



**58th CIECA
CONGRESS**
DRESDEN 2026

Objective and subjective parameters of road safety after cannabis consumption: A driving simulator study.

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AGENDA

- ***Project Partners:***
***TU Dresden, Institute for Work and Health
at the DGUV & DEKRA DTC Klettwitz***
- ***Data collection: From July to September
2025***

- 01 Study design and sample
- 02 Self-assessment of intoxication
- 03 Factors influencing subjective driving safety
(self-assessment)
- 04 Subjective and objective parameters of
driving behavior
- 05 Conclusion

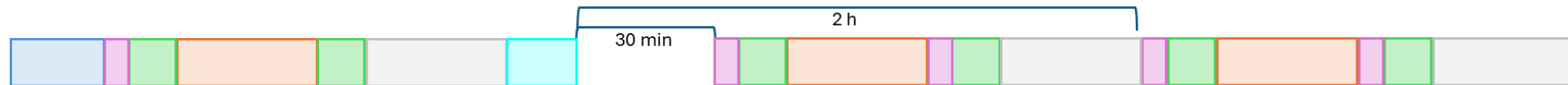


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01 Study design and sample

Design Frame I

- **Data collection - Flowchart**
- Selection of participants via an online questionnaire
- Experimental Trial at the driving simulator: 5.5 hours (each subject)
- Max. 3 participants per data collection day,
- 3 driving sessions with 30 minutes intervals each
- Sample of N=41 Subjects, average age 24 years, 33 were male




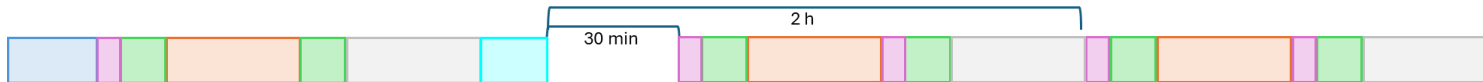
- Welcome and questionnaire (1 x 20 minutes)
- Blood draw (5 x 5 minutes)
- Self-assessment (6 x 10 minutes)
- Drive in a driving simulator (3 x 30 minutes)
- Other examinations (3 x 30 minutes)
- Cannabis use (1 x 15 minutes)

Design Frame II

Details on the study procedure:

 Self-assessment (10 minutes each)

 Driving course included various situations on rural roads (e.g., animals crossing the road) and in urban traffic (e.g., cars braking suddenly)



