010 shall provide proof to the Department of Transportation that the person completed a treatment program to which the person was referred under ORS 813.021. (2) The department may not reinstate a person's driving privileges unless: (a) The person has provided proof of completing a treatment program

as required under subsection (1) of this section; (b) The person has an order from the circuit court of the county in which the person was convicted that the person has taken sufficient steps to satisfy the requirement under ORS 813.021 to complete a treatment program.

The Oregon Health Plan (OHP) covers treatment costs for low-income residents. However, those individuals just above the OHP thresholds with minimal or no health insurance, may find the cost of treatment to be prohibitive. Given the issues of housing and food insecurity in Oregon, this could be a particular barrier to services.

A victim impact panel (VIP) is a meeting where a person convicted of a DUII is ordered to listen to DUII victims (usually three to four) speak about how an impaired driving event has affected their lives, or the lives of their loved ones. The panelist victims discuss a DUII incident with the hopes of educating the offender and deterring future impaired driving. Some DUII offenders are required to attend these panels as part of their criminal sentencing. VIPs are used in all states across the U.S., and they are often put together and conducted by Mothers Against Drunk Driving (MADD).

The main goals of a victim impact panel include to:

1. give the victims a voice to share their feelings and experiences,
2. make DUII offenders aware of how serious their crime was, and
3. raise awareness for impaired driving, victims of impaired driving, and the prevention of driving under the influence of alcohol and/or other drugs.

Per ORS 813.235, Oregon counties may require VIP attendance a condition of diversion.

Oregon has a number of organizations that offer VIPs throughout the State. Oregon's VIPs provide essentially the same structure though they may occasionally be presented via virtual format. While this format was a necessity during COVID, some providers have been slow to return to a live "ground" format. Support for these programs also vary as courts may only refer to a particular program. Participant fees help maintain the program and cover costs.

Research is inconsistent regarding the positive long-term impact of VIPs. Additionally, there are no nationally recognized best practices (pre- and post-tests, longitudinal recidivism studies, appropriate audience size, etc.) to assist users in developing a panel. However, in order to establish program consistency throughout the State, there would be value in setting program parameters for panels including the use of a standardized pre- and post-test. This would allow the ability to measure the effectiveness of VIPs and their impact in changing short- and long-term DUII behaviors.

Oregon has over 50 treatment courts within the State. Of these, there are four DUII Courts, three of which function on the municipal court level. These courts function within the parameters of the All Rise 10 key components of DUII Courts. The time from DUII arrest to court placement ranges from one to two months.

The State has seen increased competition for statewide treatment court grants. If grant funding is not received, these courts may be forced to reduce the number of program participants they can

place in the program. Given the success of DUII Courts in lowering recidivism for high risk/high needs impaired drivers, more of these specialty courts are needed.

Oregon once had a statewide association of treatment court professionals, but it no longer exists. Reviving this association could assist with “growing” DUII courts while increasing networking opportunities that strengthen all treatment courts.

Typically, individuals convicted of misdemeanor DUII are placed on unsupervised probation. There is no assignment to a probation officer and there is no client oversight. If a probationer commits a new DUII, there are often no new sanctions and, in fact, the individual may receive another term of unsupervised probation. It is only when an individual is convicted of a Felony DUII (typically as a result of a third DUII conviction within 10 years) that they receive supervision. In 2023, 200 people in Oregon lost their lives because of an impaired driver. This represents 33 percent of all traffic fatalities in the State, four percent higher than the national average. Considering the danger that the repeat DUII offenders place on the community, consideration should be given to provide formal probation supervision to the DUII population. Research shows that the most effective community intervention involves treatment, drug/alcohol testing along with the accountability of formal supervision.

Recommendations

- **Provide supervised probation services to DUII offenders screened and assessed to be at high risk to recidivate.**
- Establish statutes to accelerate the time from conviction to treatment.
- Promote the use of licensed treatment providers in underserved areas.
- Expand the use of telehealth services to close the gap in accessing services.
- Reestablish an association of treatment court professionals in Oregon.

VI. Program Evaluation and Data

A. Evaluation

Advisory

Each State should have access to and analyze reliable data sources for problem identification and program planning as well as to routinely evaluate impaired driving programs and activities in order to determine effectiveness. Development of a Strategic Highway Safety Plan and a Highway Safety Plan, are starting points for problem identification and evaluation efforts. Problem identification requires quantifying the problem, determining the causes, and identifying available solutions. Strategies should be evaluated for their cost effectiveness and potential for reducing crash risk. Evaluations should include measurement of activities and outputs (process evaluation) as well as the impact of these activities (outcome evaluation). Evaluations are central to the State's traffic safety endeavors and provide a guide to future projects and evaluations. Evaluations should:

