

# Queensland Drug Driving Review findings



## **Translating and interpreting assistance**

The Queensland Government is committed to providing accessible services to Queenslanders from all cultural and linguistic backgrounds. If you have difficulty understanding this publication and need a translator, please call the Translating and Interpreting Service (TIS National) on 13 14 50 and ask them to telephone the Queensland Government (Department of Transport and Main Roads) on 13 74 68.

## **Copyright**

This publication is protected by the Copyright Act 1968. © The State of Queensland, 2025.

## **Disclaimer**

While every care has been taken in preparing this publication, to the extent permitted by law, the State of Queensland accepts no responsibility and disclaims all liability (including without limitation, liability in negligence) for all expenses, losses (including direct and indirect loss), damages and costs incurred as a result of decisions or actions taken as a result of any data, information, statement or advice, expressed or implied, contained within. To the best of our knowledge, the content was correct at the time of publishing.

# Contents

- Queensland Drug Driving Review findings ..... 0**
- Background..... 3**
- 1. Medicinal cannabis ..... 4**
  - Key findings ..... 4
- 2. Areas of opportunity ..... 5**
  - Roadside drug testing processes ..... 6
  - Drink and drug driving offence ..... 6
  - Drug driving offender education ..... 7

# Background

In 2007, Queensland introduced 'presence-based' laws that make it an offence to drive with any level 3,4-methylenedioxymethamphetamine (MDMA), delta-9-tetrahydrocannabinol (also known as THC, the main psychoactive ingredient in cannabis) or methylamphetamine in saliva or blood. Cocaine was included in 2023. These laws aim to address the road safety risks posed by drug driving.

In response to an increase in drug driving related crashes and lives lost, the Department of Transport and Main Roads (the Department) undertook the Queensland Drug Driving Review (the Review) to explore strategies for reducing drug driving.

Recognising drug drivers are not a homogenous group, it was essential to adopt a human-centered approach considering individual behaviours and broader systemic factors influencing drug driving.

The Review utilised a number of activities to ensure a holistic approach was taken, accounting for research, public engagement and expert practitioner engagement.

In 2022-23 the Department engaged KPMG to take a human-centred approach to investigate the potential opportunities to reduce drug driving and associated trauma. Five key areas were identified: education, government policy, drug testing approaches, enforcement and consequences; and rehabilitation and treatment. A systems-based approach was recommended for greater effectiveness.

In 2023-24 the University of the Sunshine Coast then developed a model analysing the drug driving ecosystem, including societal factors. Modelling suggested that combining enforcement, education/media campaigns and initiatives addressing societal health could reduce drug driving by an estimated 48.74%.

Across 2023 and 2024, consultation with stakeholders included medicinal cannabis patients, the general public, health professionals and peak medical and pharmaceutical bodies, road safety experts, stakeholder groups and the Queensland Police Service. This provided valuable insights and advice on the key issues and challenges.

Public input was sought through a discussion paper on cannabis and driving, which received over 5,400 responses, and through focus groups. The Department also reviewed national and global approaches, and over 100 academic articles.

The Review identified the importance of a holistic approach, integrating enforcement, education, and community engagement to reduce drug driving and improve road safety outcomes in Queensland.

## 1. Medicinal cannabis

A significant focus of the Review was the issue of medicinal cannabis and driving. In 2016, medicinal cannabis became legal in Australia.

THC, a key ingredient in cannabis, is detected in Queensland's Roadside Drug testing (RDT) program, making it an offence to drive with the presence of THC in either saliva or blood. There are concerns among people who take medicinal cannabis products that contain THC, as they are not legally able to drive while using their medication.

Cannabis presents unique challenges including the way it is prescribed and used, the highly variable effect both within and between individuals, and the impacts on a person's ability to assess their own impairment. Diverging community views exist on medicinal cannabis and driving.

In late 2023, the Department released a public discussion paper, receiving over 5,400 submissions. Of these 79% of respondents reported personal cannabis use and of these over 65% indicated medicinal use. Almost 80% of medicinal cannabis users reported negative impacts from the current drug driving laws. The discussion paper was supplemented with a 2024 survey of over 2000 Queensland drivers, which found 97% believe driving after cannabis use is dangerous. Over 50% consider it extremely dangerous.<sup>1</sup>

Consultation with government stakeholders, including Queensland Police Service, Department of Justice and Queensland Health, highlighted the importance of prioritising road user safety. Technical discussions explored the feasibility of alternative approaches, with stakeholders raising concerns about the broader medicinal cannabis landscape in Queensland.

## Key findings

The Review found that cannabis is a complex drug with highly variable effects between individuals due to differences in how it is processed by the body and the variety of consumption methods (e.g., smoking, vaping, ingesting).

