

THE SYDNEY DRINK - DRIVER REHABILITATION SCHEME:

A FIRST REPORT

Murray F. Farquhar, C.S.M. O.B.E., E.D., Dip. Crim.

RESEARCHER: Elizabeth J. Walker, B.A.

EDITOR: Walter J. Lewer, L.L.M.

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1. INTRODUCTION

This document describes the Sydney Drinking Driver Rehabilitation Scheme and its first year of operation.

2. BACKGROUND TO THE PROBLEM

A study of the literature, which is vast and growing, leaves no room for doubt that the impairment of the faculties of drivers by alcohol ingestion is a major factor in motor vehicle crashes. Local studies produce results differing in no significant way from those made overseas. Concern is emphasized when it is noted that a regrettably large part of the information available is derived from analysis of the blood of cadavers of persons killed while driving motor vehicles.

3. HISTORY

- 3(1) In the early part of 1973 a team of public servants led by Murray F. Farquhar, Chairman of the Bench of Stipendiary Magistrates and with him, Roy Lane an Assistant Commissioner of Police and Lindsay Barnet an Assistant Under Secretary of Justice made a study tour of part of the United States of America and part of the United Kingdom. A major part of the team's concern was to explore methods in use in those places directed at securing improvement in the safe handling of motor vehicles. It will be understood that the investigation concerned itself with methods employed by Legislators, Court, Police and Traffic Authorities. In particular what was being done in the U.S.A., in no small part initiated by the Federal Government, relating to the treatment and education of drivers impaired by alcohol, commanded attention. A report was made to the Government of New South Wales.
- 3(2) Early in 1975 a Committee was formed to study the incidence and effects of drinking/drivers in this State, the counter-measures pursued elsewhere particularly in the U.S.A., the availability of trained staff and resources and the feasibility of introducing a programme for rehabilitation here. The Committee included representations of the magistracy, Health Commission, Police, Probation Service, the Department of Motor Transport and the Bureau of Crime Statistics and Research.

3(3) COMMITTEE PLANNING

As the Committee saw it, it was essential that any scheme of therapeutic response to conduct considered socially undesirable, and this must include drinking driving, be built on a foundation of strict criteria and public acceptance. This led the Committee to take many factors into account:-

- a) Inclusion of the police from the earliest planning stage.
- b) Insuring the co-operation of the Prosecutors especially in designing the speediness of action so vital to the referral programme.
- c) Basing the programme in the courts giving the Magistrates primary responsibility for its operation but avoiding turning them into alcoholism experts or social workers.
- d) Having the treatment personnel exercise a great deal of care, planning a differential response to divide groups within the drinking/driver population.
- e) Designing the referral system very carefully in advance.
- f) Avoiding the premature embodiment of referral inside legislation.
- g) Perfecting an evaluation system.
- h) Establishing a management unit to co-ordinate and monitor but NOT to command.
- i) Avoiding the major error of failing to allow ample time for planning and experimentation.

3(4) For more than a decade A.S.A.P. (Alcohol Safety Action Programmes) have been operating in thirty five states of the United States. On the evidence available it was patent that some had done very well, others poorly. Suffice to say that where there has been failure it can generally be attributed to:-

- a) A.S.A.P. was not a national but a series of local projects. Even within States there were different systems. Results varied greatly.
- b) It was conclusively demonstrated that alcohol safety programmes depended totally on community structures. The co-operation and enthusiasm of Judges was most important.
- c) The time necessary for successful planning and introduction was often seriously under estimated. This in turn led to a loss of enthusiasm when some definitive result was anticipated at an early stage

and obviously could not be forthcoming.

- d) A failure to understand that alcohol safety should be seen as a social and health problem equally as much as a highway safety problem.

- 3(5) Overall there appeared to be a total dependence on the goodwill of the court system. Regrettably there was extreme variation in court attitudes and actions. Every effort has been expended to avoid these pitfalls in the N.S.W. programme.
- 3(6) On the evidence before it the Committee concluded that the high BAC levels found in many drivers involved in accidents indicated that "a small minority of drivers was responsible for a disproportionate number of deaths." Given a limited availability of probation officers and of treatment staff it was decided to focus attention on (a) those persons having a BAC of 0.15 or above, or (b) those having at least one prior conviction for a drinking/driver offence.
- 3(7) The scheme, as it was evolved, had these objectives:-
 - a) To identify the driver with a drinking problem.
 - b) To assess the degree of his drinking problem and the most effective method of treating it.
 - c) To minimise the likelihood of him subsequently driving after drinking excessively.

PROCEDURES ADOPTED

- 3(8) It was decided that a plea of guilty or a finding of guilt should precede any further court action. The present powers as to requiring conditions to be fulfilled demand this. Consideration will later have to be given to the desirability of providing for these procedures in the Statute. As well, a driver unwilling to participate in such a programme ought not to be coerced or induced to join it. His actions must be voluntary. It seemed appropriate that assessment and treatment be separate. There was a body of opinion that they could be met in the one clinic. Experience in the U.S. suggested that the better results flowed from separating the functions. Evaluation was to be independent. All of these principles were built into the scheme. The Criminology Research Council based in Canberra A.C.T., contributed magnificently by making a grant guaranteeing effective research and analysis. Funds from the same source have permitted a second year of evaluation.
- 3(9) The role of the Probation Officer is threefold. Initially he will act in several ways as a "conduit pipe" - liaising with prosecution and with defendants said to fall within the

criteria, and arranging assessment times for participants. Then they will undertake supervision and social analysis, yet again liaise with treatment agencies and, finally, tender a pre-sentence report in Court.

- 3(10) At the assessment clinic a thorough medical examination is undertaken and the participant is directed to one of three treatment "streams". These are based on education, therapy and behaviour modification.
- 3(11) It should be added that all solicitors of the Legal Aid Panel were constantly advised of planning decisions and of procedural changes. Since then, they too have co-operated by advising clients of the scheme's existence and utility.

4. LEGISLATION

- 4(1) As in most countries, New South Wales by Section 5 of the Motor Traffic Act, makes it an offence to drive a motor vehicle upon a public street while under the influence of intoxicating liquor or a drug. By Section 4E of the same Act it is an offence to drive a motor vehicle on a public street if the driver's blood contains the prescribed concentration of alcohol. The prescribed concentration is .08 grammes of alcohol per 100 millilitres of blood. Similarly it is an offence to occupy the driver's seat of a motor vehicle and attempt to put it in motion under any of these conditions.

The punishment provided is a sentence of six months imprisonment with hard labour and a fine of four hundred dollars (\$400.) The Act also provides for a similar punishment for a driver who refuses to be subject to a breath analysis. In addition it is provided that a person convicted of any of these offences shall be disqualified from holding a driver's licence for twelve months. By Section 10 of the Act if the offender has been convicted of any of these offences (and certain others) within the five years preceding the latest offence the period of disqualification attending the latest conviction is three years. The same Section reposes a discretion in the Court to increase or decrease the period of disqualification. In addition to the discretion in relation to the period of licence disqualification two additional important discretions are reposed in the Court by the Crimes Act, 556A and 558. By Section 556A, without proceeding to a conviction, the Court may discharge the offender conditionally upon his entering a recognizance to be of good behaviour, with or without further conditions, and to appear for conviction

and sentence if called upon. When the Court invokes this Section, for the reason that there is no conviction, there is no disqualification from the holding of a licence. If there be a breach of the recognizance the offender may be called up, convicted and punished. Such a course necessarily results in his being disqualified from holding a licence. Section 558 enables the Court to defer passing sentence upon the offender entering a recognizance to be of good behaviour with or without additional conditions, and to come up for sentence if called upon. The invoking of this Section requires that the offender be first convicted. It will be seen that it is possible to fine an offender and in addition, to secure his future good behaviour and his compliance with any conditions to the Court seeming proper and to defer passing on him a sentence of imprisonment. Of course, if the offender be not fined and there is occasion to call him up for a breach of a recognizance where sentence has been deferred, he may then be fined, or imprisoned, or both.

- 4(2) As a supplement to the powers of the Court in relation to procedures on adjournment, Section 96(2A) of the Justices Act, 1902 (as amended) provides for the annexure to a recognizance of bail of special conditions appearing to the Court to be necessary in the interests of justice for the prevention of crime.
- 4(3) It will be understood that the flexibility of sentencing power conferred by Sections 556A and 558 of the Crimes Act and Section 96(2A) of the Justices Act, Courts can secure the attendance of convicted persons at treatment and other centres before and after sentence. At the same time restrictions may be placed upon the use of driving licences and the public is protected in that any breach of a recognizance will ordinarily result in punishment and likely imposition of licence suspension.

5. THE OPERATION OF THE SCHEME

- 5(1) For reasons of scarcity of facilities and personnel originally but two Courts were involved. These were Central Court of Petty Sessions, Liverpool Street, Sydney and the Court of Petty Sessions at Bankstown. Operations commenced at these Courts on 1st. March, 1976. Later, in July the same year, the Courts at North Sydney and Hornsby commenced similar operations. These have been the only Courts involved during the first twelve months of the scheme.

- 5(2) Offenders entering the scheme from Central Court were referred in the first instance to St. Vincent's Alcoholism Clinic, St. Vincent's Hospital, Darlinghurst. There an assessment was made of the offender's drinking habits and his physical condition whereupon he was directed to one of three treatment centres. These are Central Drug and Alcohol Advisory Service, N.S.W. Health Commission, Bellevue Clinic, Bellevue Street, Surry Hills, and the Research Unit of Professor Lovibond, Department of Psychology, University of New South Wales.
- 5(3) It will be understood that the arrangements for each offender were made and supervised by a Probation Officer.
- 5(4) At Bankstown Court referrals in the first instance were made to Bankstown Area Health Clinic, an organ of the Health Commission. This Clinic performed the same function in relation to them as does the Clinic at St. Vincent's Hospital in relation to those referred from Central Court. The difference between the two "diagnostic" clinics is that from Bankstown further referrals are made only to the Research Unit of Professor Lovibond. Other treatments are conducted within the resources of Bankstown Health Clinic itself.
- 5(5) North Sydney and Hornsby Courts both refer offenders initially to a Health Commission Clinic at Hercules Street, Chatswood. Those offenders deemed suitable for treatment by counselling are retained at the Hercules Street Clinic. Health Education Courses are conducted by another Health Commission Clinic at Albert Street, Chatswood while the remainder, as in the cases of St. Vincent's Hospital and Bankstown, are referred to Professor Lovibond's Research Unit.

PROCEDURES IN COURT

- 5(6) Following assurances of police co-operation, given in Committee, it was arranged that in the Police Stations concerned, posters would be displayed drawing the attention of arrested persons to the existence of the drinking-driver rehabilitation scheme. Pamphlets were to be handed out, in the Police Stations, to persons likely to be affected.
- 5(7) The Probation Officers attached to the Courts were to scan each day's lists, and if possible, to interview offenders in order to come to a preliminary decision as to whom of them might be suitable candidates for the scheme.
- 5(8) Time has indicated that both Police and Probation Officers are too involved with more pressing duties to perform these

tasks and it appears that, latterly, at any event, they have abandoned this activity. That this should be so has significant implications (see paragraph 3(5) above).

- 5(9) The nature of the legislation prohibiting driving with the prescribed concentration of alcohol demands that the offender be arrested (vide s.4E Motor Traffic Act). On the other hand it may happen, for a variety of reasons, that a person charged with driving under the influence of intoxicating liquor may be proceeded against by summons. All the persons admitted to the scheme had, almost by definition, been arrested and charged in police stations by police. The indicators used were driving with a blood alcohol concentration of 150 mg. alcohol/100 ml. blood, or being a repeater offender.
- 5(10) All the magistrates presiding in the Courts affected, long before the scheme came into operation, had been instructed in its aims and methods and had enthusiastically agreed to implement it. This is what is done. After an offender with the necessary characteristics has been convicted, the magistrate, if he supposes the offender is likely to benefit and if the interests of justice permit, invites the offender to volunteer to enter the scheme. Not infrequently the opinion of the Probation Officer is taken on this point. It must be stressed that the offender has his options clearly stated to him, i.e., to be dealt with in the ordinary manner or to volunteer for the scheme. If he becomes a volunteer no promise of leniency is made to him, nonetheless an indication of possible leniency is commonly given.
- 5(11) The magistrate, in the case of volunteers, then adjourns the matter for sentence for a period of about eight weeks admitting the offender to bail on his own recognizance conditioned that he place himself under the supervision and guidance of the Officers of the Probation Service, that he attend.....Clinic for assessment and thereafter undertake whatever course of treatment may be prescribed for him. It is usual to add a condition in some way restricting the use he may make of his driver's licence.
- 5(12) When the offender returns to the Court for sentence, the Magistrate is provided with a certificate from whatever treatment centre was attended setting forth the result. As well the Probation Officer provides a written pre-sentence report. A typical pre-sentence report appears as Appendix A. In most cases Magistrates have then found it possible to moderate what otherwise would have been the sentence.