- Be planned before programs are initiated to ensure that appropriate data are available and adequate resources are allocated to the programs;*
- Identify the appropriate indicators to answer the question: What is to be accomplished by this project or program?*
- Be used to determine whether goals and objectives have been met and to guide future programs and activities;*
- Be organized and completed at the State and local level; and*
- Be reported regularly to project and program managers and policy makers.*

The process for identifying problems to be addressed should be carefully outlined. A means for determining program/project priority should be agreed upon, and a list of proven methodologies and countermeasures should be compiled. Careful analysis of baseline data is necessary and should include historical information from the crash system. Other data that are useful for evaluation include data from other records systems as well as primary data sources such as surveys. Record systems data include state and driver demographics, driver histories, vehicle miles traveled, urban versus rural settings, weather, and seat belt use. Survey data can include attitudes knowledge and exposure to risk factors.

The Traffic Records Coordinating Committee can serve as a valuable resource to evaluators by providing information about and access to data that are available from various sources.

Status

The Oregon Department of Transportation (ODOT) Transportation Safety Office (TSO) provides statewide leadership for efforts to reduce motor vehicle crashes, fatalities, and serious injuries. Oregon's traffic safety program is guided by a Safe System approach and Vision Zero principles, emphasizing data-driven decision-making, strategic investment of federal traffic safety funds, and collaboration among State, local, tribal, and community partners.

Oregon's Strategic Highway Safety Plan (SHSP), known as the Oregon Transportation Safety Action Plan (TSAP), serves as the State's long-term, comprehensive framework for improving roadway safety. The TSAP aligns with federal performance measures, including total fatalities, fatality rate, serious injuries, serious injury rate, and non-motorized road user fatalities and serious injuries. The plan identifies priority emphasis areas, including impaired driving, and establishes performance-driven strategies to address the State's most significant traffic safety challenges.

The TSO and its safety partners use the TSAP to guide the development of Oregon's Triennial Highway Safety Plan (3HSP). The 3HSP identifies funding priorities and supports statewide and local countermeasures addressing impaired driving, occupant protection, speeding, and other high-risk behaviors. The 3HSP is informed by statewide and local crash data, citation data, and trend analyses. Law enforcement agencies receiving federal traffic safety funds are required to report enforcement activity, including driving under the influence of intoxicants (DUII) arrests and patrol hours, which are used for both process and outcome evaluation.

Several local jurisdictions and regional partners across Oregon engage in data-driven impaired driving planning efforts that support statewide goals. These efforts include local problem identification, targeted enforcement strategies, and public education initiatives designed to reduce alcohol- and drug-impaired driving within specific communities.

Crash data is a critical component of Oregon's traffic safety planning and evaluation process. Law enforcement agencies submit crash reports to the ODOT Crash Analysis and Reporting Unit primarily through electronic reporting systems. While electronic submission has improved timeliness and data quality, some crash reports require additional review or correction prior to final entry, which can delay analysis. The ODOT Crash Analysis and Reporting Unit maintains the statewide crash database and uses the data to monitor trends, identify high-risk locations and behaviors, and support performance reporting.

The TSO publishes statewide crash summaries and provides crash data access to safety partners to support planning and evaluation. A dashboard on the ODOT website provides highway safety partners and the public a means to query and map crash report data. Law enforcement agencies generally have access to their own crash and citation data and use this information to guide enforcement deployment and participation in traffic safety initiatives. Continued expansion of consistent, integrated access to statewide crash and citation data would further strengthen local and regional impaired driving planning and evaluation.

Oregon's crash data system is aligned with the Model Minimum Uniform Crash Criteria and uses standardized injury severity coding. The TSO supplements crash data with additional sources, including roadway inventory data, hospital and trauma data, and behavioral survey data such as the Behavioral Risk Factor Surveillance System, the Youth Risk Behavior Survey, and public attitude and awareness surveys. These sources support a more comprehensive understanding of impaired driving risk factors and outcomes.

The TSO continues to work with law enforcement, courts, and public safety partners to improve data integration and interoperability across traffic records systems. While progress has been made, challenges remain related to data completeness, timeliness, and access across jurisdictions. Continued clarification of roles, responsibilities, and data-sharing practices would enhance statewide consistency and support more effective data-driven decision-making.

The TSO administers federal highway safety grant funding to support enforcement, education, and prevention strategies addressing impaired driving and other priority safety issues. Grant-funded activities emphasize evidence-based countermeasures, accountability, and equitable

service delivery. Oregon also supports community-focused initiatives designed to reach populations disproportionately affected by traffic crashes, including culturally responsive education and enforcement partnerships.