---

<sup>1</sup> TMR market research, 2024

Unlike alcohol, which has a predictable relationship between blood alcohol concentration (BAC) and impairment, cannabis lacks a clear link between dosage, time since use, and impairment. Similarly, medicinal cannabis differs from other prescription drugs, as most products are unapproved by the Therapeutic Goods Administration (TGA) and allow flexible dosing, leading to inconsistent usage patterns.

While not specifically part of the Review, a 2024 Queensland Health survey<sup>2</sup> received 295 responses, predominately from health practitioners (medical practitioners and pharmacists), revealing widespread concerns about non-evidence based and unlawful prescribing. This prompted the release of an action plan to improve prescribing and dispensing practices and address other identified concerns.<sup>3</sup>

The Review explored various approaches to managing medicinal cannabis and driving. Saliva testing is suitable for detecting recent use but cannot establish impairment. Blood testing was considered but deemed impractical due to its invasive nature, resource demands and inequities for regional areas. Regular cannabis users, including medicinal patients, may also never fall below a set safe THC threshold.

The idea of a medical defence allowing driving with THC under certain conditions was also examined but found unfeasible due to challenges in verifying adherence to prescriptions and assessing impairment roadside.

The Review concluded that no legislative changes should be made at this time, as maintaining the current approach is the safest option for all road users. However, the Review found there is a need to address community knowledge gaps about medicinal cannabis and driving, and to continue monitoring emerging evidence, trends and technology advances.

## **2. Areas of opportunity**

Throughout the course of the Review a number of potential opportunities were identified to enhance the current drug driving laws.

---

<sup>2</sup> [https://www.health.qld.gov.au/\\_\\_data/assets/pdf\\_file/0031/1366267/Medicinal-cannabis-in-Queensland-A-report-on-stakeholder-feedback.pdf](https://www.health.qld.gov.au/__data/assets/pdf_file/0031/1366267/Medicinal-cannabis-in-Queensland-A-report-on-stakeholder-feedback.pdf)

<sup>3</sup> <https://www.health.qld.gov.au/public-health/topics/medicinal-cannabis>

## Roadside drug testing processes

The Review identified that there are inefficiencies within the roadside drug testing (RDT) process. Currently, the process requires two positive results before a sample is sent to Queensland Health for analysis in a laboratory. Challenges included availability of the devices used for the second test, and cost of these devices.

Recent technology improvements now mean that the initial roadside drug test has an accuracy rate close to 100 per cent. Efficiencies can be gained by streamlining the RDT process by removing the second test without compromising the integrity of the RDT program. It is anticipated to save both police and driver time, and also reduce program delivery costs.

The Review finding is that there may be benefit to streamlining the current RDT process by removing the second test.

## Drink and drug driving offences

Research showed that combining alcohol with other drugs significantly increases the risk of crashing. For example, an American study found that drivers who tested positive to both alcohol and another drug were 23 times more likely to be involved in a fatal crash than drivers who tested negative to both.<sup>4</sup> A 2020 Victorian study of 5000 drivers found those with THC and alcohol were 14 times more likely to be responsible for a crash than drivers who were negative to both.<sup>5</sup>

To address this high-risk behaviour, the Review found there may be benefit in introducing new combined offences for drivers who have an illegal breath/blood alcohol concentration (BAC) and also test positive to a relevant drug.

This will support more consistent enforcement and remove high-risk offenders from the road, where they put the community at risk.

---

<sup>4</sup> Li, G., Brady, J. E., & Chen, Q. (2013). Drug use and fatal motor vehicle crashes: A case-control study. *Accident Analysis and Prevention*, 60(2013): 205-210.  
<http://dx.doi.org/10.1016/j.aap.2013.09.001>

<sup>5</sup> Drummer, O. H., Gerostamoulos, D., Rago, M. D., Woodford, N. W., Morris, C., Frederiksen, T., Jachno, K., & Wolfe, R. (2020). Odds of culpability associated with use of impairing drugs in injured drivers in Victoria, Australia. *Accident Analysis & Prevention*, 135, 105389.  
<https://doi.org/10.1016/j.aap.2019.105389>

## Drug driving offender education

Data analysis indicated approximately one third of drug drivers offended twice or more frequently within a five-year period. While fines and licence loss are effective deterrents for many drivers, this indicates that there may be benefit in more targeted approaches to address recidivism and future drug driving.

The Review found that it may be beneficial to introduce an education program for drug drivers. To ensure the program is appropriate and can be tailored to each person's needs, it should be delivered by a specialist drug information service provider. Delivery through this model would also allow people to be referred to further support if appropriate. The finding also included drivers convicted and disqualified of a drug driving offence should complete the program before they are able to relicence in Queensland.