It is not uncommon to reflect this in a reduced term of licence suspension. Often the Magistrate has deemed it prudent to hold the offender under supervision, either the Court's or the Probation Officer's, by using the provisions of Section 556A or Section 558 of the Crimes Act.

TREATMENT

5(13) The methods of treatment may be broadly classified as -

- a) Counselling
- b) Education
- c) Psychological with educative component -- behaviour modification

None of the methods is mutually exclusive, each doubtless containing some flavour of the other. The classification is rather one of emphasis.

5(14) It may be expected that the second or final report will contain contributions from a professional involved in each of these modes. It was no part of the scheme to provide medical attention of the kind available from physicians or surgeons. Those found to be in need of such treatment received appropriate referrals.

6. EVALUATION

6(1) It has long been felt by many observers that present operations or "counter-measures" against drinking drivers have not been markedly successful in that they appear to be doing no more than maintaining a fairly constant level at which offenders are detected. Literature on this aspect of the matter is voluminous and too well known to make it necessary to elaborate further. What is to be drawn from this is that almost any improvement is desirable. From this it follows that an opportunity for improvement to be gained from modification of existing procedures and using existing resources demands attention.

6(2) The task obviously confronting those responsible for this scheme was the necessity to devise a means of auditing its methods and results and achieving a valid method of comparison of those who had been processed through it with those who had not.

6(3) A research grant was sought from the Australian Criminology Council for the purpose of evaluating the scheme. It will be understood that the duties of those constituting the

Committee which designed the scheme precluded them from undertaking this activity. The Research Council made funds available which in turn made possible the appointment of a Research Officer for the Scheme and Miss Elizabeth Walker B.A., a Sociologist, was appointed to the position.

- 6(4) The Research Officer first concerned herself to define the aims and objects of the Scheme in such a way as to render it susceptible to a reasonably scientific analysis.

Recapitulating, the aims of the Scheme were -

1. Within the framework of the operation of the relevant law to identify the driver with a drinking problem.
2. To define the degree of his drinking problem and the most appropriate method of treating it.
3. To remove the possibility of his engaging in driving after drinking heavily.

Careful analysis indicates that aim 2 is not really an objective of the Scheme but rather one of the mechanisms which it involves.

- 6(5) As to aim 1 it may be said that because of the nature of the exercise it is not possible, statistically, to evaluate the degree of effectiveness achieved. Obviously the element of voluntariness and the regrettable necessity, upon occasions, to impose more condign punishment, preclude this. What has been attempted is the recording and describing of those who did participate.
- 6(6) The third aim postulates a control group if detected recidivism is to be the indicator.
- 6(7) After defining in research terms the aims and objects of the Scheme it became necessary to define that part of it which could be evaluated in terms of procedures and structure and then to establish quantitative measures of effectiveness and by such measures to determine the ability of the Scheme to meet its stated aims.
- 6(8) A most important objective in any research project is to provide feedback to those actively participating in the management of the programme.

7. METHODOLOGY

The first step was to describe fully the procedure involved in processing defendants through the Scheme.

- 7(1) A circular was sent to all persons involved in the operation of the Scheme. (A copy is Appendix B). This was to obtain each person's view of this part. Most replied. In order to obtain details of the exact nature of the methods used in the

various treatment Centres a questionnaire was sent to all involved. (A copy is Appendix C).

- 7(2) Those defendants who volunteered for the Scheme were fully documented in the following way. Court papers relating to each have been examined and information extracted under the headings set out in the form used (Appendix D). Tabulations of that information have been made. This process is ongoing and a modified form will become a normal data collection procedure for the programme.
- 7(3) Like information was collected relating to those appearing at the same Courts and who did not undergo the Scheme. This included all other drink-driver offenders.
- 7(4) A proportion of those who undertook a programme in the Scheme were invited to complete two questionnaires. (Appendix E). The questionnaires were administered before entrance into the Scheme and on Scheme completion (whether successfully or otherwise). They documented knowledge and attitude of drink driving behaviour, demographic characteristics and the second questionnaire invited a subjective evaluation of the Scheme by its participants. This information has also been tabulated. (See Appendix I).
- 7(5) Those who entered but failed to complete the Scheme had their particulars recorded (as shown by Court records) and the result has been analysed.
- 7(6) It is proper to make some observations about the questionnaire (Appendix E). Before it was issued a pilot questionnaire was handed to forty seven people. This was to determine whether modification was required in terms of comprehensibility and the like. Slight modification was necessary and the modified questionnaire was completed by two hundred and forty three persons. It contained four test batteries namely, demographic, knowledge inventory, opinion survey, both with regard to drinking and driving and an alcohol screening test. In order to determine attitude and knowledge changes the questionnaire was handed to Scheme participants prior to entry into any treatment mode and, as well, after completion of the treatment. The same questionnaire was also distributed to a control group of drinking drivers with similar blood alcohol levels and drinking driver conviction histories and who possessed similar socio-economic characteristics. This they received after their final sentence which corresponded to the time those in the scheme were given their questionnaires. Usual methods of questionnaire construction include testing for reliability, validity and consistency of included items. This lengthy

procedure was not necessary for this study as many well tested questionnaire schedules are available.

- 7(7) The alcohol inventory was used to ascertain to what degree aim 1 of the Scheme was being achieved. (The identification of the driver with the drinking problem). The Michigan Alcohol Screening Test, itself devised for the identification of alcoholic road users was employed. Scoring presented difficulty because in the U.S.A. four was taken to indicate such problems. This has been criticised and did not appear to meet Australian conditions. The recently published work by Goode and Hudson recommends the adoption of a score of above fifteen on the abridged M.A.S.T. is more apt in the local alcohol milieu. This recommendation whilst subject to further investigation, was adopted apparently for the first time.
- 7(8) The knowledge and attitude test batteries were adapted from the Phoenix Alcohol Programme in the U.S.A. which is the most frequently quoted of any evaluation programme in use by A.S.A.P. Modifications made by the Traffic Accident Research Unit of the N.S.W. Department of Motor Transport were incorporated. As was said above two hundred and forty three participants completed the questionnaire prior to entry into any treatment programme between 1st. September, 1976 and 31st. January, 1977. To gauge attitude and knowledge change these batteries were again administered at the completion of the programme and after sentence. Only one hundred and forty eight completed the second questionnaire and of these it was possible to match one hundred and twenty three. This operation took place from 1st. November, 1976 to 31st. March, 1977. The numbers to whom each questionnaire were administered were the largest available. It was not possible to select a sample of participants during the first twelve months of operation. In the first five months the Scheme was developing and being subject to self-modification. The time within which the questionnaires might be administered was compressed on the one hand by the development of the scheme and on the other by the need to compute the results.

7(9) CONTROL GROUP

Five control Courts were selected from the most up-to-date data available on N.S.W. Breathalysed drivers, the 1975 Court of Petty Sessions Statistics from the Bureau of Crime Statistics and Research. Selection factors included proximity and the similarity of occupational status of processed drinking drivers in 1975 to that of those appearing before the pilot

courts in the same year. Volume was also important. The Courts selected were Manly, Waverley, Redfern, Fairfield and Kogarah. Drivers of similar offence and demographic characteristics to those in the pilot scheme were asked to complete, after having been sentenced, the same questionnaire as those administered to the course participants. (See Appendix E).

7(10) MATCHING

True individual matching is difficult if not impossible of achievement and in any event is not economically viable. It was not attempted. Nonetheless something approximating to it is required. A full count of both demographic and conviction characteristics of those answering questionnaires in each of the pilot and control groups has been tabulated and appears as Appendix F. Although this does not constitute a matching procedure, it highlights similarities and dissimilarities. It will be possible to conduct analysis of co-variance accounting for dissimilarities between the two groups.

7(11) The gauging of the effect of having undergone the treatment/s offered in the Scheme, ideally is to be accomplished only by a twenty four hour personal surveillance of those who did. The obvious impossibility of this led to the selection of two surrogate measures. First, it was sought to distinguish any change in attitude to drinking and driving after completion. Second, account was taken of the re-conviction or re-apprehension of offenders from both control groups and pilot groups. Records of persons involved in vehicle crashes are kept by the Traffic Accident Research Unit of the Department of Motor Transport. These records also were searched in the same manner. The timetable of the study precluded any coincidence between those subject to the questionnaire and those appearing in conviction, arrest and crash records. The minimum period for which an observation of this latter type of record may be significant must be taken to be six months.

7(12) The total number was one hundred and eleven appearing at Central and Bankstown Courts only. It is not uncommon for arrested persons to give spurious names and addresses. In the case of serious traffic offences, however, the driver's licence is commonly required to be produced and the particulars supplied to the Department of Motor Transport in order to obtain conviction records included, in addition

to name and address, the driver's licence number. Any deficiencies in the records of the Department of Motor Transport were remedied by reference to the records of the Fingerprint Section of the Police Department.

- 7(13) The largest sized group of the participant population was selected and to allow for a six month period as well as to allow for records to be catalogued by the relevant Departments, it was decided that only those participating for the initial three months would be observed. This group was necessarily smaller than desirable for sampling and therefore no sampling was undertaken. The first participants entered the Scheme on 1st. March, 1976, returning for sentence on 1st. May, 1976. The cut-off date was 31st. July, 1976. Clearly the best period for observation occurred after completion of whatever treatment was provided in the Scheme.
- 7(14) Three control Courts were selected for comparing the results. They were chosen upon the same criteria as was used in relation to the questionnaires. Kogarah, Redfern and Fairfield Courts were selected. A control group of two hundred and fifty five offenders was selected from those apprehended during a similar time period to that in which the pilot group had been apprehended. Tables revealing the similarities of the two groups appears as Appendix G. No further matching has since been attempted. The control group is almost double the size of the pilot group. This is because the pilot group consisted of volunteers. Those who were eligible for the pilot scheme, but who did not volunteer to join it are described in Appendix G also. This last group numbered one hundred and five. Taken with the pilot group the total is two hundred and sixteen. The total of the control group was two hundred and fifty five.
- 7(15) Probation and Parole Officers prepared four hundred and forty eight pre-sentence reports on participants in the Scheme. These were presented to the Magistrates before final sentence was pronounced. These reports were located in the Court files and scanned for information which has been tabulated and appears as Paragraph 9(9). This figure represents eighty three per cent of those who completed the Scheme for its first twelve months.

8. DISCUSSION OF FINDINGS - PROFILE OF OFFENDERS

8(1) TABLES AND APPENDICES

The information derived from the evaluation study is best displayed (and it is hoped, best understood) in tables and graphs which appear in the Appendix.

8(2) OFFENDERS - NUMBERS AND DISPOSAL

A number of useful facts emerged concerning the participants

themselves. They are comprised in the next eight following sections. In the twelve months under review six hundred and thirty two offenders entered the Scheme and five hundred and forty two completed their attendance in that time. Those enrolled and still within the Scheme numbered ninety. They were assigned in the following way -

"Educational Classes"	"Counselling"	"Behaviour Modification"
274	260	98

8(3) OFFENCE

Of the offenders completing the Scheme, ninety seven per cent (or five hundred and twenty seven out of five hundred and forty two) had been charged with offences relating to Police use of the breathalyser in contradistinction to the offence of driving under the influence. This proportion was a constant for all drink-driving offenders in both the pilot scheme Courts and the other Courts studied. Figures from the Bureau of Crime Statistics and Research indicate the proportion is a constant throughout the State.

