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for safe driving

Female drunk drivers: Characteristics and Experiences in the DWI System

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About TIRF

- > **National, independent road safety research institute**
- > **Registered charity**
- > **Governance**
- > **Staff**
- > **Funding**
- > **Services**
- > **Focus on road users**



Overview

- > Project partners
- > Background, purpose and methods
- > Key findings
 - » demographics/profiles
 - » offender experiences
- > Lessons learned
- > Recommendations



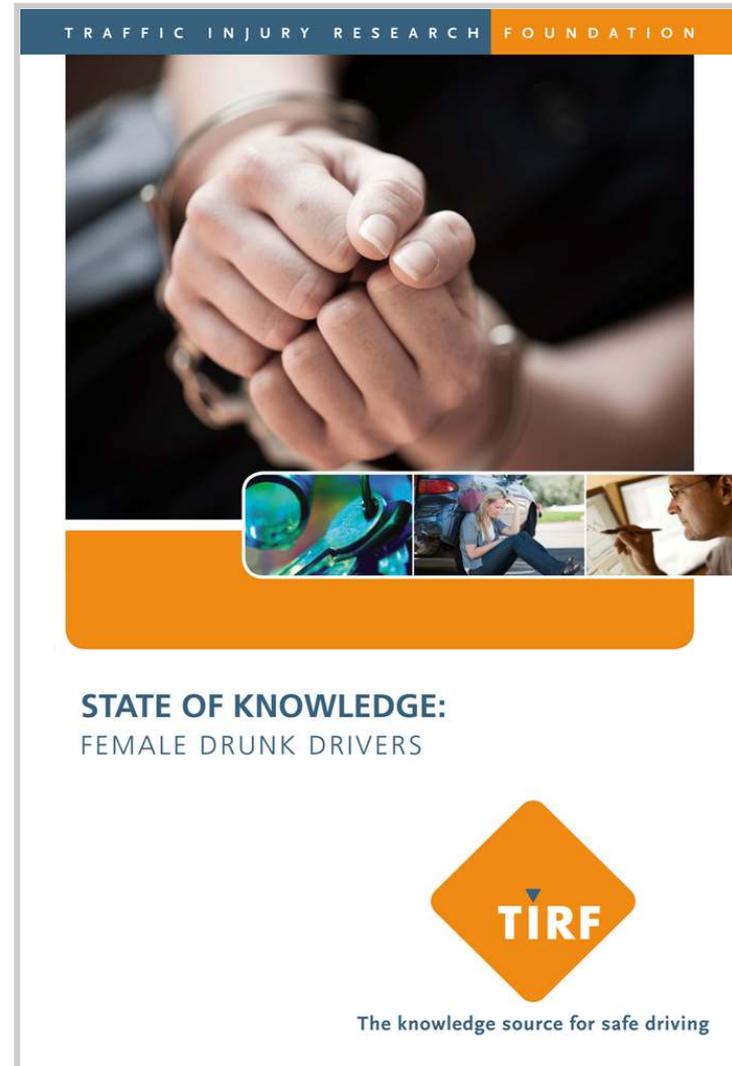


Project partners

- > **Funded by The Century Council**
- > **National Center for DWI Courts**
 - » Judge Peggy Davis; Judge Susan Jonas; Judge Richard Vlavianos
- > **American Probation and Parole Association (APPA)**
 - » Carl Wicklund; Mary Ann Mowatt
 - » Francine Perretta; Mary Ellen Still; Bob Iusi

Background

- > Female involvement in drunk driving is a source of growing concern.
- > Several recent high-profile cases.
- > Review of the literature revealed important gaps.
- > Research is need to fill gaps and inform interventions.





Need for further research

- > The majority of available research examines male drunk driving offenders.
- > To date, much of the available research was conducted more than 20 years ago.
- > It does not provide a complete picture of the female drunk driver nor does it identify effective interventions specific to this population.





Female drunk drivers: history and experiences in the system





Project focus and methods

> Qualitative study:

- » Fill gaps in the literature;
- » Provide a more current, complete understanding of female drunk drivers;
- » Inform the development of effective programs and interventions.



> Hypothesis-generating exercise.



Project focus and methods

> Case studies conducted in four sites:

1. California (San Joaquin County)

2. Missouri (Greene County)

3. Michigan (Ottawa County)

4. New York

» Dutchess

» Warren

» Westchester
Counties





Project focus and methods

- > **Multi-faceted research design:**
 - » Interview focus groups with 154 first and repeat offenders.
 - » Key informant interviews with 36 experienced practitioners.
 - » Survey of 28 female offenders in California.
- > **Data were used to identify lessons learned and to formulate recommendations to improve practice.**



Key findings: demographics

- > Ages ranged from late teens to mid-60s.
- > Family backgrounds varied considerably.
- > Education levels diverse.
- > Employment:
 - » nurses, paralegals, teachers, corporate, self-employed;
 - » bartenders common.