Place to fill out the questionnaire



Operating room



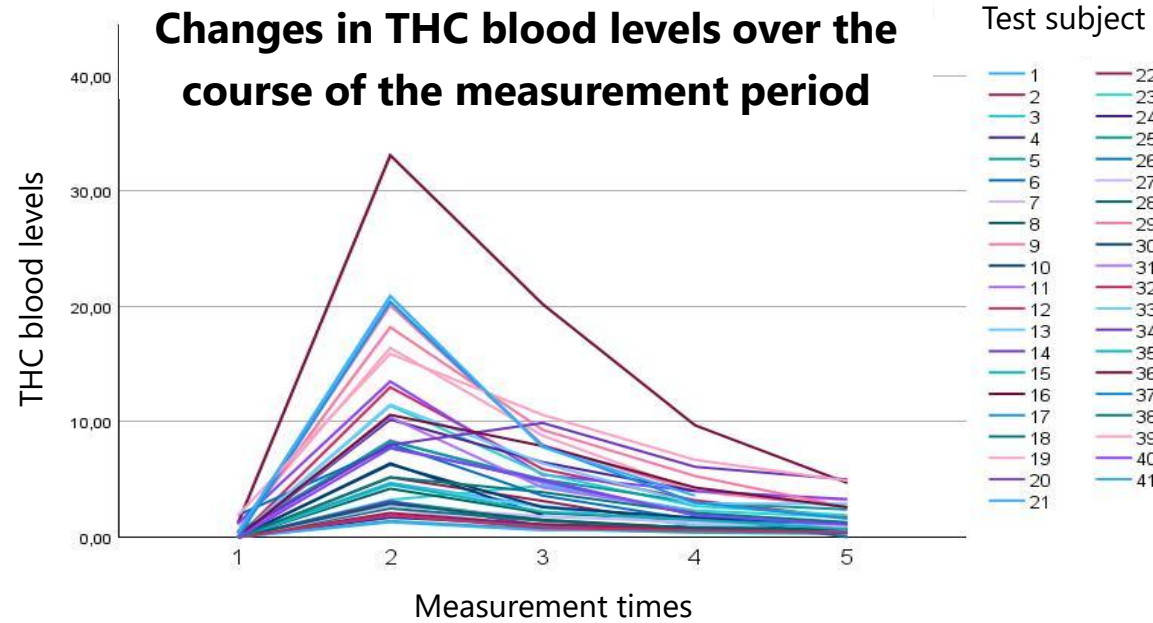
Driving simulator



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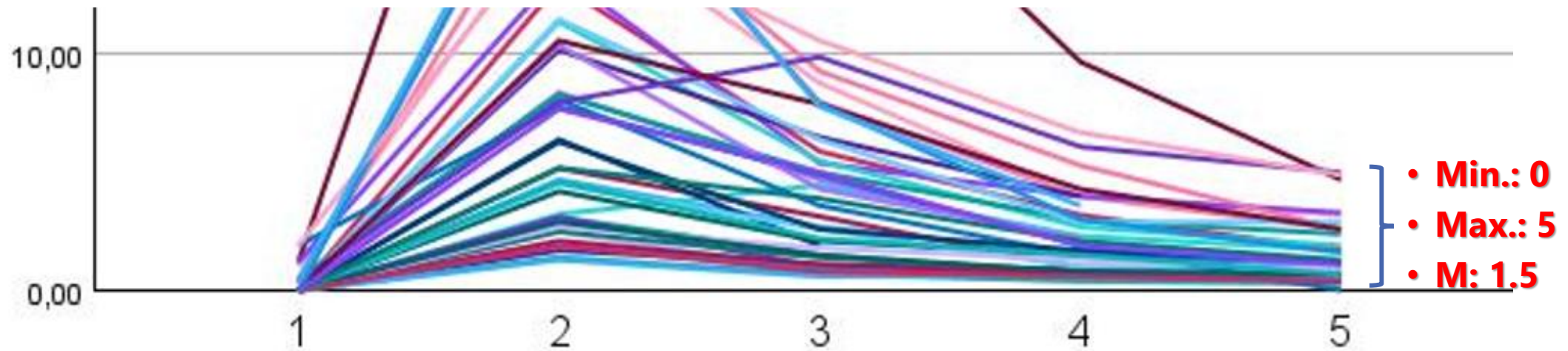
02 Self-assessment of intoxication

Results 1



Measurement times:

- 1: Before cannabis use
- 2: 30 minutes after cannabis use
- 3: 75 minutes after cannabis use
- 4: 120 minutes after cannabis use
- 5: 165 minutes after cannabis use

