

**INQUIRY INTO ROAD TRANSPORT AMENDMENT  
(MEDICINAL CANNABIS-EXEMPTIONS FROM  
OFFENCES) BILL 2021**

**Name:** Dr Michael White

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**Submission to: the Inquiry of the Standing Committee on Law and Justice of the Legislative Council of the Parliament of NSW on the *Road Transport Amendment (Medicinal Cannabis-Exemptions from Offences) Bill 2021*.**

**Dr Michael White**

Adjunct Senior Fellow

School of Psychology, University of Adelaide, South Australia

ResearchGate Address: [https://www.researchgate.net/profile/Michael\\_White24](https://www.researchgate.net/profile/Michael_White24)

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**The negligible risk of crashing after using medical marijuana**

This is one of two submissions from me to the inquiry on the abolition of THC-positive driving penalties for medical users of cannabis. As both submissions are personal, rather than institutional, it seems appropriate to say a few words about myself. I am a 76-year-old retired South Australian (SA) public servant, with PhD in psychology from the University of Adelaide. While employed by the SA Department of Transport from 1987 to 2007, I had some responsibility for managing commissioned road-safety research projects; I twice chaired the committee responsible for hosting what is now the annual *Australasian Road Safety Conference*; and I was the SA-government's representative on the *Austroads Drug-Driving Working Group*. I am a current member of the *Australasian College of Road Safety*. I am the principal- or co-author of five peer-reviewed journal articles on the effects of cannabis on driving skills and/or crash risks. I distribute occasional (~ monthly) email research briefings to the *Friends of Research on Cannabis and Driving*, who are an international group of about 550 drug-driving researchers and policy-makers that I established some years ago. And, apart from sharing somebody else's marijuana cigarette on two occasions a few decades ago (where I *did* inhale), I have never used cannabis either recreationally or medically (which is not to say that I would have any moral qualms about doing so).

I strongly support the Bill to abolish THC-positive driving penalties for medical users of cannabis.

In this submission, I make two points in favour of the Bill. The evidence supporting each point is provided in a paper of which I am the first author, and which I have provided to the Inquiry.

The first point is that, if there is *any* increase in the risk of crashing after using cannabis, it is very small, and certainly less than for the general BAC limit of 0.05. White and Burns (2021) have produced clear evidence of that fact in our recently published systematic review of the epidemiological literature. Given that the increased risk of crashing from the *typical* use of cannabis is very small, the increased risk from its *medical* use would be vanishingly small, and most probably zero.

The second point is that it must be acknowledged that experimentally-demonstrated impairments from the use of cannabis, while sometimes statistically significant, are generally below the threshold for real-world relevance. White & Burns (2022) explain those ideas in a

selective and critical review of the impairment literature, which is currently being considered for journal publication. In that review, the notion of being ‘trivially impaired’ is explained. For example, normal 60-year-olds are highly statistically-significantly impaired on many driving-related psychomotor skills when compared with normal 30-year-olds. But nobody suggests banning 60-year-olds from driving because of their age-related impairments: in other words, they are only trivially impaired. While impairments from the *recreational* use of cannabis may sometimes be non-trivial, it is likely that any impairment from the regular *medical* use would usually be below the threshold for any real-world relevance, especially by three or four hours after using cannabis.

### *References*

White, M. A., & Burns, N. R. (2021). The risk of being culpable for or involved in a road crash after using cannabis: A systematic review and meta-analyses. *Drug Science, Policy and Law*, 7, 1-20.

White, M. A., & Burns, N. R. (2021). How to read a paper on the short-term impairing effects of cannabis: A selective and critical review of the literature. *Drug Science, Policy and Law*, Submitted for publication.