Key findings: demographics

> Marital status

- » more than half were single or divorced

> Family status

- » majority have children
- » approximately 1/3 have support network

> Mental health issues

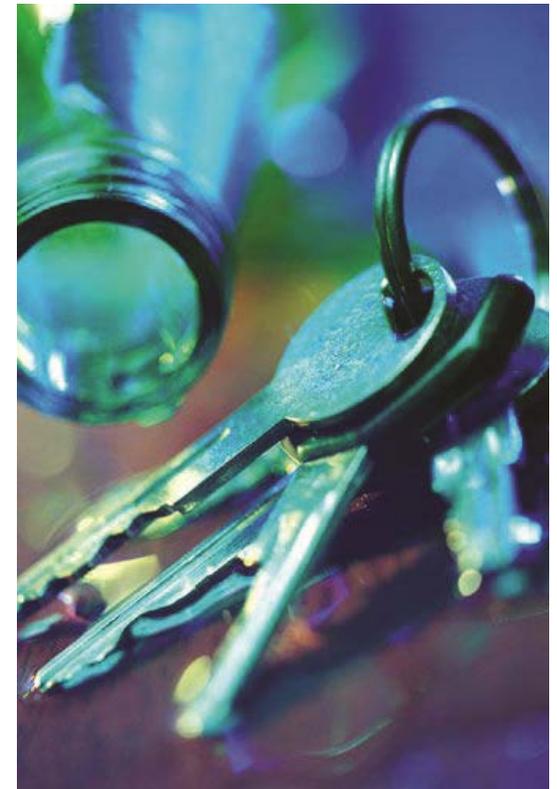
- » diagnosed or undiagnosed
- » depression, anxiety, PTSD, bipolar disorder
- » history of trauma and abuse



Key findings: demographics

> Alcohol

- » unaware of “normal” consumption
- » early onset vs late onset drinking
- » drinking to cope or self-medicate
- » binge vs daily drinkers
- » dependence and abuse common





Key findings: demographics

> Drug use

- » $\frac{3}{4}$ have prescriptions
- » some illicit (marijuana, methamphetamines)



> Criminal history

- » approximately 20% had other arrests
- » drug manufacturing/distribution, fraud, and theft were most common offenses



Key findings: offenses

> Offense characteristics:

- » BAC levels
- » crash involvement
- » presence of life stressor
- » reason for trip
- » acceptance of responsibility for offense
- » feelings of shame and guilt





Key findings: profiles

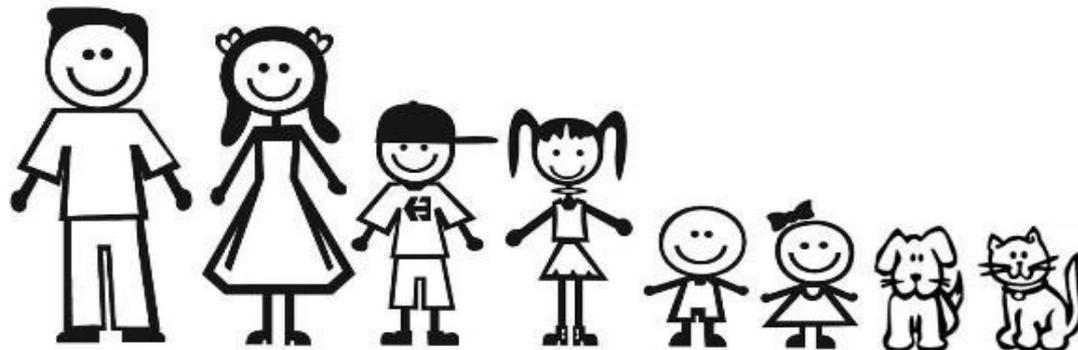
- > **Younger women socializing:**
 - » Drinking to feel comfortable or “fit in.”
 - » Consume alcohol and/or binge drink at house parties, bars.
 - » Drive for independence or because they believe that there is no other option.





