Summary:

Enforcement of health requirements for motor vehicle drivers – traffic safety effects

In 2010, the county of Møre of Romsdal in Norway initiated an action for intensified practice regarding driving licence revocation from drivers who did not fulfil health requirements specified by the Driving licencing directive, including diseases, drug and medicine use, drug dependence and any other health-related problem that could be considered incompatible with safe driving of a motorized vehicle.

A comparison of crash involvement per 1000 licence holders before and after the year 2010 showed a significantly larger decrease in Møre og Romsdal than in the rest of Norway. This indicates that the action contributed to increased road safety.

Health personnel like doctors, psychologists and opticians, are obliged by law to report to the County Medical Officer any case of a patient holding a driver’s licence and who does not fulfil the health requirements for holding such a licence. (An exception is temporary conditions with an expected duration of no more than six months). The County Medical Officer will investigate the case, and if he concludes that health requirements are not fulfilled, he will ask the Police to revoke the driving licence. Licence revocation due to health problems is founded on §34 of the Norwegian Road Traffic Act.

The criteria for licence revocation according to §34 include: 1) Impaired eyesight, poor health, or physical disability, 2) insufficient driving skills or knowledge, 3) drug addiction, or 4) unsatisfactory conduct.

There have been indications that several cases of failure to fulfil licence health requirements have gone unreported, and this has led to great concern among road safety authorities and professionals. In order to improve the situation, the county of Møre og Romsdal initiated a cooperative action in the autumn of 2010. A cooperation group was established with representatives from the County Medical Officer, the Police, the Norwegian Public Roads Administration, and the Norwegian Council for Road Safety.

The action has comprised the following elements:

- The County Medical Officer has organised courses for general practitioners, hospital doctors, psychologists, and various medical specialists.
- The Police and the Roads Administration have organised information meetings with driving instructors about legal regulations and practice regarding driver licencing.
- There have been several mass media reports about road safety and driver health.
- The Police intensified their practice of requiring medical examination and/or driving tests on the background of suspect driving behaviour.
The cooperation group worked together with the County Traffic Safety Board in order to get politicians more involved in the action.

The purpose of the present evaluation project was to investigate possible road safety effects of the action. This was done by comparing both the frequencies of licence revocations and of road crashes between the years before and after 2010.

The frequency of licence revocations founded on §34 in Møre og Romsdal increased from about 150 per 100 000 licence holders in 2009 to more than 900 in 2011, whereas the level in the other counties was between 200 and 300 cases per 100 000 licence holders both in 2009 and 2011.

There has been an overall decrease in road crash risk in the whole country over several years. In order to see if the action in Møre og Romsdal has had any effect, we have therefore compared changes in crash frequencies for this county with changes in the rest of the country. We chose the years 2001-2009 as pre-intervention period and 2011-2012 as post intervention. Involvement in police-reported personal injury crashes per 1000 licence holders decreased by 30 per cent in Møre og Romsdal, compared to 26 per cent in the other counties; the difference was however not statistically significant. Fatal crashes per 1000 licence holders decreased by 66 per cent in Møre og Romsdal, which was significantly more than the 35 per cent decrease for the other counties.

A more detailed analysis of fatal crashes indicates that the number of crashes related to health problems and drug influence has remained rather stable despite the reduction in the total number of crashes. Therefore, a more comprehensive investigation into background data for crash-involved drivers with health or drug related problems might be useful, in order to get more knowledge about possibilities of early detection of these problems, and possibly also getting ideas for further improvements of procedures for licence revocation in such cases. In addition, one should also consider possible measures for preventing driving without a licence among those who have had their licence revoked.

It can be concluded that the increased effort regarding licence revocations founded on §34 in Møre og Romsdal has made a significant contribution towards decreased crash risk, and that this practice is an effective road safety measure.