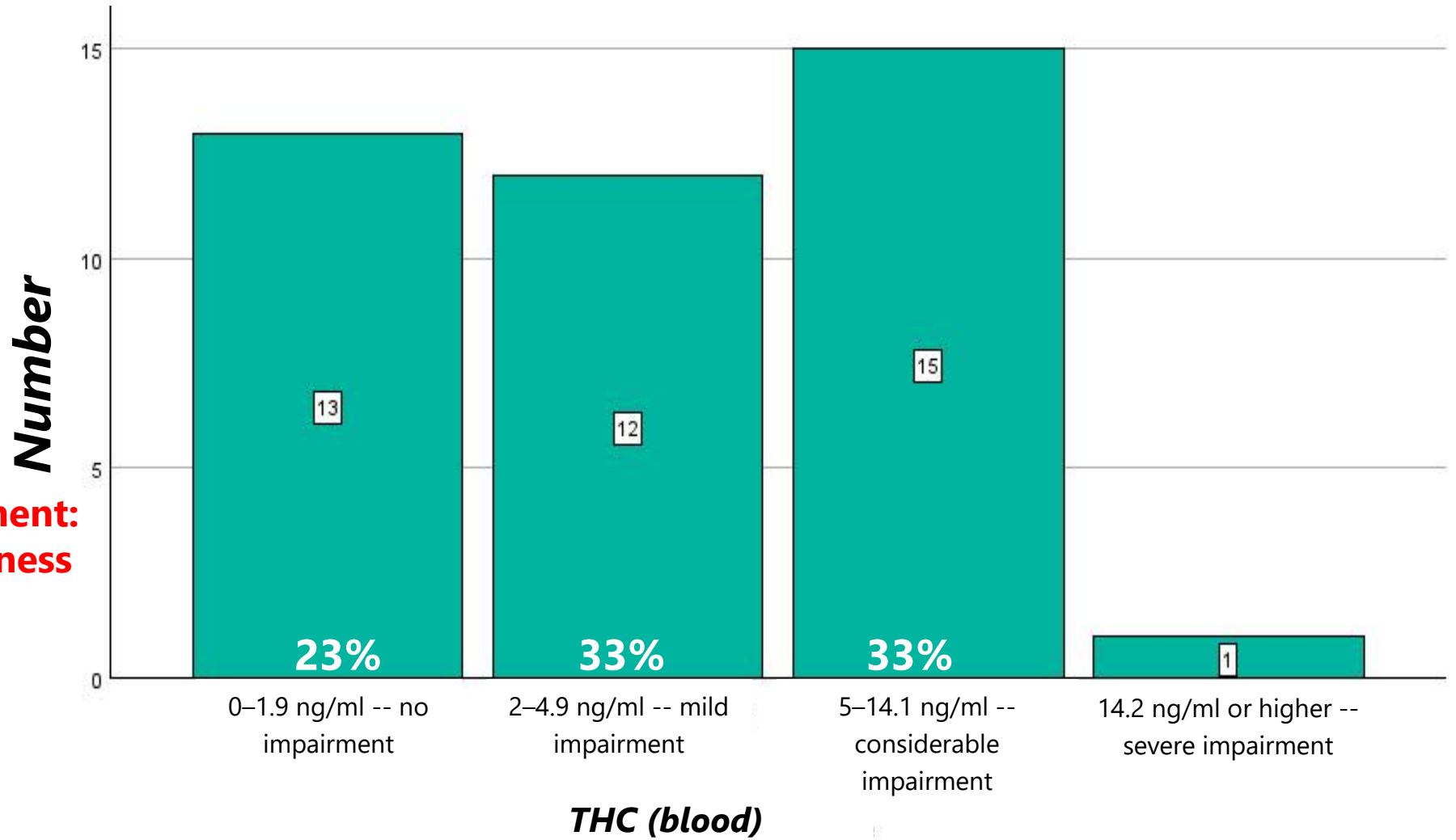


Results 2

Distribution of THC levels after the first driving session

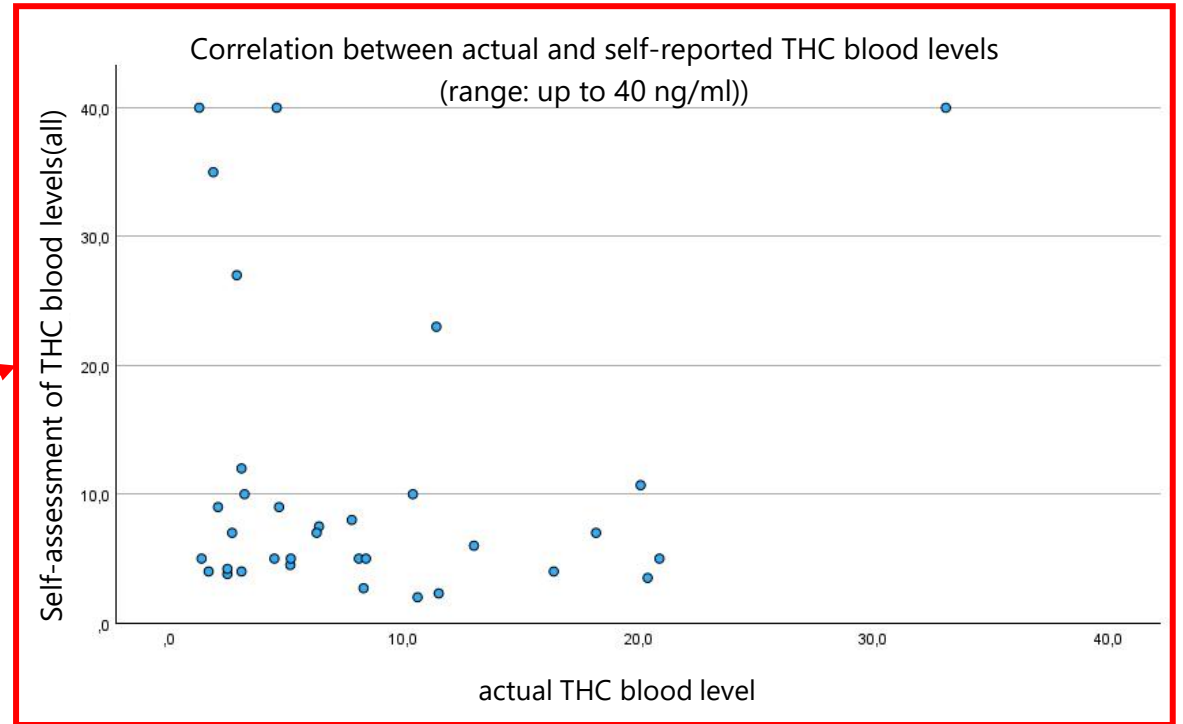
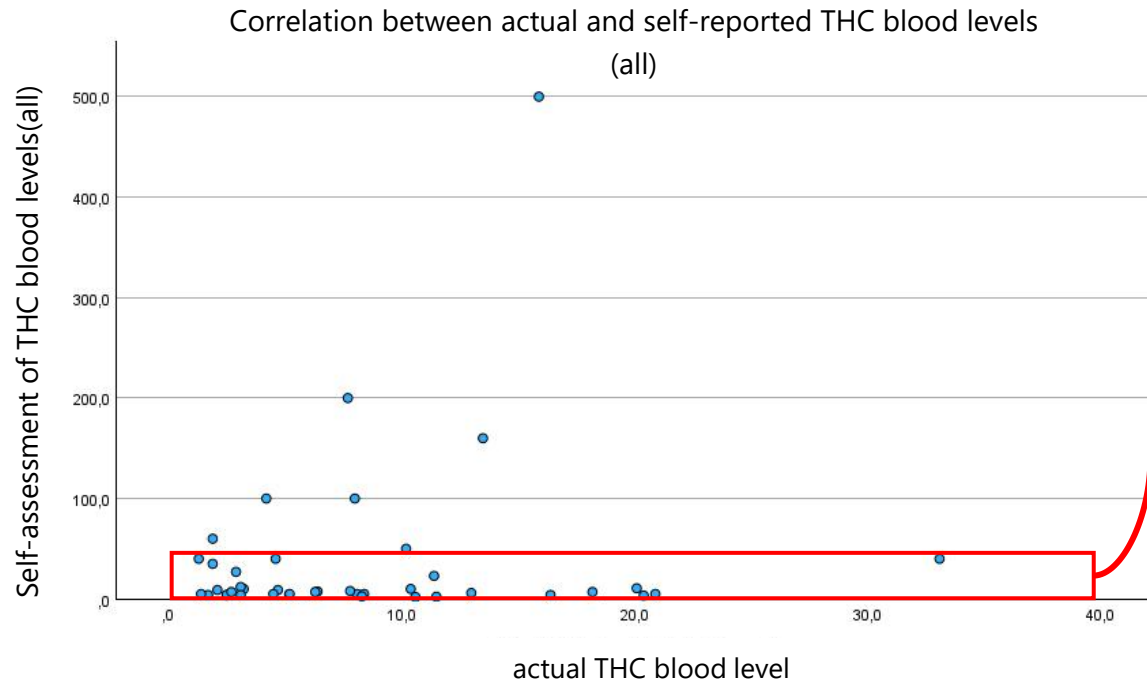


**Self-assessment:
Road Readiness
(yes):**



Results 3

Research question: Do objective and subjective THC levels correlate?



→ Data on actual and self-reported THC blood levels prior to the first driving session under the influence of cannabis

Correlation between actual and self-reported THC blood levels:

$r = .16$, $p = .32$; Differences between actual and self-reported THC levels: average deviation of +29.22 ng/ml.