8(4) SCHEME ELIGIBILITY

It was found that fifty eight per cent (or nine hundred and seventy six out of one thousand six hundred and eighty seven) offenders studied were, under the criteria applied, eligible for admission to the Scheme.

8(5) SCHEME ACCEPTANCE

Nine hundred and seventy six offenders were offered admission to the Scheme. Five hundred and thirty eight or approximately fifty five per cent accepted the offer. Whatever else may be drawn from this figure, it does emphasize that participation was voluntary and understood so to be.

8(6) Of the five hundred and forty two cases where treatment was completed, the four hundred and forty eight probation reports available for study indicated that four hundred and three or ninety per cent of those for whom reports were sighted satisfactorily completed the treatment to which they had been referred. The grading "satisfactorily completed" was accorded those who achieved at least seventy per cent of the attendances required of them. Among reasons assigned for failing to achieve satisfactory completion were being found unsatisfactory by the supervisor and possessing insufficient knowledge of the English language.

8(7) The figures from the Bureau indicate that male participation in drink-driver offences is of the order of ninety seven per cent, female three per cent. As may be expected this also represents the proportion in Scheme participants and, as well,

all offenders studied. The same homogeneity does not carry over into classification by age. Sixty per cent of Scheme participants were over thirty. The mean age of the group was thirty two. In the state-wide figures for this class of offence the proportion of offenders under thirty is much higher. It appears clear that the Scheme focussed itself upon older recidivists and offenders detected with higher B.A.C's. rather than the larger number of younger offenders.

8(8) TRAFFIC ACCIDENT INVOLVEMENT

Forty five per cent of Scheme participants were reported in Court records to have been so involved. Of those who elected not to participate, forty six per cent were so involved.

8(9) BLOOD ALCOHOL LEVELS

Of those offenders at the pilot Courts eligible for entry to the Scheme, whether electing to participate, or not to participate, sixty per cent recorded between one hundred and sixty six and two hundred and twenty five mg/100ml.

8(10) PREVIOUS CONVICTIONS FOR LIKE OFFENCES

Seventy four per cent of Scheme participants had at least one previous conviction and it follows that twenty four per cent were detected first offenders. Conviction histories were not tendered in two per cent of the Court records sighted. This contrasts with the balance of the offenders presented at the pilot Courts who divided almost equally into those with previous conviction/s and first offenders.

8(11) TREATMENT MODE PROCEDURES AND COURSE STRUCTURE

TREATMENT SUPERVISORS - QUESTIONNAIRE

A ten item questionnaire was distributed to all treatment supervisors. It was revealed that most groups were led by one individual and overall the modes, regardless of their official titles were concerned rather with a therapist/counsellor approach than that of teacher/instructor (mean = 6). The appendix graph provides an account of this trend. (See Appendix H). Additionally, an overall estimate of class time which is spent helping participants with social, emotional and behavioural problems was gauged at about fifty five per cent. One mode failed to complete this question. Generally those groups classified as Education, devoted most time to conveying information. See Appendix H Graph 3. Most course time was allocated to discussion between participants and leaders, (mean = 70% of course time) whilst it was found that approximately fifteen per cent of time was spent in didactic approaches. Films and slides were the aids most frequently used. Appendix H Graph 4 shows that the remaining time was

set aside for discussion amongst course participants themselves.

8(12) LENGTH OF COURSES AND CONTENT

Further, courses generally comprised six sessions in a length varying between one and two hours. Appendix H Graph 5 shows that those modes operating with more frequent sessions reduce the length of each session. Class size ranged from individual counselling to a total number of twelve in the educational classes offered at the Bankstown Area Health Clinic. The average class size was six. Notably those classified as educational programs usually operated with the larger class sizes. The individual counselling streams provided an opportunity for one-to-one counselling. From this it follows that whilst some interchange of functions did occur between the various treatment modes employed the assumed titles generally did factually specify the nominated program available.

8(13) PARTICIPANT OBSERVATION

It is appreciated that participant observation constitutes the most appropriate method of documenting the treatment modes. During the initial twelve months' operations this procedure was unable to be employed but it is anticipated that this procedure will be completed for a second report.

9. DISCUSSION OF FINDINGS - EVALUATION

	<u>Reconviction Rates</u>							
	<u>Scheme Entrants.</u>		<u>Pilots Courts - declined entry</u>		<u>Total eligible Pilot Courts</u>		<u>Control</u>	
	No.	%	No.	%	No.	%	No.	%
1 or more drink drive convictions in obser- vation period	1	0.9	2	1.9	3	1.4	2	0.8
1 or more general traffic convictions	2	1.8	3	2.9	5	2.3	5	2
1 or more criminal convictions	1	0.9	5	4.8	6	2.8	8	3.1
	111		105		216		255	

Note: The first line deals with drink-driving offences. Convictions include all convictions whether preceded by arrest or summons but do not include offences dealt with by Traffic Infringement Notice.

=====

The lower score in all kinds of convictions by participants

arouses interest but it is wiser to refrain from making inferences having regard to the length of the period of observation. Data relating to all groups is being maintained with a view to ensuring future comparability. Further time is necessary to form firmer conclusions but perhaps a cautious optimism is permissible.

9(2) RE-APPREHENSIONS AND INFRINGEMENTS

In an attempt to overcome the inadequacies in the re-conviction data a search was made for more sensitive measures of behaviour modification and the following classifications suggested themselves -

- a) Re-apprehension as opposed to conviction
- b) Traffic Infringement Notices
- c) Time interval between commencement of observation period and first re-apprehension
- d) Alteration in Blood-alcohol level between marker date apprehension and re-apprehension

The majority of those detected in a further drink-driving offence refused breath analysis and were charged with that offence. Thus their blood-alcohol levels were not known. Accordingly the procedure set out in (d) supra was not attempted.

Traffic Infringement Notices, even if the fine be paid, do not constitute convictions and by not paying, the recipient thereby puts the Police to proof of the offence. For present purposes they are to be regarded as no more than the attraction of Police notice to what they regarded as aberrant driving. Infringements have thus been included with a calculation of apprehensions for more serious offences as they represent a police action. The activities occur at similar points of time in the legal process.

Traffic Re-apprehensions and Infringements occurring during Observation Period

	Scheme Entrants		Declined Entry		Control	
	No.	%	No.	%	No.	%
1 or more drink-drive)	1	1.2	2	2.3	3	1.5
Recorded 1 or more general traffic offence + drink-drive)	8	9.6	17	19.1	41	20.3
N =	83		89		202	

Apprehensions which did not result in a charge, e.g., where upon analysis the B.A.L. was less than 0.08 are not here noted. It will be seen that the numbers, the subject of this table, are smaller than those in the table 8(11) above. This is because only the records of the Department of Motor Transport were available for the collection of the data. No more significance may be attached to the figures than to those set out in 8(11) and similar observations apply.

9(3) TIME INTERVAL TO RE-APPREHENSION

The following table compares the elapsed time between the commencement of the observation period and re-apprehension for a drink-driving offence. Excluded are re-apprehensions not followed by conviction. All arrests for drink-drive offences are recorded by the Police Fingerprint Bureau and it is these records which were searched.

Time Interval to Re-apprehension For Drink-drive Offence

Time Elapsed	Scheme Entrants		Declined Entry		Control	
	No.	%	No.	%	No.	%
Under 1 week			1	50		
1 week & under 2						
2 weeks & under 4					1	33
4 weeks & under 8			1	50	1	33
8 weeks & under 12						
12 weeks & under 16						
16 weeks +	1	100			1	33
N =	111		105		255	

Similar reservations apply here as in 8(11) and 8(12) above.

9(4) CRASH INVOLVEMENT

Crash Involvement of the drivers under study also received consideration. It was confined to crashes in which there were casualties or where a vehicle was towed away. In each of the groups in the relevant period there was one such crash.

9(5) SIGNIFICANCE TESTS

The short period of time under study and the small numbers of offenders involved in the material comprised in paragraphs 8(2) to 8(14) preclude significance tests of any utility. Data is being preserved for this purpose. Attention is drawn to the palpably higher Blood-alcohol levels of those participating in the scheme as a most likely ground for optimism. (See Appendix G for detail of this fact.)

9(6) ALCOHOL SCREENING TEST

The questionnaires administered to Scheme participants in the first instance were able to be matched with second questionnaires in one hundred and twenty three cases. There has been possible a comparison with replies from one hundred and sixty six of the control group. Computation has been completed and cross tabulation is in progress. The alcohol screening test employed is the abridgment of that devised by Selzer et.al. in Michigan, U.S.A. known as M.A.S.T. with the modification that a score of fifteen in the twenty five item scale rather than one of four is taken to be appropriate to Australian conditions. See paragraph 7(7) above. Only seven point four per cent of respondents scored above the fifteen point level. Obviously the Court environment in which the questionnaires were administered, notwithstanding precautions taken, has corrupted the result. Further investigations are necessary on this aspect. Additionally, the further research by Goode and Hudson may render the cut-off point of fifteen, not so appropriate as was originally thought.

9(7) KNOWLEDGE CHANGE

The following four paragraphs consist of matter culled from the questionnaires administered to participants and the control group and go to knowledge improvement.

This and the following tables afford some indication of the effect of the educational component in the treatment programmes.

(i) The Prescribed Concentration of Alcohol in the Blood in N.S.W.

<u>Statement</u>		% of N		Control
		First response	Second response	
The maximum blood alcohol level permitted in a motor vehicle driver is:	0.05%	14.6	13.0	9.6
	0.08%	73.2	82.9	77.1
	0.10%	2.4	0.8	4.2
	0.50%	1.6	-	1.8
Don't know		8.2	3.3	7.3
Number of respondents		123	123	166
		=====		

(ii) The Percentage of Australian Road Fatalities
Related to Alcohol

<u>Statement:</u>		% of N		
		First response	Second response	Control
To what percentage of Australian Road Fatalities is Alcohol related:	10%	1.7	1.6	9.0
	25%	15.5	10.6	18.7
	40%	5.7	19.5	22.9
	50%	24.4	48.8	22.9
Don't know		52.7	19.5	26.5
Number of respondents		123	123	166
=====				

The correct figure is approximately 50%

(iii) The alcoholic Content of Various Beverages

		% of N		
<u>Statement:</u>		First response	Second response	Control
The most alcohol is contained in:				
a middy of beer		4.1	6.5	5.4
a glass of wine		8.1	7.3	4.2
a nip of Scotch		56.1	55.3	59.0
a glass of sherry		4.1	5.7	4.8
all are the same		2.4	17.9	10.3
don't know		25.2	7.3	16.3
Number of respondents		123	123	166
=====				

There is interest in the persistence of the notion that whisky contains the most alcohol which probably emanates from what is perceived by the senses. Nonetheless there is palpable gain in the number who came to understand that all the beverages listed contain approximately the same amount.

(iv) Methods of Achieving Sobriety

		% of N		
<u>Statement:</u>		First response	Second response	Control
You can sober up by:				
vigorous exercise		11.4	4.9	20.5
drinking coffee		15.5	2.4	18.1
taking fructose		1.6	-	1.8
all of these		4.1	1.6	6.0
none of these		59.4	88.6	47.6
don't know		8.0	2.5	6.0
Number of respondents		123	123	166
=====				

The effect of knowledge of the impairment of driving by alcohol ingestion upon the disposition to anti-social drink-drive behaviour must be regarded as uncertain.

Nonetheless it may fairly be supposed that awareness has some effect upon behaviour and to that extent these results afford some encouragement to suppose an attitude change has been effected in participants.

9(8) ATTITUDE CHANGE

Attitude testing with regard to drinking and driving was conducted with participants and with the control groups. Tables comprising the mean and standard error of responses to each variable appearing in the questionnaire have been compiled. A comparison of participants' attitudes before undergoing treatment courses and after sentence had been passed upon them, indicated no change which was statistically significant. Recourse was then had to a comparison between the attitudes of the control and attitudes of participants after sentence. Again no statistically significant change was discernible. The Research Officer and the Senior Magistrates take the view that testing attitudes before sentence involves corruption in that respondents will tend to answer according to a norm they think they perceive. Immediately after sentence their answers are likely to be coloured, first by the removal of uncertainty-gendered tension existent during the previous two months and second by resentment at the punishment many received. An alternative to this procedure is therefore being considered. It is likely that a comparison between the two pilot and control groups at a location and time well removed from the Courtroom will prove more interesting. This present attitude information has been preserved.