Key findings: profiles

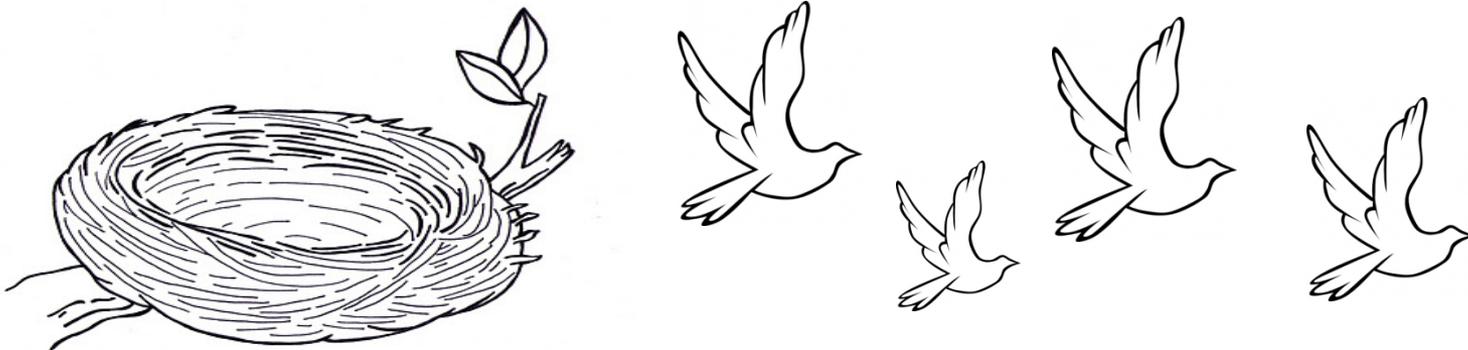
- > **Recently married with young children:**
 - » Age mid-20s to 30s.
 - » Drinking becomes a problem after marriage and/or birth of children.
 - » Means of coping with feelings of loneliness.
 - » Children sometimes in vehicle at time of arrest.





Key findings: profiles

- > **Divorced, older women/empty nesters:**
 - » Begin drinking heavily age 40 or older.
 - » Onset of drinking follows catalyst such as death of a parent, end of marriage, or children leaving home.
 - » Lonely, isolated, lack of social network.





Key findings



- > **Experiences in justice system:**
 - » Focus on offense and not circumstances.
 - » Sentence/conditions fail to account for life circumstances.
 - » Frustration with long delays in processing.
 - » Fear of jail.
 - » Lots of questions about process/requirements.
 - » Communication and support can make the difference between success and failure.



Key findings



- > **Experiences in justice system:**
 - » Costs are a major burden.
 - » Difficult to comply with conditions due to scheduling and lack of service options.
 - » Securing alternate transportation is challenging.
 - » Lack of support networks compounds these issues.
 - » Emotional effects are tremendous.
 - » Services - mental health, technologies, jail.
 - » Presence of male vs. female staff.

Key findings



- > **Experiences in treatment system:**
 - » Level and quality of services is insufficient, particularly in rural jurisdictions.
 - » Alcohol education classes not taken seriously.
 - » Generic “substance use” treatment groups not perceived as beneficial by many.
 - » Strong preference for individual counseling at outset, followed by female-only group.
 - » Insurance is a deciding factor.

Lessons learned

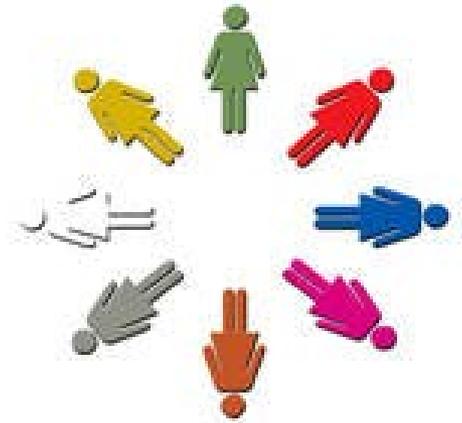
- > Women are more likely to try to manipulate the system at the outset.
- > Often present with more complex range of issues.
- > Greater pressures (e.g. childcare, financial).
- > More emotional and want to talk more.
- > It can take a long time for women to open up and recognize chaotic thinking.





Lessons learned

- > More likely to need assistance with relationship dynamics.
- > No one-size-fits-all model; individualized supervision and treatment plans.
- > Anniversaries can trigger relapses.
- > Often more pro-social and compliant.
- > More likely to complete supervision/ treatment and more quickly.
- > Support key factor in maintaining sobriety.





Lessons learned

- > Drug screens useful at time of arrest.
- > Accountability, intensive monitoring, and support are particularly important.
- > Provision of information about process can ease anxiety.
- > Avoid judgments; focus on the individual.
- > Use of comprehensive approach to address a broad range of issues.
- > Be sensitive during home visits.



Lessons learned

- > Build self-esteem and motivation through positive feedback and incentives.
- > Listen, connect, establish rapport; meetings take longer.
- > Look, listen for flags.
- > Help women recognize lack of boundaries and connection to addiction.
- > Engage family, friends to support sobriety.



