



# How Nordic Countries Enforce Impaired Driving Legislation

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# How Nordic Countries Enforce Impaired Driving Legislation

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**ABSTRACT:** This article reviews how the Nordic countries of Denmark, Finland, Norway, and Sweden enforce their legislation pertaining to driving under the influence of alcohol and/or other impairing drugs. The evidence necessary for a successful prosecution of traffic offenders has undergone radical changes over the past 50 years. The once widely used clinical tests of impairment are no longer a major element of the prosecution case and a physician is more seldom required to examine apprehended drivers and document any clinical signs and symptoms of alcohol and/or drug influence. These clinical tests have been superseded by results derived from a comprehensive toxicological analysis of psychoactive substances in samples of the driver's blood. The current statutory limits of blood-alcohol concentration (BAC) are among the lowest in the world: Norway and Sweden (0.20 g/kg) and Denmark and Finland (0.50 g/kg). Results from using evidential quality breath-alcohol instruments are accepted as evidence in drunk-driving cases and this has necessitated setting statutory breath-alcohol concentration (BrAC) limits. Laws dealing with driving under the influence of drugs (DUID) other than alcohol have also been updated and made more pragmatic for prosecution of traffic offenders. In Finland and Sweden zero-tolerance laws exist, making it illegal to drive with any quantifiable amount of a scheduled drug in the driver's blood. Prescription drugs are exempt from this zero-tolerance mandate provided the medication was used in accordance with a physician's ordination. Lacking a valid prescription or if there is a supratherapeutic concentration of the drug in blood, this will lead to a prosecution for DUID. In Denmark and Norway threshold concentration limits have been established for many psychoactive drugs, both licit and illicit. After these stricter laws for DUID were introduced, the number of suspects apprehended by the police per year increased by as much as tenfold in some Nordic countries. There is increasing evidence that many traffic delinquents in the Nordic countries suffer from a substance-use disorder, because repeat-offending is a common occurrence. This suggests that some type of treatment and rehabilitation program might be more beneficial compared with conventional penalties for people arrested for DUI and/or DUID.

**KEYWORDS:** Alcohol, blood analysis, drug abuse, DUID, evidential breath-analysis, enforcement strategy, impaired driving legislation, Nordic countries, traffic safety.

## INTRODUCTION

The Nordic countries of Denmark, Norway, Sweden, and the Republic of Finland are located geographically in the northern part of Europe (**Figure 1**). These nations have relatively low population densities and citizens enjoy a high standard of living, good social security, and affordable health care systems. Average life expectancy in these countries ranks among the longest in the world. One often associates the phrase, "You are looked after from the cradle to the grave", with life in these Nordic countries.

Heavy drinking and drunkenness were early recognized as a danger for public health and longevity, and alcohol prohibition was enforced in Finland between 1919 and 1932. The cost and availability of alcoholic beverages are tightly linked to per capita total consumption and alcohol-related harm. For this reason, sale of strong beers, wines, and malt liquors is under government control and only available for purchase at certain outlets — Systembolaget in Sweden, ALKO in Finland, and Vinmonopolet in Norway. The attitude toward alcohol consumption in Denmark, which is located closer to central Europe, has always been more liberal and alcoholic beverages can be purchased at supermarkets and liquor stores throughout the country.

## I. LEGISLATION

### A. Drunk-Driving Legislation

In 1936, Norway became the first country in the world to introduce a punishable limit of blood-alcohol concentration (BAC) for driving. This was set at 0.50 g/kg or roughly 0.05 g/100 mL. Sweden followed this lead and introduced a statutory BAC limit of 0.80 g/kg (0.08 g/100 mL) in 1941 [52]. The statutory BAC limits for driving in these countries are now set at 0.20 g/kg (0.02 g/100 mL), and this applies to all motorists, regardless of their age and/or driving experience. It took a lot longer for Finland and Denmark to establish statutory BAC limits for driving, which are currently set at 0.50 g/kg (0.05 g/100 mL).

### B. Clinical Test for Drunkenness

Prior to the establishment of alcohol concentration per se statutory limits, the main prosecution evidence in drunk-driving cases was the results of clinical examinations of suspects, done by physicians or police surgeons about 1–2 h after arrests were made [56]. The examinations were done using a standardized protocol including a

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## ABOUT THE AUTHOR

A. W. Jones

**Alan Wayne Jones** was born in Wales (UK) but has spent most of his career working in Sweden. He was awarded a B.Sc. degree in 1969 and a Ph.D. degree in 1974, both from the University of Wales (Cardiff, UK). Dr. Jones is now retired from his appointment as senior scientist at Sweden's National Laboratory of Forensic Medicine, Division of Forensic Genetics and Forensic Toxicology, since 2013. He currently serves as a guest professor in forensic toxicology at the Department of Clinical Chemistry and Pharmacology, University of Linköping, Sweden.

Dr. Jones has testified as an expert witness in hundreds of criminal trials involving drug-related crimes, DUI, DUID, and overdose deaths in Sweden and several other countries. He has peer-reviewed hundreds of manuscripts submitted for publication to about 70 international journals and is a member of the editorial boards of a dozen other journals specializing in substance abuse, analytical toxicology, forensic science, and legal medicine. Since his first publication in 1974, Dr. Jones's bibliography currently lists about 470 journal articles, reviews and book chapters.

Dr. Jones's contributions to the science of alcohol and drug abuse have been recognized with a number of awards and prizes including the Widmark Award (1997) from the International Council on Alcohol, Drugs and Traffic Safety, the Rolla Harger Award (2002) from the American Academy of Forensic Sciences, the Robert Borckenstein Award (2004) from the US National Safety Council, the Alan Curry Award (2011) from The International Association of Forensic Toxicologists, and most recently the Kurt Dubowski Award (2017) from the International Association of Chemical Testing.