9(9) THE PROBATION OFFICERS' PRE-SENTENCE REPORTS

The information in the following tables is taken from the reports to the Magistrates, after completion of the courses and before sentence.

A. (i) DEMOGRAPHIC & DRINKER CHARACTERISTICS

TOTAL

1. SOCIAL PROBLEMS

A. Family Problems during	- Childhood - Yes	48	10.7%
	- No	140	31.3%
B. Family Disruption	- Yes	61	13.6%
	- No	138	30.8%
C. No statement on matter		61	13.6%

(ii) PHYSICAL CONDITION

Health	- Poor	16	3.6%
	- Good	25	5.6%
	- Excellent	5	1.1%
No statement on Physical Condition		402	89.7%

(iii) DRINKING HABITS

Defendant considers him/herself:

a light social drinker	93	20.8%
a heavy social drinker	87	19.4%
an excessive drinker	26	5.8%
having a problem with alcohol	39	8.7%
an alcoholic	5	1.1%
No statement	198	44.2%

Defendant's next of kin considers Defendant:

a light social drinker	101	22.6%
a heavy social drinker	44	9.8%
an excessive drinker	23	5.1%
having a problem with alcohol	35	7.8%
an alcoholic	-	-
No statement	245	54.7%

TOTALS

448 100%

B. INDICATION OF ALCOHOL CONSUMPTION:

ATTITUDE & BEHAVIOUR CHANGE		TOTAL
<u>Alcohol Consumption - Attitudes</u>		
A. Indication of positive attitude change toward limiting future alcohol consumption	234	52.2%
B. Negative attitude change	-	-
C. No attitude change	74	16.5%
D. No statement of attitude concerning alcohol consumption	140	31.3%
<u>Alcohol Consumption - Behaviour</u>		
A. Positive behaviour change present-attempts to limit alcohol consumption	181	40.4%
B. Negative behaviour change present - increased alcohol consumption	-	-
C. No behaviour change	30	6.7%
D. No statement of behaviour regarding alcohol consumption	237	52.9%
<u>Alcohol Consumption Prediction</u>		
A. Prediction positive attitude change develop or continue	170	37.9%
B. Prediction negative attitude change	6	1.3%
C. Prediction no attitude change	13	2.9%
D. Prediction positive behaviour change	166	37.1%
E. Prediction negative behaviour change	8	1.8%
F. Prediction no behaviour change	14	3.1%
G. No statement of prediction regarding alcohol consumption	71	15.9%
TOTALS	448	100%

C. DRINKING - DRIVING

INDICATION OF ATTITUDES & BEHAVIOUR CHANGE		TOTAL
A.	Positive ATTITUDE CHANGE indicated - reducing occurrence of D/D	273 60.9%
	Negative attitude change - intention to increase drinking-driving	- -
	No attitude change	26 5.8%
	No statement of attitude concerning drinking-driving	149 33.3%
B.	Positive behaviour change indicated - has decreased occurrences of drinking-driving	145 32.4%
	Negative behaviour change indicated - has increased occurrence of drinking-driving	- -
	No behaviour change	32 7.1%
	No statement of behaviour change	271 60.5%
C.	Prediction Positive attitude change will develop or continue	292 65.2%
	Prediction negative attitude change	9 2.0%
	Prediction no attitude change	25 5.5%
	No statement on prediction on attitude change	122 27.2%
D.	Prediction the behaviour change will develop or continue	289 64.5%
	Prediction negative behaviour change	10 2.2%
	Prediction no behaviour change	25 5.6%
	No statement of prediction on drinking-driving	124 27.7%
TOTALS		448 100%

NOTE: This information is subjective and necessarily descriptive. Given present difficulties utilizing scientific tools of evaluation such information is however interesting.

The reports broadly suggest that the population is a group of social drinkers who are not necessarily suffering from the often described social and physical effects of alcohol abuse.

According to such reports a majority appear to have altered their behaviour and attitude patterns, intending so to continue. Validity necessarily waits the test of time.

SUMMARY AND CONCLUSIONS

The Sydney Drink Drive Rehabilitation Scheme commenced its pilot operation on 1st. March, 1976. First the Scheme was offered at Central and Bankstown Courts of Petty Sessions and in July 1976 the pilot exercise was extended to include North Sydney and Hornsby Courts.

Its objectives were defined to pinpoint the driver with a drinking problem and to reduce the likelihood of his subsequently driving after drinking to excess. The Scheme offered educative and treatment courses to only those drivers who had been found to be multiple drink-drive offenders or else who recorded blood alcohol readings in excess of 0.15%.

The initial twelve months saw six hundred and thirty two offenders enter the Scheme, five hundred and forty two completing their attendance prior to 1st. March, 1977. Two hundred and seventy four of these offenders undertook educational classes which comprised six two-hour weekly sessions. Two hundred and sixty participated in counselling groups and ninety eight were assigned to the University of New South Wales.

Of those eligible fifty five per cent entered the Scheme. It was observed that these participants were male, over thirty years of age, employed in semi-skilled or unskilled occupations and at time of apprehension possessed at least one previous conviction for a drink-drive offence. Most participants completed their treatments satisfactorily.

An evaluation research study of the pilot operation has continued from inception. The time available over which participants and control groups could be studied is, as yet, too short to make any significant calculations on reconvictions. Some indications of improved knowledge of responsibilities of drivers in relation to drinking alcohol have been recorded. The assessments of Probation Officers concerned with participants indicate improved attitudes to driving and drinking.

At this point there appears some ground for cautious optimism that the operation of the Scheme may produce better results than criminal sanctions alone.

All data and information continues to be processed and more statistically significant results may be expected from the appraisal of two years' operations.

PROBATION AND PAROLE SERVICEPRE-SENTENCE REPORT

, a , is years of age and presently resides at his work premises at

He was born and educated in . An older sister is his only sibling. His father was a bookmaker and this, as well as his drinking, led to many separations from his wife over the years. The final separation came, it seems, when was about 15. and his sister were thus brought up essentially by their mother and, because of financial problems, he was required to leave school early, having attained only second year standard. The offender's mother has not been spoken to as it is claimed that she resides in . She would doubtless have thrown much light on the family's early years.

At the age of 16 came to Sydney because of better work opportunities. He soon found his interest lay in the food and beverage industry and for most of his working life has been employed either as a waiter, barman or manager. In fact, he is presently part owner of a restaurant.

married in his early twenties but separated some 10 years later. In his view, it was simply a question of incompatibility, but those who know him believe it was more because of his heavy drinking and gambling. There are two sons from his marriage, aged 18 and 16 respectively, and they have remained with their mother. does have contact with his sons though, perhaps, not as often as would seem desirable. personal life seems to have remained unsettled since his marriage broke up. For the last five years he has lived in a de facto relationship with his business partner but the day prior to his arrest the relationship broke up. Again his drinking appears to have been the major factor.

Regarding his drinking, admits that he did have a problem. However, in the past he chose not to look at it too seriously for fear of the decisions he might have had to make. Though he does not appear to be an alcoholic he realises that between heavy drinking and alcoholism the line is very fine indeed. In the light of what has just been said, admits that his arrest on the present charge came, in fact, as a blessing in disguise. He has regularly attended the Driver Improvement Rehabilitation Program and his drinking seems to have moderated considerably as a result. claims that recently he even took the keys off a patron who was too drunk to drive home and ordered a taxi for him. The patron is said to have thanked him for his consideration the next day.

It seems clear that most of previous troubles with the law, in his marriage and in personal relationships

PROBATION AND PAROLE SERVICEPRE-SENTENCE REPORT

re _____

Continuation Sheet No. 2.

could be attributed to his heavy drinking. At last he seems to have accepted the fact and seems to be modifying his life style accordingly. His health and the success of his business will doubtless depend on the extent to which he can now control his drinking. A period of supervision by this Service may help to confirm him in his present resolve.

Probation and Parole Officer

19th November, 1976

APPENDIX B

Central Court of Petty Sessions,
98 Liverpool Street,
Sydney. N.S.W. 2000

20th September, 1976

As I am sure you are aware I have been employed by the inter-departmental Drink-Driver Rehabilitation Committee to conduct an evaluation of the Drink Driver Scheme in its present pilot form.

A very important part of this evaluation will include a report by those who have been actively involved in the operation of this programme over the past few months. I have asked a number of people from various disciplines who are carrying out a variety of different roles to write a few paragraphs describing their opinion of the pilot scheme and to date the response has been good. I do hope you will also enjoy the opportunity of presenting your own evaluation.

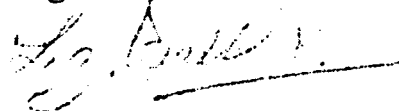
Listed below is an outline of the information required:

- (i) From your observation what do you consider the aims of the Drink Driver Programme to be.
- (ii) Do you feel these aims should be modified in some way? i.e. what do you consider the aims of the programme should be?
- (iii) A detailed description of how you have gone about meeting these aims. Especially for those where have been operating a treatment service this detail is most important.
- (iv) Your own evaluation: how effective do you feel you have been in meeting the aims of the programme? Why?
- (v) Any other general comments: problems you have been confronted with, suggestions on ways to alleviate these and any other observations such as drinker and demographic characteristics of those taking part in the programme. Lastly, any other comments you would like to make.

My report to the Committee and State Government will include these written statements and I trust that you also will want to be involved. Please forward your comments to me at the above address. I must stress, however that I will need to have received all comments by 31st October, 1976.

Many thanks for your co-operation.

Regards,



(Liz. Walker)
Research Officer

APPENDIX CTREATMENT MODE QUESTIONNAIRE

1. Participants are led by:

- a. _____ one individual
 b. _____ two co-leaders
 c. _____ three or more persons

2. Rate on the 10 point scale below to what extent the leader's role is that of teacher-instructor versus therapist-counsellor

Instructor _____ Counsellor

3. The percentage of time utilized by the countermeasure to convey information (e.g., on drinking and driving) to participants is

0 10 20 30 40 50 60 70 80 90 100

4. The percentage of time used to help participants with their social, emotional, and behavioural problems is

0 10 20 30 40 50 60 70 80 90 100

(Note: The sum of (3) and (4) should not exceed 100%)

5. The percentage of time spent in didactic approaches such as providing lectures, films, guest speakers, etc., is

0 10 20 30 40 50 60 70 80 90 100

6. The percentage of time spent in discussion between participants and the leader(s) is

0 10 20 30 40 50 60 70 80 90 100

7. The percentage of time spent in discussion among the participants themselves is

0 10 20 30 40 50 60 70 80 90 100

(Note: the sum of (5), (6) and (7) should not exceed 100%)

8. The prescribed (standard) or average number of sessions attended is

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25

9. The prescribed length of each session is

15 30 45 60 75 90 105 120 135 150 165 180 195 210 225 240 255 270 285 300

1 Hr.

2 Hr.

3 Hr.

4 Hr.

5 Hr.

10. The average number of participants attending the session is: or more

2 4 6 8 10 12 14 16 18 20 22 24 26 28 30 32 34 36 38 40

NOTE: This questionnaire was adopted from that used by the U.S.D.O.T. in their 'EVALUATION OF ASAP'.

SYDNEY DRINK-DRIVER REHABILITATION SCHEME - DATA COLLECTION - RECORD SEARCH - TOTAL PERIOD OF PILOT OPERATION

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Court House	Date	Full Name	Address	Occupation	Sex	Date of Birth	Age in years	Marital Status	Lic. No. if filed	Year First obtained Lic.	Date of Appre.	Time of Appreh.	Type of Drink Driving offence	Other Charges at same time

SYDNEY DRINK-DRIVER REHABILITATION SCHEME - DATA COLLECTION - RECORD SEARCH - TOTAL PERIOD OF PILOT OPERATION

16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
State if Acc. Recorded	Date Plea Taken	Date Case Det.	Blood Alco. Level (where approp- -riate	Hist. of Drink Drive Off.	Hist. of Other T/Off.	Hist. of Crim. Off.	Final Sent.	State Whether Attended Scheme	If Att. state whether completed	State Treatment Received	Condit. Recog.	Copy Pro- bat- ion & Par- ole Report obtain- -ed	State Wheth- er appeal lodged	If succ- essful state varied penalty

APPENDIX E

DATA COLLECTION ONETHE SYDNEY DRINK DRIVER SCHEME

PLEASE PRINT:

NAME:

ADDRESS:

PHONE NUMBER:

DATE:

To assure confidentiality the information on this piece of paper will be torn from your completed questionnaire and stored separately.