Recommendations: prevention

- > Women need to learn what constitutes 'normal drinking' at an early age.
- > Education is also needed about the effects of alcohol on driving performance.
- > Increased awareness and efforts to address:
 - » difficult living situations;
 - » emotional problems; and,
 - » mental health issues.





Recommendations: justice



- > Provide clear information about conditions and requirements at outset.
- > Provide guidance and assistance to help offenders manage life issues.
- > Recognize individual value and progress.
- > Be honest and follow through in interactions.
- > Work with offenders to achieve a good balance of how time is scheduled/filled.
- > Consider flexibility in scheduling appointments.



Recommendations: justice

- > Identify the most appropriate, best-suited interventions.
- > Minimize stress and discomfort when transferring cases.
- > Minimize instances where offenders continually re-live their story, offending.
- > Find constructive strategies to deal with emotions/emotional situations.
- > Develop a rapport and help build self-esteem but maintain boundaries.





Recommendations: justice

- > Increase the availability of education for practitioners about:
 - » substance abuse and dependence
 - » female offender issues
 - » alcohol monitoring technologies
 - » social work strategies
- > Increase availability/integration of social services and educational/vocational services.





Recommendations: treatment

- > Increase assessments at first offense; make appropriate referrals.
- > Increase the availability and quality of treatment services.
- > Provide more affordable services; offer women-only treatment programs.
- > Help women learn to cope with stress and manage their life in conjunction with sobriety.
- > Do not require treatment for those without a problem.





Recommendations: treatment

- > Increase funding and resources for uninsured offenders.
- > Make research findings available to practitioners.
- > Strengthen training for staff and certification protocols for agencies.
- > Use alcohol-intake instruments that identify a history of trauma.
- > Increase screening for co-occurring disorders.





Recommendations: treatment

- > Provide more outpatient services outside of regular business hours.
- > Increase skills among alcohol education counselors.
- > Increase the availability of aftercare to assist in the maintenance of long-term sobriety.





Future research needs

- > Determine whether screening and assessment of first offenders followed by appropriate referrals produces better outcomes.
- > Identify optimal supervision strategies for female offenders.
- > Gauge effectiveness of female-centered supervision programs and DWI courts with female offenders.



Conclusions

- > There are distinct differences in characteristics and experiences of female and male drunk drivers.
- > Some agencies are tailoring strategies to begin to manage this issue.
- > Study findings can guide the development of new research initiatives.
- > These findings can also provide insight into ways to strengthen practice.



TRAFFIC INJURY RESEARCH FOUNDATION



**FEMALE DRUNK DRIVERS:
A QUALITATIVE STUDY**



The knowledge source for safe driving



WHY WOMEN DRIVE DRUNK
The Facts

Men do the majority of impaired driving

But drunk driving arrests are on the rise among women of all ages

Many have a blood alcohol concentration (BAC) equal to, or higher than, men

IMPAIRED DRIVING ARRESTS ARE OFTEN PRECIPITATED BY A MAJOR LIFE STRESSOR

- A domestic argument
- An end of a relationship, or abandonment
- An illness or death in the family
- Job loss or financial problems

MANY STRUGGLE WITH ALCOHOL ABUSE OR DEPENDENCE

- They feel depressed, isolated and anxious
- They are dealing with mental health issues and self-medicate with alcohol, or combine alcohol with prescription meds
- Lack a stable support network
- Many are survivors of abuse or have a history of trauma

WOMEN DRINK AND DRIVE FOR MANY DIFFERENT REASONS

- Young women trying to fit in
- Women in relationships with heavy drinkers
- New mothers struggling with depression or anxiety
- Some cope together, by drinking on playdates
- Older empty-nesters or recent divorcees who are lonely

MANY ARE ARRESTED WITHIN A FEW BLOCKS OF THEIR RESIDENCE

Some had their children in the car at the time

IT'S A HIDDEN, BUT INCREASING, PROBLEM

The number of women who admit to drunk driving hasn't changed since the '80s

But the number of arrests among women has increased almost

30% since the late 1990s

WOMEN'S PROBLEMS NEED TARGETED SOLUTIONS

RESEARCH shows that many women, as the sole caregivers and providers for their children, require:

- Affordable treatment and health services
- Flex hours for appointments
- Alternative transportation to sessions
- On-site childcare

TREATMENT programs must address women's issues:

- Women-only groups that provide a safe place to discuss the experiences that contributed to their substance use
- Comprehensive support for contributing factors such as:
 - Domestic violence
 - Mental health
 - Trauma

PREVENTION MUST START EARLY WITH TARGETED, ONGOING ALCOHOL EDUCATION FOR GIRLS AND WOMEN

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Funding provided by: CENTURY COUNCIL






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