

Effectiveness of an educational program for preventing drinking and driving recidivism

Submission date 09/03/2016	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 10/03/2016	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 10/07/2017	Condition category Other	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

One fifth of drivers convicted of drink-driving for the first time will be convicted again for the same offence in subsequent years. Lecture-based educational programs are believed to reduce recidivism (re-offending). The aim of this study is to measure the effects of short lectures with and without the presence of a close relative 'in class' on the rates of recidivism during the two years after an initial drink-driving conviction.

Who can participate?

Drivers in the Canton of Geneva convicted of a first-time drink-driving offence.

What does the study involve?

Participants are randomly allocated to attend either: a two-hour series of lectures; a one-hour lecture and a group psychological intervention with a close relative; or to receive written information on the consequences of alcohol consumption. Time until recidivism is retrieved from a national registry for two years after participation.

What are the possible benefits and risks of participating?

Participants benefit from a one-month reduction of the time for which their license is suspended. They will also personally benefit from changing their behaviour towards drink driving given the legal, financial and emotional consequences drink driving can have. There are no known risks related to the intervention.

Where is the study run from?

University Center of Legal Medicine Lausanne-Geneva (Switzerland)

When is the study starting and how long is it expected to run for?

December 2011 to July 2016

Who is funding the study?

Swiss Federal Office for Roads (Switzerland)

Who is the main contact?
Prof. Paul Vaucher

Contact information

Type(s)
Scientific

Contact name
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Additional identifiers

Protocol serial number
CER10-214

Study information

Scientific Title
Effectiveness of an educational program for preventing drinking and driving recidivism: a randomized controlled trial

Acronym
PRECASIA 2

Study objectives
A short educational program with or without a proxy reduces the hazard of drink driving recidivism within the two first years.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Official state ethical committee (Commission cantonale d'éthique de la recherche du Canton de Genève), December 2010, ref: CER10-214

Study design

Single-centre three-armed parallel randomized clinical trial

Primary study design

Interventional

Study type(s)

Prevention

Health condition(s) or problem(s) studied

First time convicted offenders for drink driving with blood alcohol concentration ≥ 0.8 g/kg and $<$ to 2.5 g/kg

Interventions

Participants are invited to attend an educational programme on drinking and driving in exchange for a reduction, of one month, of the time for which their license is suspended.

Participants are randomly assigned to either:

1. A two-hour series of lectures. Participants are informed regarding accident statistics, offence-related legal procedures, the consequences of DUI for insurance cover, the medical consequences of heavy drinking, the psychological aspects of alcohol consumption, and behavioural strategies for avoiding DUI recidivism. Class size are limited to 12 participants. Participants receive printed materials on alcohol consumption and consequences at the end of the two-hour lecture. The program is delivered by a psychologist with educational experience. The entire lecture is delivered during one morning.
2. A one-hour lecture and a group psychological intervention with a proxy. Participants are asked to choose, nominate, and bring with them a close relation (proxy) such as their spouse, a companion, or a friend. After receiving a briefer lecture, this group is to expose reasons for changes to an unknown proxy from another pair. They then have to plan a strategy for change with their original proxy.
3. The control group also receive a reduction, of one month, of the time for which their license is suspended and paid for program costs. They however only received written information on alcohol consumption and consequences.

Program costs were paid by the individual drivers (CHF 200).

Intervention Type

Behavioural

Primary outcome(s)

Time till drink driving recidivism offense with blood alcohol concentration (BAC) ≥ 0.8 g/kg, retrieved from a national registry that contains details of recidivism that take place up to two years after inclusion.

Key secondary outcome(s)

None

Completion date

31/07/2016

Eligibility

Key inclusion criteria

1. Over 18 years of age
2. Having one's driving license suspended for DUI offense
3. Understanding French
4. Being able to read and write
5. Having a potential proxy to attend the course with

Participant type(s)

Other

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

BAC \geq 2.5 g/kg

Date of first enrolment

01/12/2011

Date of final enrolment

30/06/2014

Locations**Countries of recruitment**

Switzerland

Study participating centre

University Center of Legal Medicine Lausanne-Geneva, Geneva

Rue Jean-Violette 32

Geneva

Switzerland

1205

Sponsor information

Organisation

Geneva University Hospitals, University Centre of Legal Medicine

ROR

<https://ror.org/03grgv984>

Funder(s)

Funder type

Government

Funder Name

Swiss Federal Office for Roads (Switzerland)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Data sharing statement to be made available at a later date

Study outputs

Output type

[Participant information sheet](#)

Details

Date created

Date added

19/04/2016

Peer reviewed?

No

Patient-facing?

Yes