You are now taking part in the Sydney Drink Driver Scheme. This programme is operating on a trial basis in three areas of Sydney at present.

During this trial period we are looking at how well this programme is suited to people like you, and if there are any ways in which we can improve it.

We need your help.

In order for us to plan for the future of this programme it is necessary to ask you the following question. Please fill in each question as accurately as possible.

This information is strictly confidential and will in no way influence your final court sentence. Only the researchers will read your answers.

Go ahead now and thank you for your help.

-1-

A. FIRSTLY, WE WOULD LIKE TO KNOW A FEW FACTS ABOUT THE PROGRAMME, YOU ARE/OR WILL BE ATTENDING. PLEASE CIRCLE THE APPROPRIATE NUMBER IN THE FOLLOWING QUESTIONS.

1. (a) What treatment are you or will you be attending?

Education	1
Counselling	2
Behaviour Modification	3

(b) Where is this course being conducted?

Sydney	1
Bankstown	2
Chatswood	3
Universith of New South Wales	4

AND NOW COULD YOU ANSWER THE FOLLOWING QUESTIONS ABOUT YOURSELF.

2. Are you a male or female?

Male	1
Female	2

3. In which of the following age groups are you?

17 - 24	1
25 - 39	2
40 - 49	3
50 - 59	4
60 or over	5

4. What is your marital status?

Married	1
Widowed	2
Divorced	3
Permanently Separated	4
De facto	5
Single	6

5. How far have you gone with your education?

Which of these have you completed?

(circle the number which indicates the highest completed in Australia or its equivalent in another country).

- | | |
|--|---|
| Primary | 1 |
| High School
(But not to Inter-
mediate or School
Certificate) | 2 |
| Intermediate School
Certificate | 3 |
| Leaving/Higher School
Certificate | 4 |
| Trade, Professional
or Technical Diploma
or Certificate. | 5 |
| A degree at a
University, Teachers
College/ C.A.E. | 6 |
| Two or more degrees
at one of these
Institutions. | 7 |
| Other | 8 |

6. What is your usual Occupation?
Give Details.

7. (a) In what country were you born?

- | | |
|-----------|---|
| Australia | 1 |
| Elsewhere | 2 |

If elsewhere state Country

(b) How long have you lived in Australia?

- | | |
|---------------|---|
| Under 5 years | 1 |
| 5-10 years | 2 |
| Longer | 3 |

(c) In what country was your father born?

- | | |
|-----------|---|
| Australia | 1 |
| Elsewhere | 2 |

If elsewhere state Country

(d) In what country was your mother born?

- | | |
|-----------|---|
| Australia | 1 |
| Elsewhere | 2 |

If elsewhere state Country

B. WE NEED TO KNOW A FEW THINGS ABOUT YOUR KNOWLEDGE OF ALCOHOL AND DRINKING AND DRIVING. PLEASE CIRCLE WHICHEVER NUMBER YOU BELIEVE BEST ANSWERS EACH QUESTION.

1. What is the maximum blood alcohol level that a person may have and still be legally able to drive in N.S.W.?

- 0.05% 1
- 0.08% 2
- 0.10% 3
- 0.50% 4

2. Alcohol is related to:

- 10% of Australian road fatalities 1
- 25% of Australian road fatalities 2
- 40% of Australian road fatalities 3
- 50% of Australian road fatalities 4
- Don't know 5

3. How many middies of beer can an average person drink in one hour and still be below the legal blood alcohol level for driving? (Circle answer in table below column 1).
 How many loz nips of spirits? (circle answer in column 2).
 How many glasses (3-4oz.) of wine? (circle answer in column 3).
 If you don't know any answer circle Number 11 in that column.

	1	2	3
	<u>Middies of Beer (10oz)</u>	<u>Nips of Spirits</u> <u>1oz.</u>	<u>Glasses of</u> <u>Wine 3-4 oz.</u>
One	1	1	1
Two	2	2	2
Three	3	3	3
Four	4	4	4
Five	5	5	5
Six	6	6	6
Seven	7	7	7
Eight	8	8	8
More	9	9	9
None	10	10	10
Don't know	11	11	11

4. Which of the following drinks contains the most alcohol?

- (a) A middy of beer 1
- (b) A glass of wine 2
- (c) A nip of Scotch 3
- (d) A glass of sheery 4
- (e) All are the same 5
- (f) Don't know 6

5. You can sober up by:

- (a) vigorous exercise 1
- (b) drinking coffee 2
- (c) taking fructose 3 continued next page.....

- | | |
|-------------------|---|
| (d) all of these | 4 |
| (e) none of these | 5 |

C. PEOPLE HAVE DIFFERENT OPINIONS ABOUT ALCOHOL AND DRINKING AND DRIVING. CAN YOU TELL US TO WHAT EXTENT YOU AGREE OR DISAGREE WITH THE FOLLOWING STATEMENTS. CIRCLE THE NUMBER WHICH BEST DESCRIBES YOUR POINT OF VIEW.

1. You can't set a standard 'safe' limit for everyone when it comes to drinking and driving, because everyone's capacity varies.

Agree	1
Disagree	2
Undecided	3
Don't know	4

2. Even experienced drinkers can have their driving impaired by quite small amounts of alcohol.

Agree	1
Disagree	2
Undecided	3
Don't know	4

3. The only way to sober up after you have been drinking is to give the alcohol time to leave your bloodstream.

Agree	1
Disagree	2
Undecided	3
Don't know	4

4. Some drivers are just as safe with a blood alcohol concentration of 0.08% as when they are sober.

Agree	1
Disagree	2
Undecided	3
Don't know	4

5. It tends to interfere with my enjoyment at a pub or party if I have to limit my drinks.

Agree	1
Disagree	2
Undecided	3
Don't know	4

6. Which one of the following best describes what you believe.

- | | |
|--|---|
| i) Its all right to drive when you have had too much to drink. | 1 |
| ii) Its all right to drive when you have had too much to drink provided you take it easy and drive slowly. | 2 |
| iii) Its all right to drive after drinking, provided you can hold your grog. | 3 |
| iv) Its all right to drive after drinking, provided you're had only a couple of drinks. | 4 |
| v) You should never drive after drinking. | 5 |

If none of these above are what you believe - would you write your opinion on drinking and driving in general.

.....

7. When I go to the pub or a party its often quite difficult to limit my drinks because I'm expected to keep up with my friends.

Agree	1
Disagree	2
Undecided	3
Don't know	4

- D. THESE QUESTIONS ARE ABOUT YOUR GENERAL DRINKING AND DRIVING HABITS. CONTINUE TO CIRCLE WHICHEVER NUMBER BEST ANSWERS EACH QUESTION.

1. If you were personally going to drive what is the largest amount of the following drinks that you could have in one hour without a meal and still be safe to drive? If for any of these drinks you either don't know or else don't drink it, circle either No. 11 or 12 (whichever is appropriate) in that column.

	<u>Middies of Beer(10oz.)</u>	<u>Nips of Spirits (1oz)</u>	<u>Glasses of Wine (3-4oz.)</u>
One	1	1	1
Two	2	2	2
Three	3	3	3
Four	4	4	4
Five	5	5	5
Six	6	6	6
Seven	7	7	7
Eight	8	8	8
Nine or more	9	9	9
None	10	10	10
Don't know	11	11	11
Don't drink it	12	12	12

Have you ever thought you might have a drinking problem?

Yes	1
No	2
Don't know	3

Have you ever sought help for a drinking problem?

Yes	1
No	2

If yes: did you seek help from -

A Doctor	1
Church	2
A.A.	3
Therapist	4
Relative	5
Agency	6
Hospital	7
Other	8

-6-

4. Do you feel that you are a normal drinker?
- | | |
|------------|---|
| Yes | 1 |
| No | 2 |
| Don't know | 3 |
5. Have you ever been in goal even for a few hours because of drunk behaviour?
- | | |
|-----|---|
| Yes | 1 |
| No | 2 |
6. Do you often feel bad about your drinking?
- | | |
|-----|---|
| Yes | 1 |
| No | 2 |
7. Have you ever lost friends, male or female because of drinking?
- | | |
|-----|---|
| Yes | 1 |
| No | 2 |
8. Do your friends male or female consider you a normal drinker?
- | | |
|------------|---|
| Yes | 1 |
| No. | 2 |
| Don't know | 3 |
9. Has drinking ever created problems between you and your wife, husband, a parent or other near relative?
- | | |
|-----|---|
| Yes | 1 |
| No | 2 |
10. Have you ever been in trouble at work because of drinking?
- | | |
|-----|---|
| Yes | 1 |
| No | 2 |
11. Have you ever had the delirium tremens (D.T.), severe shaking etc., after heavy drinking?
- | | |
|-----|---|
| Yes | 1 |
| No | 2 |
12. Who do you most often drink with?
- | | |
|---------------|---|
| Alone | 1 |
| Friends | 2 |
| People I meet | 3 |
| Other | 4 |
13. When do you normally drink?
- | | |
|------------|---|
| Mornings | 1 |
| Afternoons | 2 |
| Evenings | 3 |
| All day | 4 |

-7-

14. What is the largest amount of the following drinks you could have in one hour without a meal and still be below the legal limit to drive? If for any of these drinks you either don't know the answer for else don't drink it, circle No.11 or 12 (whichever is appropriate) in that column.

	<u>Middies of Beer</u> <u>(10oz)</u>	<u>Nips of Spirits</u> <u>(1oz)</u>	<u>Glasses of Wine</u> <u>(3-4oz)</u>
One	1	1	1
two	2	2	2
three	3	3	3
four	4	4	4
five	5	5	5
six	6	6	6
seven	7	7	7
eight	8	8	8
nine or more	9	9	9
Don't know	10	10	10
Don't drink it	12	12	12

1. LASTLY, A FEW QUESTIONS ABOUT YOUR PRESENT APPREHENSION.

- 1.(a)When apprehended, had you been involved in an accident?

Yes 1
No. 2

If yes - did it involve injury to a person?

Yes 1
No 2

did it involve death?

Yes 1
No 2

2. How many other car drivers were involved?

One 1
Two 2
More 3

3. In the past, have you ever been involved in an accident when driving?

Yes 1
No 2

If yes - did it involve injury to a person?

Yes 1
No 2

did it involve death?

Yes 1
No 2

QUESTIONNAIRE 2 PART D: SUBJECTIVE EVALUATION OF SCHEME OPERATIONS

NOW COULD YOU TELL US YOUR OPINION OF THIS PILOT DRINK DRIVER SCHEME BY WRITING A FEW SENTENCES IN REPLY TO THE FOLLOWING QUESTIONS. IF THERE IS NOT ENOUGH ROOM FOR YOUR ANSWER SIMPLY WRITE ON THE BACK OF THE PAPER.

FIRSTLY COULD YOU ANSWER THESE QUESTIONS ABOUT THE COURSE YOU HAVE JUST COMPLETED.

1. (a) Do you think that this has helped you in anyway?

Yes

No.

If yes, how?.....

.....

- (b) Do you think that the course has harmed you in anyway?

Yes

No

If yes, how?.....

.....

2. (a) Could you tell us what you liked most about the course you have attended?

.....

.....

.....

- (b) What did you dislike most about this course?

.....

.....

.....

3. What changes (if any) would you like to see made to this course before it is offered to other people like yourself.

.....

.....

.....

.....

4. Do you think that this course should be continued and offered to others convicted of drink driving charges?

Yes

No.

Why?.....

.....

.....

AND NOW COULD YOU BRIEFLY DESCRIBE YOUR OPINION OF THE ENTIRE DRINK DRIVER SCHEME.

