

From: Cimaglio, Barbara [Barbara.Cimaglio@vermont.gov]
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To: London, Sarah
CC: Englander, David; Cimaglio, Barbara
Subject: Testimony on Tobacco & Alcohol Re: License Suspension
Attachments: H.571.Draft Bullets Tobacco.1-25-16.pm.docx; H.571 TestimonyAOD 012516.docx

Sarah,
Attached are the talking points my staff prepared for our testimony tomorrow. Please let me know if you want to discuss or if you have any concerns.

Thanks.

Barbara

Barbara Cimaglio
Deputy Commissioner
Alcohol & Drug Abuse Programs
Vermont Department of Health
108 Cherry Street
Burlington, VT. 05402-0070

PH: 802-951-1258

Please note: My e-mail address will change as of July 27, 2015; please make a note of the new address – Barbara.cimaglio@vermont.gov

to license suspensions for youth who fail to undergo alcohol or drug screening, or fail to complete treatment, where the underlying offense is underage alcohol or marijuana possession.

Fines, community service, and/or suspension of driver's license for youth use of tobacco varies by state; according to a 2013 review there are 18 states with laws allowing for license suspension (Tobacco Truth, 2013).

Tobacco control and prevention research does not suggest that harsh youth penalties have an impact on initiation of tobacco or on youth perception of risk. The CDC's Director of Science in the Office of Smoking and Health says there is no research on individual punishment and tobacco control. Research suggests that penalties like suspension of a driver's license may have an adverse effect on youth use because it can deter or prevent youth from seeking support for cessation (Hrywna, Wakefield et al, Campaign for Tobacco-Free Kids).

The alcohol industry started this trend by lobbying for underage drinking age drinking laws in all 50 states with punitive penalties. In the early 1990's, the tobacco industry replicated this tactic after Synar was enacted in 1992. The tobacco industry was successful in lobbying for similar underage tobacco use laws which instituted youth penalties. This tactic has been recognized as a way to divert attention from the industry's influence and their practices including advertising (Campaign for Tobacco-Free Kids, November 2014).

Research indicates that a strong multi-faceted approach including strong community action supported by impactful media, smoke free laws, strong penalties for selling to youth, high product prices through taxation and reduction of price promotion, and an aggressive youth compliance program in addition to cessation resources are interventions that are evidence-based for reducing youth initiation and prevalence (Lantz et al, Tobacco Control 2000). Youth penalties can be a part of the mix for youth prevention; however, there are stronger evidence-based approaches that reduce youth initiation and use.

For tobacco control and prevention reducing youth penalties and making it less likely for youth to lose their driver's license has important prevention benefits:

- Youth have a greater chance to get to work and to maintain their employment which often affords stronger social norms and protection from secondhand smoke
- Youth have a greater chance at maintaining their school attendance which by state statute requires tobacco-free grounds 24/7 and at all school-sponsored events.
- Reducing likelihood of attending school and being employed can increase the likelihood of a youth remaining lower income and lower educated which are both risk factors for smoking.
- Youth who work and are enrolled in school are more likely to feel as if they are an asset in their community; higher youth self-assessment are identified as protective factors in terms of smoking and other risk behaviors.

Therefore, the Vermont Department of Health's tobacco control program is supportive of not having tobacco-related driver's license suspension penalties.

DRAFT

Testimony Before House Judiciary Committee on H.571

Topic: License suspensions for youth who fail to undergo alcohol or drug screening, or fail to complete treatment, where the underlying offense is underage alcohol or marijuana possession.

Findings of 2015 Vermont Youth Risk Behavior Survey

-In 2013, alcohol use was associated with nearly four in ten motor vehicle-related fatalities nationwide and in Vermont. Additionally, research examining drugs other than alcohol indicates that marijuana is the most prevalent drug detected in impaired drivers, fatally injured drivers, and motor vehicle crash victims nationwide.

- Percentage of youth who consumed alcohol in the last 30 days declined significantly from 2013 (33%) to 2015 (30%)
- Percentage of youth who reported binge drinking (5 or more drinks in a row) in the last 30 days declined significantly from 2013 (19%) to 2015 (16%)
- Roughly half of current drinkers reported that they had at least 5 drinks in one sitting
- Overall 7% of students who drove reported driving after drinking in the past 30 days – not a significant change from 2013
- Percentage of youth who used marijuana within the last 30 days was 24% in 2013 and 22% in 2015. This is not a significant change
- Of the students who reported using marijuana, almost half (45%) used it 10 or more times in the last month
- Perceived perception of harm from smoking marijuana decreased significantly from 2013 (31%) to 2015 (27%)
- Overall 15% of students who drove a car or other motor vehicle when they had been smoking. This does not represent a significant change from 2013.

Prevention, intervention and license suspension

- People under 21 who possess or consume alcohol or marijuana are referred to the Court Diversion Youth Substance Abuse Safety Program for screening, brief intervention and, if indicated by the findings of the screener, referral to treatment provider for an alcohol and drug assessment. If the person fails to complete the Youth Substance Abuse Safety Program (YSASP) successfully, then the penalty for a first offense is fine of \$300.00 and license suspension for a period of 90 days.
- Enforcement of the minimum legal drinking age and the prohibition of sales to minors have been identified by Community Preventative Task Force as a best practice in the prevention of alcohol related injuries
- Early substance use and substance use disorders are best addressed as **health issues**. Thus every attempt should be made to provide access to screening and if necessary, assessment and treatment services rather than punitive measures. Penalties provide an incentive to participate

in the YSASP. In addition penalties provide a message to the community that early substance use poses a health and safety risk.

- Court Diversion has recently enhanced the YSASP to provide screening and brief intervention service. The YSASP refers **only those youth who screen as in need of further assessment to treatment providers for assessment.** . At a prior time, all or most YSASP participants were referred for assessment. It is believed that this change will reduce the cost of Diversion completion for many YSASP participants.
- We recommend that license suspension continue to be utilized as an incentive for youth and families to access YSASP services.
- Given lack of research on length of suspensions, it is difficult to recommend an exact length of suspensions. We support reducing the length of suspensions such that the penalty:
 - provides incentive for the youth to participate in screening provided by YSASP
 - promotes the community message that early substance use is risky
- It is recognized that the best means to prevent youth substance use and related risks to traffic safety is to employ a comprehensive prevention approach to alcohol, marijuana and tobacco including:
 - Community education and information
 - Family and Youth education and support services
 - Increasing access to screening, brief intervention and treatment services
 - Decreasing youth access to these substances through strategies such as well enforced compliance checks, reducing point of sale and other promotions and enhanced enforcement of the minimum legal drinking age

Sources:

2015 Vermont Youth Risk Behavior Survey High School Report, Departments of Health and Education

The Community Guide, Community Preventative Services Task Force, Centers for Disease control and prevention

<http://www.thecommunityguide.org/alcohol/index.html>