Recommendations

- None

B. Data and Records

Advisory

The impaired driving program should be supported by the State's traffic records system and use data from other sources, such as the U.S. Census, the Fatality Analysis Reporting System (FARS), and the Crash Outcome Data Evaluation System (CODES). The traffic records system should be guided by a statewide traffic records coordinating committee that represents the interests of all public and private sector stakeholders. The state traffic records system should:

- *Permit the State to quantify:*
 - *the extent of the problem, e.g., alcohol-related crashes and fatalities;*
 - *the impact on various populations;*
 - *the level of effort dedicated to address the problem, e.g., level of enforcement activities, training, paid and earned media; and*
 - *the impact of the effort, e.g., crash reduction, public attitudes, awareness, and behavior change.*
- *Contain electronic records of crashes, arrests, dispositions, driver licensing actions, and other sanctions of DWI offenders;*
- *Permit offenders to be tracked from arrest through disposition and compliance with sanctions; and*
- *Be accurate, timely, linked, and readily accessible to persons authorized to receive the information, such as law enforcement, courts, licensing officials, and treatment providers.*

Status

Oregon maintains a broad network of traffic records systems that support highway safety program planning, implementation, and evaluation. Oversight and coordination of these systems is provided through the Oregon Traffic Records Coordinating Committee (TRCC), a multidisciplinary body composed of representatives from the Oregon Department of Transportation (ODOT), Driver and Motor Vehicle Services (DMV), law enforcement, public health, the judiciary, emergency medical services (EMS), and other stakeholders. The TRCC is responsible for identifying data system needs; prioritizing improvements; and supporting the quality, accessibility, and integration of traffic safety data statewide.

To address longstanding challenges related to data consistency, timeliness, and system integration, Oregon successfully applied for and received National Highway Traffic Safety Administration (NHTSA) State Electronic Data Collection (SEDC) Program grant funding. This multi-year effort is intended to modernize crash and citation data collection processes, expand electronic reporting, and promote greater uniformity across jurisdictions. Implementation of the SEDC Program is expected to reduce reliance on paper-based reporting, standardize data elements and submission practices, and improve the overall quality and timeliness of traffic safety data used for impaired driving analysis and decision-making.

While Oregon has access to multiple traffic records systems, traffic safety planning, particularly for impaired driving, continues to rely heavily on crash and fatality data. Expanded and more systematic use of complementary datasets, such as roadway inventory, EMS data, hospital and trauma data, and adjudication records, would strengthen the State's ability to identify emerging impaired driving risks and evaluate the effectiveness of countermeasures. The SEDC Program

provides a foundation for improved linkage across these datasets by promoting consistent identifiers and more timely electronic data availability.

Crash and citation data in Oregon are collected by law enforcement agencies using a combination of electronic and paper-based reporting systems. Many agencies submit crash reports electronically to ODOT; however, variations in software platforms and reporting practices can result in delays, inconsistencies, or incomplete data elements. In addition to law enforcement crash reports, ODOT also receives driver-submitted crash reports, which may duplicate incidents already reported by law enforcement. The availability of multiple report sources requires additional review and reconciliation to identify and deduplicate records before data can be finalized. As SEDC-supported system enhancements are implemented, Oregon expects reductions in duplicate reporting and improvements in automated validation and reconciliation processes, supporting timelier and more reliable statewide impaired-driving analyses.

ODOT serves as the central repository for statewide crash data and provides crash summaries, analytical tools, and data access to safety partners. The ODOT website maintains dashboards that allow users to query crashes by a variety of factors, including alcohol- and drug-involved crashes. Improvements funded through the SEDC Program can be used to enhance dashboard functionality and increase confidence in near-real-time analytical outputs.

Fatal crash data in Oregon are reported to the Fatality Analysis Reporting System (FARS). Alcohol and drug testing rates for drivers involved in fatal crashes are relatively high, particularly for fatally injured drivers, reflecting effective coordination among law enforcement, medical examiners, and toxicology laboratories. These data provide a critical foundation for understanding impaired driving trends at the most severe level of injury and will benefit from improved upstream data quality and consistency supported by SEDC investments.

The Oregon DMV maintains driver licensing and conviction records, including impaired driving offenses and administrative license actions. Driver history records are retained long term and support identification of repeat and habitual offenders by law enforcement and the courts. While the system supports trend analysis, careful differentiation between active and historical records remains necessary to ensure accurate reporting. Enhanced data integration efforts supported by SEDC may improve alignment between licensing, crash, and citation records.

Citation data are available to individual law enforcement agencies and courts; however, access to citation histories across jurisdictions remains limited. This fragmentation can hinder statewide identification of repeat impaired driving behavior and coordinated enforcement or prosecution strategies. Expanded electronic citation reporting and improved data sharing, supported by SEDC funding, are expected to reduce these limitations over time.