5. During the past weeks you have come into contact with the following people involved in the Drink Driver Programme. As this is a new scheme, many people are working in a capacity that is very new to them. They need to know if there are any ways in which their service to you and others in the Drink Driver Scheme can be improved. What do you think? Beside each category below would you tell us what changes you think could be made in the work these people carry out.

- (i) The Police force.....
-
- (ii) The Magistrate.....
-
- (iii) The Probation and Parole Officer.....
-
- (iv) The Assessment Officer (person who told you which course to attend)
-
- (v) The Supervisor of your course.....
-

If a friend was convicted of a breathalyser charge would you recommend the Drink Driver Scheme to him or her and suggest that he or she take part in it?

Yes

No

Why?.....

Are there any other general changes improvements you would like to see made to the Drink Driver Programme before it is offered to other people?

.....

.....

.....

APPENDIX FQUESTIONNAIRE RESPONDENTSTABLES COMPARING CONVICTION & DEMOGRAPHIC CHARACTERISTICS
OF PILOT & CONTROL GROUPS

(i) SEX

<u>CATEGORIES</u>	<u>PILOT</u>		<u>CONTROL</u>	
	No.	%	No.	%
MALE	122	99.2	161	97.0
FEMALE	1	0.8	5	3.0
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	123	100.0	166	100.0
	<hr/>	<hr/>	<hr/>	<hr/>

(ii) AGE STRUCTURE
(at date of Apprehension)

<u>CATEGORIES</u>	<u>PILOT</u>		<u>CONTROL</u>	
	No.	%	No.	%
Under 18	-	-	1	0.6
18-24	28	22.8	67	40.4
25-29	22	17.9	14	8.4
30-34	17	13.8	17	10.2
35-39	15	12.2	11	6.6
40 +	41	33.3	56	33.8
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	123	100.0	166	100.0
	<hr/>	<hr/>	<hr/>	<hr/>

APPENDIX F

(iii) OCCUPATIONAL STATUS

<u>CATEGORY</u>	<u>PILOT</u>		<u>CONTROL</u>	
	No.	%	No.	%
Professional A	-	-	1	0.6
Semi-professional B	13	10.6	19	11.5
Sales, Small Business C	62	50.4	83	50.0
Unskilled D	41	33.3	62	37.3
Not Employed	3	2.4	1	0.6
N/S	4	3.3	-	-
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	123	100.0	166	100.0
	<hr/>	<hr/>	<hr/>	<hr/>

(iv) BLOOD ALCOHOL CONCENTRATION

<u>CATEGORY</u>	<u>PILOT</u>		<u>CONTROL</u>	
	No.	%	No.	%
Below .08	-	-	-	-
.08 - .155	28	22.8	84	50.6
.16 - .225	70	56.9	50	30.1
.23 +	16	13.0	18	10.9
N/S	9	7.3	14	8.4
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	123	100.0	166	100.0
	<hr/>	<hr/>	<hr/>	<hr/>

APPENDIX F

(v) PRIOR DRINK DRIVE CONVICTIONS

<u>CATEGORY</u>	<u>PILOT</u>		<u>CONTROL</u>	
	No.	%	No.	%
No Prior Conviction	59	48.0	118	71.1
1 or more prior convictions	64	52.0	44	26.5
N/S	-	-	4	2.4
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	123	100.0	166	100.0
	<hr/>	<hr/>	<hr/>	<hr/>

(vi) COURT ACTION

<u>CATEGORY</u>	<u>PILOT</u>		<u>CONTROL</u>	
	No.	%	No.	%
556A Dismissal	7	5.7	14	8.4
Licence Restriction and/or fine	52	42.3	140	84.4
Recognizance, Fine and/or Licence Restriction	62	50.4	6	3.6
Imprisonment - Periodic Detention or Hard Labour	1	0.8	4	2.4
N/S	1	0.8	2	1.2
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	123	100.0	166	100.0
	<hr/>	<hr/>	<hr/>	<hr/>

APPENDIX F

(vii) VARIATIONS IN MAJOR PENALTIES

<u>CATEGORY</u>	<u>PILOT</u>		<u>CONTROL</u>	
	No.	%	No.	%
Licence Suspension -				
Under 1 month	36	29.3	45	27.1
1 month & under 6 months	65	52.8	67	40.4
6 months & under 1 year	8	6.5	21	12.7
1 year & under 2 years	8	6.5	15	9.0
2 years +	5	4.1	15	9.0
N/S	1	0.8	3	1.8
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	123	100.0	166	100.0
	<hr/>	<hr/>	<hr/>	<hr/>
Fine				
0	25	20.3	20	12.1
\$1 - \$99	-	-	5	3.0
\$100 - \$199	37	30.1	74	44.6
\$200 +	60	48.8	64	38.6
N/S	1	0.8	3	1.7
	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL	123	100.0	166	100.0
	<hr/>	<hr/>	<hr/>	<hr/>

APPENDIX F

(viii) INTERVAL BETWEEN DATE APPREHENSION & DATE PLEA TAKEN

	0-4 WEEKS	5-9	10-14	15-20	20+	N/S	TOTAL
PILOT NO.	102	10	-	1	-	10	123
(% 123)	82.9	8.1	-	0.8	-	8.2	100.0
CONTROL NO.	130	18	2	1	1	14	166
(% 166)	78.3	10.9	1.2	0.6	0.6	8.4	100.0

(ix) APPREHENSION DATE

	1975/6 Before April	1976 April	May	June	July	August	Sept	Oct	Nov	Dec	1977 Jan	N/S	TOTAL
PILOT NO.	-	-	-	1	2	15	38	27	18	10	11	1	123
%				0.8	1.6	12.2	30.9	22.0	14.7	8.1	8.9	0.8	100.0
CONTROL NO.	1				3	13	43	35	38	14	5	14	166
%	0.6				1.8	7.8	25.9	21.1	22.9	8.5	3.0	8.4	100.0

APPENDIX GGROUPS OBSERVED FOR RECIDIVISM CALCULATIONSTABLES COMPARING CONVICTION & DEMOGRAPHIC CHARACTERISTICS
OF PILOT & CONTROL GROUPS

(i) SEX STRUCTURE

	<u>ENTERED</u>		<u>DECLINED ENTRY</u>		<u>CONTROL</u>	
	No.	%	No.	%	No.	%
Males	108	97.3	104	99.0	250	98.0
Females	3	2.7	1	1.0	5	2.0
TOTAL	111	100.0	105	100.0	255	100.0

(ii) AGE STRUCTURE AT DATE OF APPREHENSION

	<u>ENTERED</u>		<u>DECLINED ENTRY</u>		<u>CONTROL</u>	
	No.	%	No.	%	No.	%
16 - less	-	-	-	-	-	-
17 years	-	-	-	-	-	-
18-24	28	25.2	17	16.2	65	25.5
25-29	20	18.0	13	12.4	41	16.1
30-34	18	16.2	23	21.9	35	13.7
35-39	5	4.5	10	9.5	29	11.4
40 +	38	34.3	41	39.0	84	32.9
N/S	2	1.8	1	1.0	1	0.4
TOTAL	111	100.0	105	100.0	255	100.0

APPENDIX G

(iii) OCCUPATIONS

	<u>ENTERED</u>		<u>DECLINED ENTRY</u>		<u>CONTROL</u>	
	No.	%	No.	%	No.	%
Professional - Managerial	-	-	2	1.9	6	2.4
Semi-professional middle management	16	14.4	13	12.4	21	8.2
Small business sales, clerical, skilled trades	61	55.0	54	51.4	136	53.3
Unskilled	26	23.4	26	24.8	77	30.2
No Occupation	3	2.7	7	6.7	13	5.1
Not stated	5	4.5	3	2.8	2	0.8
TOTAL	111	100.0	105	100.0	255	100.0

(iv) BLOOD ALCOHOL CONCENTRATIONS

	<u>ENTERED</u>		<u>DECLINED ENTRY</u>		<u>CONTROL</u>	
	No.	%	No.	%	No.	%
Below .08	-	-	-	-	-	-
.08 - .145	18	16.2	11	10.5	28	11.0
.15 - .155	9	8.1	18	17.1	32	12.5
.16 - .225	62	55.9	65	61.9	160	62.7
.23 +	15	13.5	11	10.5	28	11.0
Breathalyser charge but no PCA reading	1	0.9	-	-	6	2.4
Breathalyser reading not taken - other than PCA charge	6	5.4	-	-	1	0.4
TOTAL	111	100.0	105	100.0	255	100.0

APPENDIX G

(v) PRIOR DRINK DRIVE CONVICTIONS

	<u>ENTERED</u>		<u>DECLINED ENTRY</u>		<u>CONTROL</u>	
	No.	%	No.	%	No.	%
No Prior Conviction	54	48.6	82	78.1	144	56.5
1 or more prior convictions	57	51.4	23	21.9	111	43.5
TOTAL	111	100.0	105	100.0	255	100.0

(vi) COURT ACTION

	<u>ENTERED</u>		<u>DECLINED ENTRY</u>		<u>CONTROL</u>	
	No.	%	No.	%	No.	%
556A Dismissal	5	4.5	13	12.4	11	4.3
Licence Restriction &/or fine	51	45.9	85	81.0	160	62.8
Recog. fine &/or licence restriction	54	48.7	4	3.8	22	8.6
Imprisonment - periodic detention or Hard Labour	1	0.9	1	0.9	9	3.5
Not stated	-	-	2	1.9	53	20.8
TOTAL	111	100.0	105	100.0	255	100.0

APPENDIX G

(vii) VARIATIONS IN MAJOR PENALTIES

	<u>ENTERED</u>		<u>DECLINED ENTRY</u>		<u>CONTROL</u>	
	No.	%	No.	%	No.	%
Licence Suspension						
0	10	9.0	12	11.4	14	5.5
1 - 4 weeks	55	49.6	23	21.9	53	20.8
5 - 8 weeks	-	-	8	7.6	10	3.9
9 - 16 weeks	20	18.0	24	22.9	12	4.7
17 - 24 weeks	5	4.5	7	6.7	6	2.3
Over 6 months	21	18.9	28	26.7	107	42.0
N/S	-	-	3	2.8	53	20.8
TOTAL	111	100.0	105	100.0	255	100.0
Fines						
0 - \$99	35	31.5	21	20.0	47	18.4
\$100 - \$199	43	38.8	52	49.5	58	22.8
\$200 +	33	29.7	32	30.5	97	38.0
N/S	-	-	-	-	53	20.8
TOTAL	111	100.0	105	100.0	255	100.0

