DWI Taskforce 140298

JUL 08 2014

OFFICE OF THE SECRETARY WISCONSIN DOT

July 3, 2013

Secretary Mark Gottlieb, P.E. Wisconsin Department of Transportation 4802 Sheboygan Ave. Madison, Wisconsin 53705

Dear Secretary Gottlieb:

Thank you for the time you and your colleagues spent with us on June 16. We appreciate that you are sincerely committed to resolving the logistical problems that have challenged the OWI Task Force members for the past year and make adjustments in the Task Force's operations.

We encourage you reach out to your colleague Secretary Rhodes. Increased collaboration between the Department of Transportation (DOT) and the Department of Health Services (DHS) would create efficiency and synergism in addressing Wisconsin's intoxicated driving problem. Wisconsin cannot educate and arrest its way of out of our alcohol-related problems. Evidence-based prevention strategies need to be employed. We believe that the two agencies would be able to identify areas for collaboration and maximize the impact of federal prevention dollars each department administers.

During our meeting you described a number of advisory groups and panels with some role in advising DOT on alcohol and drug impaired driving. We came away from the meeting wondering whether policy development was outside the scope of the OWI Task Force. Is there an organization chart or listing of all the advisory bodies relating to alcohol /drug impaired driving and their membership? This information would help us understand the OWI Task Force's role in policy development.

During our discussion you raised the possibility that the OWI Task Force could request a Legislative Council review of Wisconsin's alcohol/drug impaired driving laws, including integrating public health principles into Wisconsin's OWI enforcement strategy. While we would support such a study, interim study groups are traditionally limited to even number years with recommendations considered in the following Legislative session, the 2017-2018 Legislative session in this case. Would you support an earlier special study committee by either the Legislative Council or another group?

Finally, we remain quite concerned about the influence of the alcohol industry and specifically the Tavern League in the formation and administration of DOT strategy. While you have stated you are open to including a broader range of individuals and organizations in this group, no specific organizations or individuals were mentioned. Despite your assurances we see larger indications that concern us. In February 2013, NBC 26 in Green Bay reported that the DOT discontinued alcohol age compliance checks by the Brown County OWI Task Force. The story quoted the Brown County Tavern League saying that compliance checks were "detrimental to our industry." It reported that the Wisconsin State Patrol representative said that the compliance checks were terminated as a result of Tavern League complaints. At that time, the Tavern League representative stated that "an awareness campaign" conducted within bars would be a more effective approach to reducing underage drinking. Another example of industry influence is seen in the 2013 Wisconsin Impaired Driving Plan, which used a 2003 Century Council document asserting that "65% of underage youth who drink obtain alcohol from family and friends." The Centers for Disease Control and Prevention 2013 Youth Risk Behavior Survey reports that just 35% of Wisconsin youth "usually obtained the alcohol they drank by someone giving it to them."

In short, noncommercial youth access to alcohol was significantly overstated at a time DOT was suspending age compliance checks on commercial sources of alcohol at the request of the Tavern League. Intentionally or unintentionally, this confluence of events leaves the impression that alcohol industry groups influence Department of Transportation policy and its implementation while authoritative sources of information and policy recommendations are ignored.

Over the next several weeks to months, we will be watching with interest to see how the membership of the OWI Task Force is expanded, how logistical issues are addressed, whether collaboration with the Department of Health Services is expanded, whether industry influence over the Task Force wanes or is balanced with a diversity of views, and whether the Task Force increases its reliance on scientific authorities for information and policy recommendations. These observations will help us decide whether to rejoin the Task Force.

Thank you again for your hospitality and willingness to discuss this challenging issue.

Sincerely,

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Stephen Hargarten, MD, MPH Emergency Physician, Shorewood, WI

Julia Sherman, Coordinator Wisconsin Alcohol Policy Project

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