In addition to crash and citation data, Oregon has access to several complementary data systems that could further enhance impaired-driving program planning and evaluation. The State's EMS data system is fully electronic and captures information on injury severity, response times, and patient outcomes. Oregon also maintains hospital discharge data, trauma registry records, and emergency department data, which provide insight into the medical and economic consequences

of impaired driving crashes. More consistent integration of these datasets with crash and citation data, facilitated by improved electronic data standards, would allow for a more comprehensive assessment of impaired driving impacts.

Oregon collects data related to ignition interlock device requirements through DMV administrative records; however, detailed information on device violations or failed tests is limited. While installation and removal data support compliance monitoring, expanded linkage across arrest, adjudication, treatment, and monitoring systems would improve the State's ability to evaluate interlock effectiveness and recidivism outcomes. The SEDC Program creates opportunities to strengthen these linkages by improving data compatibility and availability.

Oregon is well-positioned to build on its existing traffic records infrastructure. Through continued TRCC coordination and strategic use of NHTSA SEDC grant funding, the State is expected to achieve measurable improvements in data completeness, uniformity, and analytical capability over the next several years, supporting more effective impaired driving countermeasures and advancing Oregon's traffic safety and Vision Zero goals.

Recommendations

- **Develop statewide integration of impaired driving data across all traffic records components by expanding consistent, real-time access to crash, citation, and enforcement activity data across State and local partners.**
- **Establish a statewide citation database to enable consistent, cross-jurisdictional tracking of impaired driving violations; improve identification of repeat offenders; and support more targeted enforcement and performance-based evaluation through integration with crash, court, and DMV data systems.**

C. Driver Records Systems

Advisory

Each State's driver licensing agency should maintain a system of records that enables the State to: (1) identify impaired drivers; (2) maintain a complete driving history of impaired drivers; (3) receive timely and accurate arrest and conviction data from law enforcement agencies and the courts, including data on operators as prescribed by the commercial driver licensing (CDL) regulations; and (4) provide timely and accurate driver history records to law enforcement and the courts. The driver license system should:

- *Include communication protocols that permit real-time linkage and exchange of data between law enforcement, the courts, the State driver licensing and vehicle registration authorities, liquor law enforcement, and other parties with a need for this information;*
- *Provide enforcement officers with immediate on-the-road access to an individual's licensing status and driving record;*
- *Provide immediate and up-to-date driving records for use by the courts when adjudicating and sentencing drivers convicted of impaired driving;*
- *Provide for the timely entry of any administrative or judicially imposed license action and the electronic retrieval of conviction records from the courts; and*
- *Provide for the effective exchange of data with State, local, tribal, and military agencies, and with other governmental or sovereign entities.*

Status

The Oregon Department of Transportation's Driver and Motor Vehicle Services Division (DMV) serves as the central authority responsible for maintaining all driver license and driver history records for residents of the State. The DMV plays a critical role in highway safety, including tracking impaired driving offenses, enforcing license suspensions and revocations, and supporting data-driven decision-making across the criminal justice, transportation, and public health systems.

Convictions for impaired driving offenses, including Driving Under the Influence of Intoxicants (DUI) and administrative license actions, are transmitted from Oregon's court system to the DMV and promptly recorded on driver history records. These records are retained long term, allowing comprehensive tracking of high-risk and repeat offenders. Permanent record retention supports long-term enforcement strategies and provides valuable insights for identifying habitual violators.

The DMV maintains its driver data systems using modernized platforms that support flexible data access and reporting capabilities. These systems enable electronic data exchange interfaces with compatible law enforcement, courts, and public health systems. Real-time verification of license status enhances roadside enforcement, supports courtroom adjudication, and strengthens the overall integrity of Oregon's traffic safety framework.

Oregon's driver data systems comply with national standards for identity verification and fraud prevention. The DMV participates in federally managed systems including the Problem Driver Pointer System, the Commercial Driver's License Information System, and the Social Security Online Verification database. These connections help prevent high-risk drivers from avoiding penalties by moving across state lines and support multi-jurisdictional enforcement efforts.

While the DMV's systems support efficient data extraction and reporting, the use of driver history data for research and impaired driving program evaluation remains limited. Expanding the use of longitudinal driver records, including arrests, adjudications, license sanctions, and ignition interlock participation, would enable Oregon to better understand impaired driving behavior patterns, evaluate countermeasure effectiveness, and identify areas for intervention.

Increased access to driver record data for researchers, public health professionals, transportation planners, and law enforcement could strengthen Oregon's ability to assess impaired driving trends, target prevention strategies, and support Vision Zero and other statewide traffic safety initiatives. Collaboration between DMV, law enforcement, courts, and public health agencies is essential to maximize the utility of driver data for improving roadway safety outcomes.

Recommendations

- None