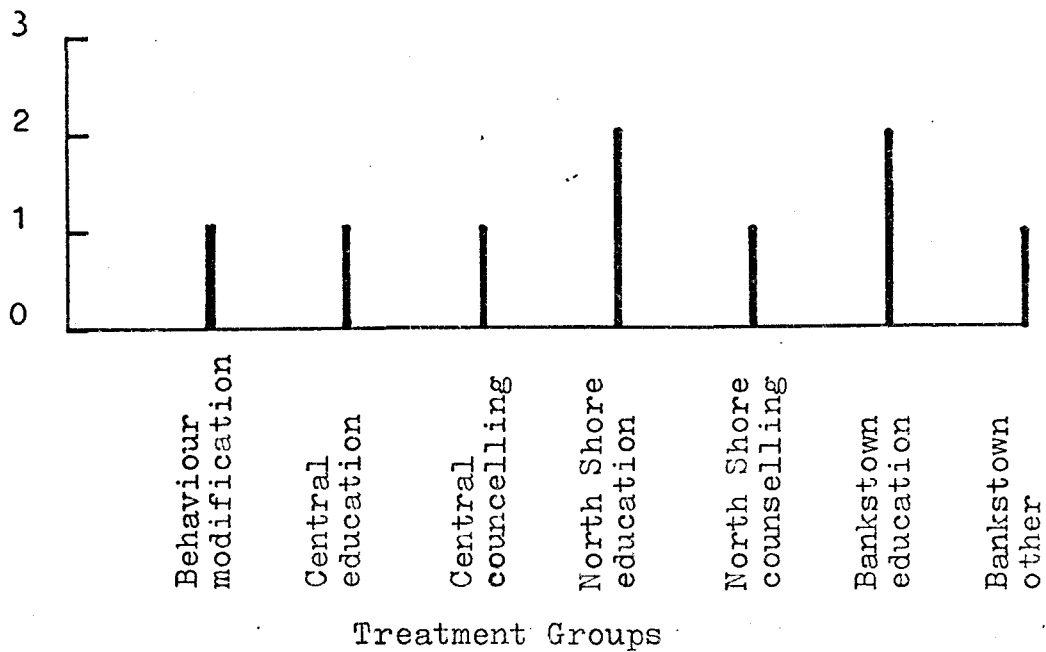
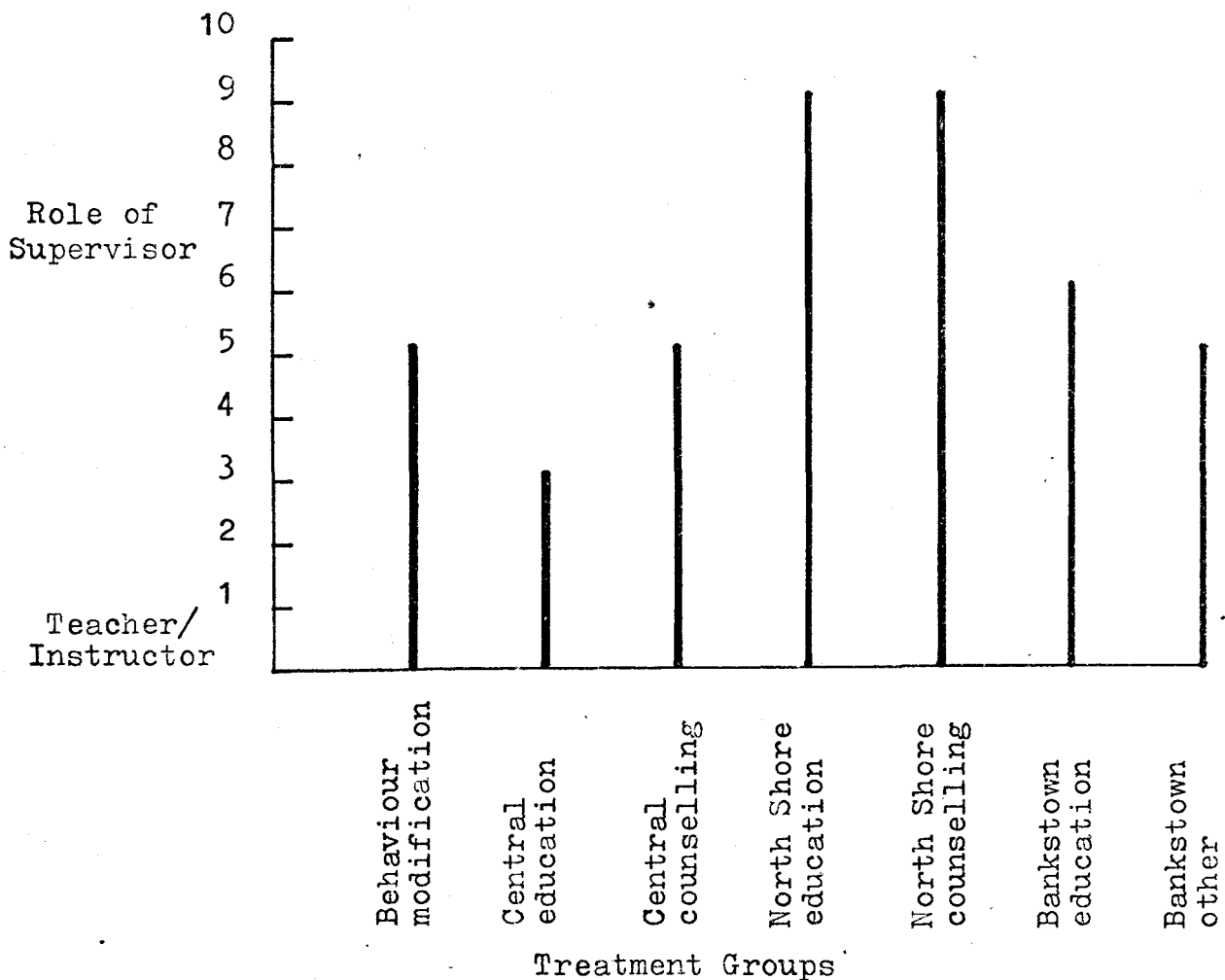
APPENDIX G

(viii) INTERVAL BETWEEN DATE APPREHENSION & DATE PLEA TAKEN

		0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	N/S	TOTAL
ENTERED	No.	72	20	10	2	1		1				5	111
	%	64.9	18.0	9.0	1.8	0.9		0.9				4.5	100.0
DECLINED ENTRY	No.	78	17	5	4				1				105
	%	74.3	16.2	4.8	3.8				0.9				100.0
CONTROL	No.	211	31	5	2			1	2		2	1	255
	%	82.7	12.1	2.0	0.8			0.4	0.8		0.8	0.4	100.0

(ix) DATES APPREHENSION

		1975 July	Aug	Sept	Oct	Nov	Dec	1976 Jan	Feb	March	April	May	June	N/S	TOTAL
ENTERED	No.	1		1		1	2	8	22	37	16	17	3	3	111
	%	.9		.9		.9	1.8	7.2	19.8	33.4	14.4	15.3	2.7	2.7	100.0
DECLINED ENTRY	No.		1			3	4	1	25	27	28	16			105
	%		1.0			2.8	3.8	1.0	23.8	25.7	26.7	15.2			100.0
CONTROL	No.	3		2		1	5	12	30	69	90	43			255
	%	1.2		0.8		0.4	1.9	4.7	11.8	27.0	35.3	16.9			100.0

APPENDIX HGRAPH 1SUPERVISION OF TREATMENT GROUPSNumber of
leadersGRAPH 2CLASSIFICATION OF LEADERSHIP ROLETherapist/
Counsellor

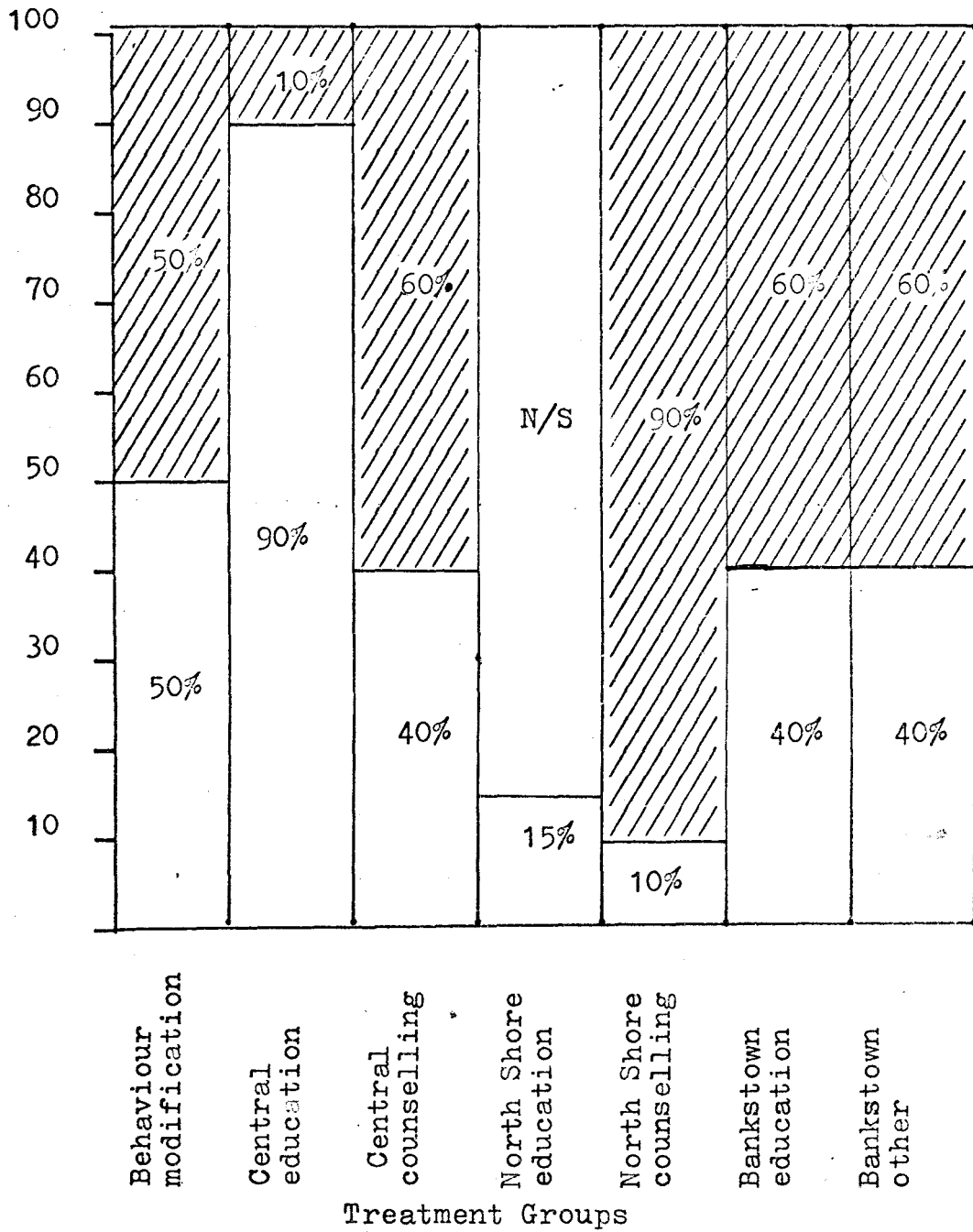
X = 6

APPENDIX H

GRAPH 3

TIME ALLOCATION - EDUCATION/COUNSELLING

% time of
Course
Participation



Key



% time actual
information
conveyed

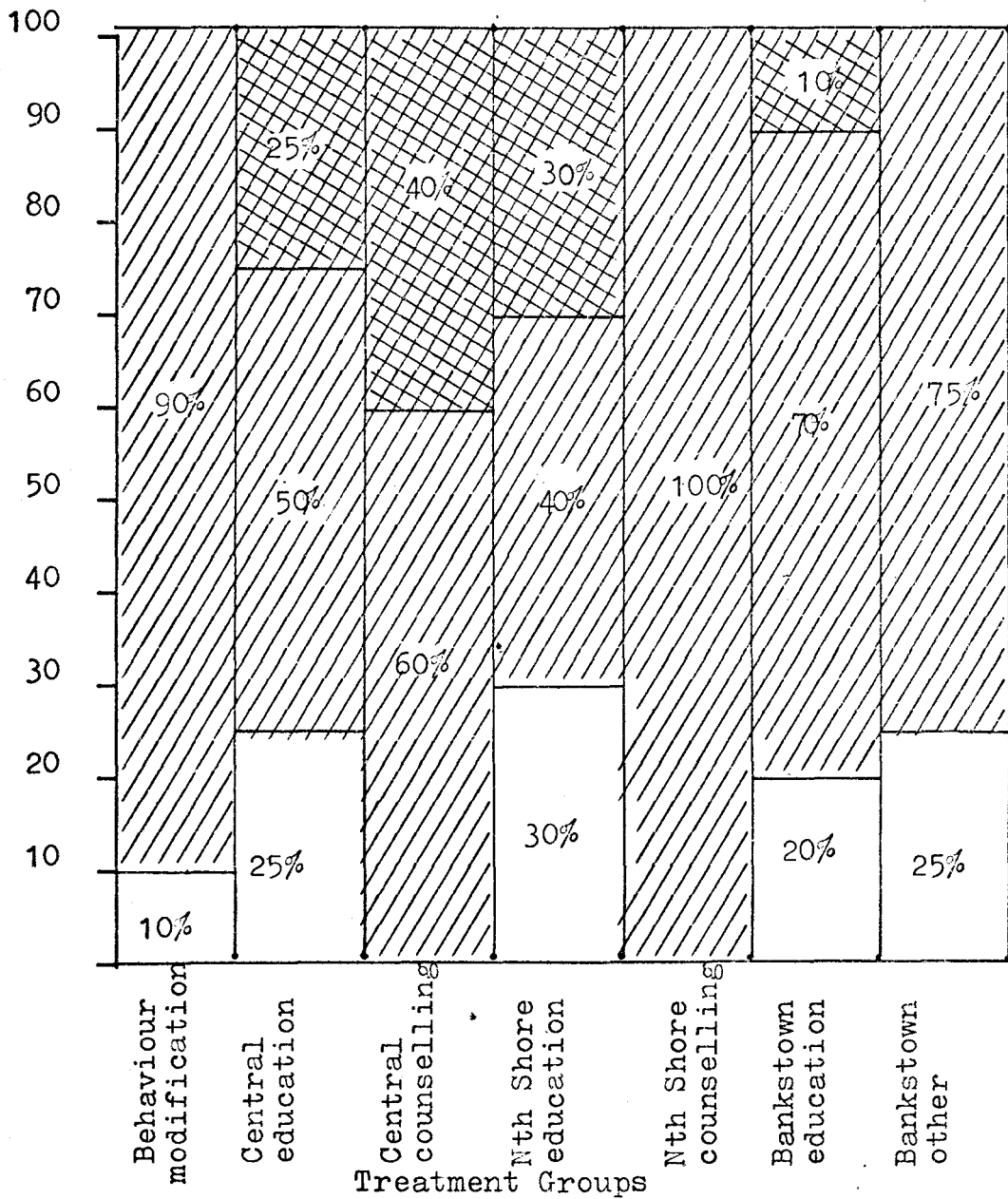


% time participants
helped (social, emotional & behavioural problems)

APPENDIX H

GRAPH 4 TIME ALLOCATION - EDUCATION TOOL/DISCUSSION

% time of
Course
Participation



Key



% time spent in
didactic approaches



% time discussion between
participant and leader



% time discussion between
participants

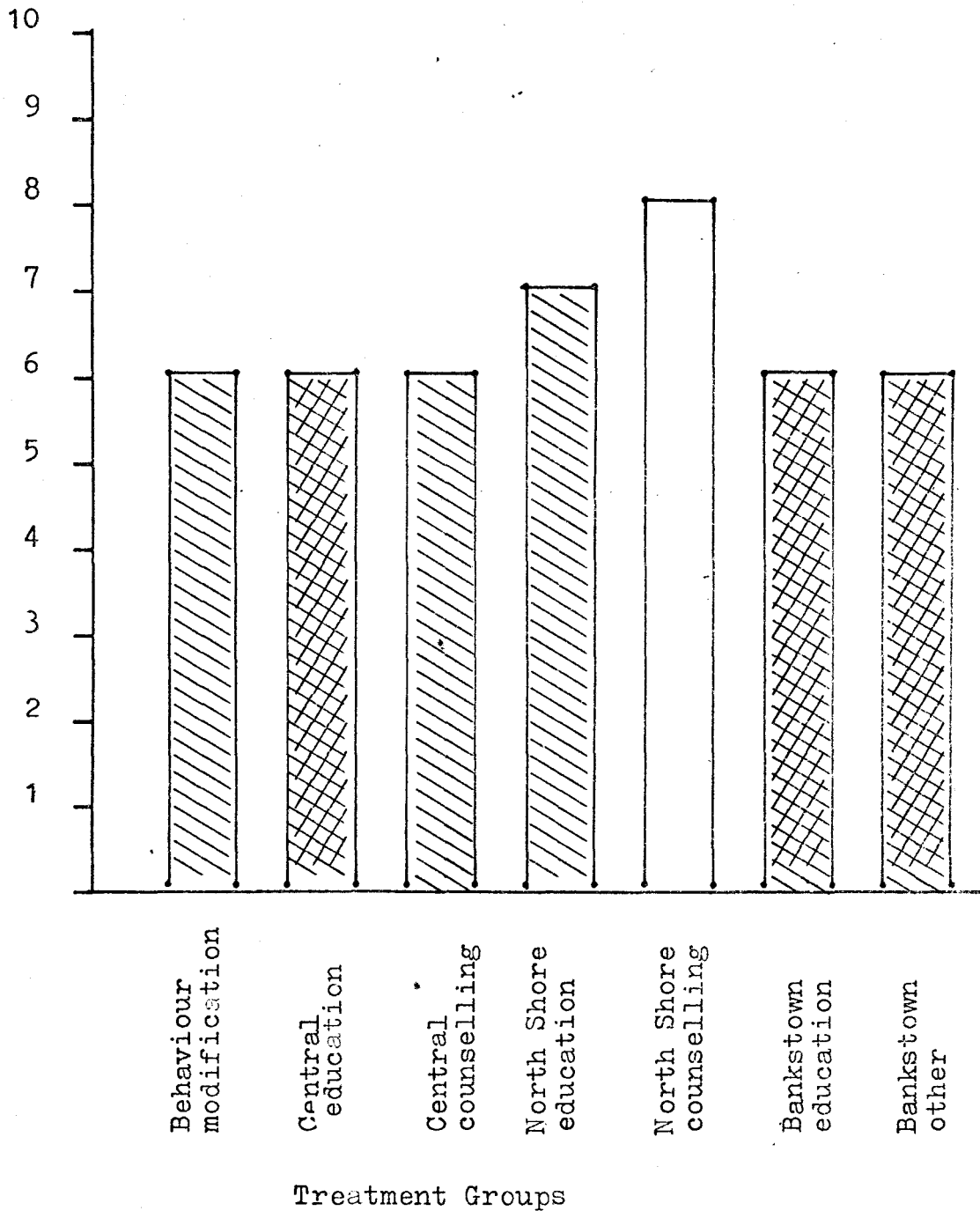
$\bar{X} = 70\%$

APPENDIX H

GRAPH 5

NUMBER AND LENGTH OF SESSIONS

No. of sessions
attended by
participants



Key



1 hour



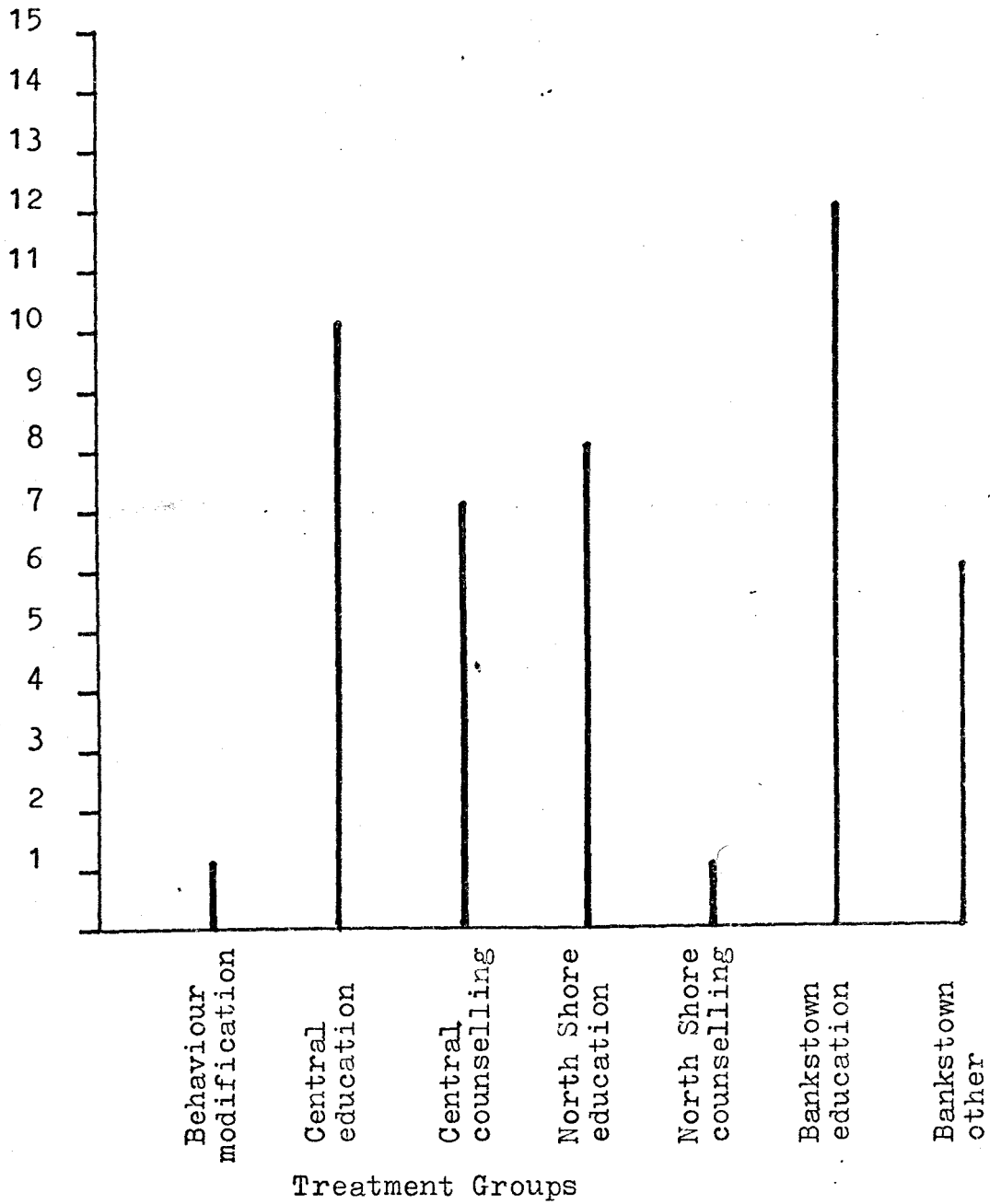
1 1/2 hours



2 hours

GRAPH 6 AVERAGE NUMBER OF PARTICIPANTS ATTENDING SESSIONS

Average no. of
participants
in each session



APPENDIX I

TABLES SELECTED FROM QUESTIONNAIRE 2 PART D1. (a) ON RECOMMENDING THE CONTINUATION OF THE SYDNEY DRINK
DRIVE REHABILITATION SCHEME.

<u>STATEMENT</u>	<u>REPLY</u>	
	No.	%
Yes, I could recommend the Scheme to a friend	135	91.5
No, I couldn't recommend the Scheme to a friend	13	8.5
N/S	0	0
	<u>148</u>	<u>100.00</u>
TOTAL		

1. (b) EXPLANATION FOR RESPONSE IN 1 (a)

<u>STATEMENT</u>	<u>REPLY</u>	
	No.	%
The Scheme assists people with drinking and/or driving problems	63	42.5
The Scheme provides an opportunity to learn about drinking and driving	67	45.1
Other	7	4.6
N/S	11	7.8
	<u>148</u>	<u>100.00</u>
TOTAL		

2. (a) ON EVALUATING THE USEFULNESS OF THE TREATMENT
ATTENDED

<u>STATEMENT</u>	<u>REPLY</u>	
	No.	%
The course has helped me	138	93.4
The course has not helped me.	3	2.0
N/S	7	4.6
	<u>148</u>	<u>100.00</u>
TOTAL		

2. (b) EXPLANATION FOR RESPONSE IN 2 (a).

<u>STATEMENT</u>	<u>REPLY</u>	
	No.	%
The course provided an opportunity to <u>learn</u> about alcohol and its effects	113	76.5
The course helps people to reduce their alcohol consumption	13	9.1
Other	13	8.5
N/S	9	5.9
TOTAL	<u>148</u>	<u>100.00</u>

3. (a) ON RECOMMENDING THE CONTINUATION OF THE TREATMENT ATTENDED

<u>STATEMENT</u>	<u>REPLY</u>	
	No.	%
Yes - it should be continued	139	94.1
No - it shouldn't be continued	0	0
N/S	9	5.9
TOTAL	<u>148</u>	<u>100.00</u>

3 (b) EXPLANATION FOR RESPONSE IN 3 (a)

<u>STATEMENT</u>	<u>REPLY</u>	
	No.	%
The course increased my knowledge of alcohol	53	35.9
The course increased my knowledge of drinking/driving	60	40.6
The course gave me help	24	16.3
N/S	11	7.2
TOTAL	<u>148</u>	<u>100.00</u>