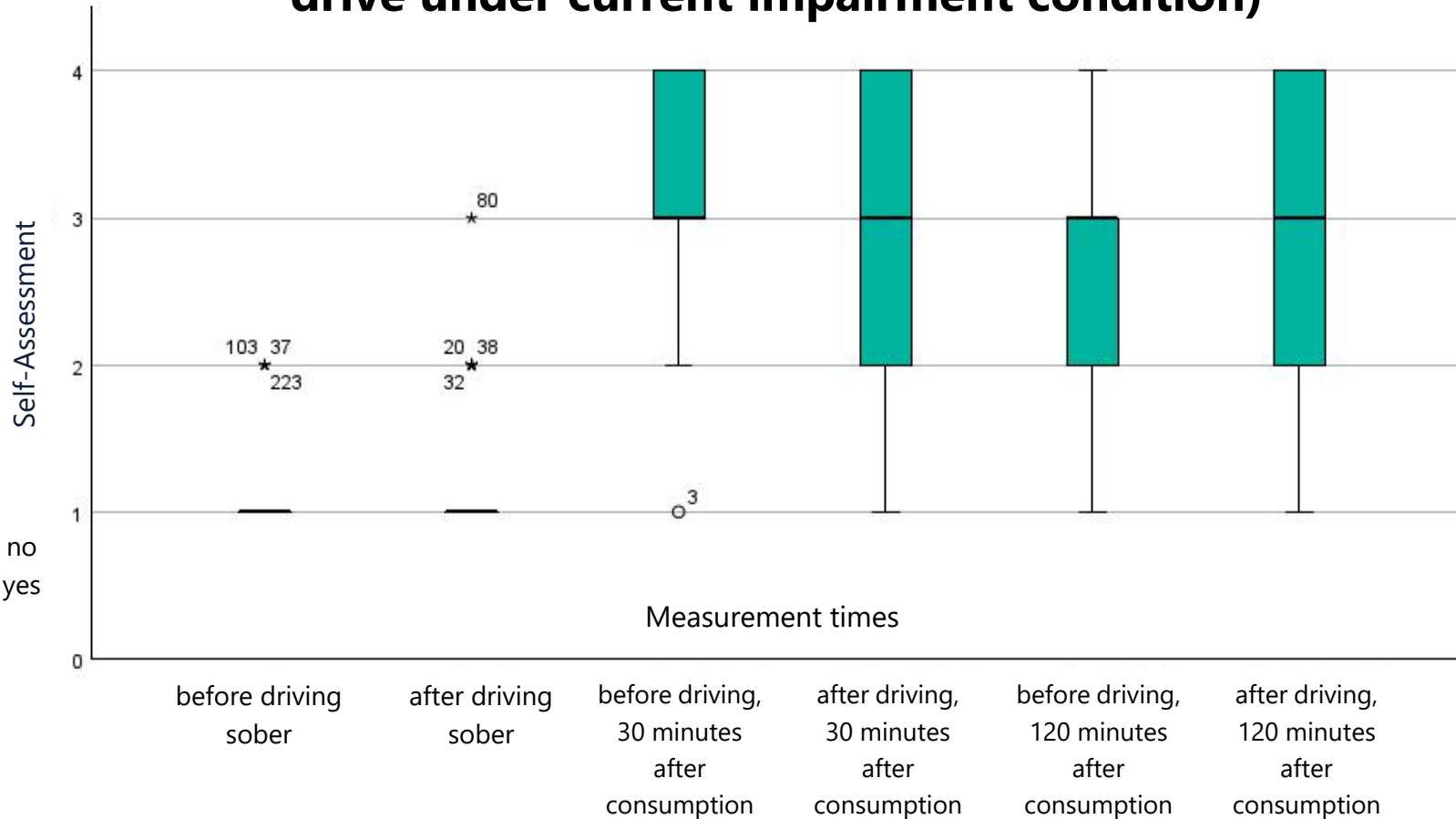


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03 Factors influencing subjective driving safety („Am I street Ready?“)

Results - 4

Self-assessment regarding „street readiness“ (would I drive under current impairment condition)



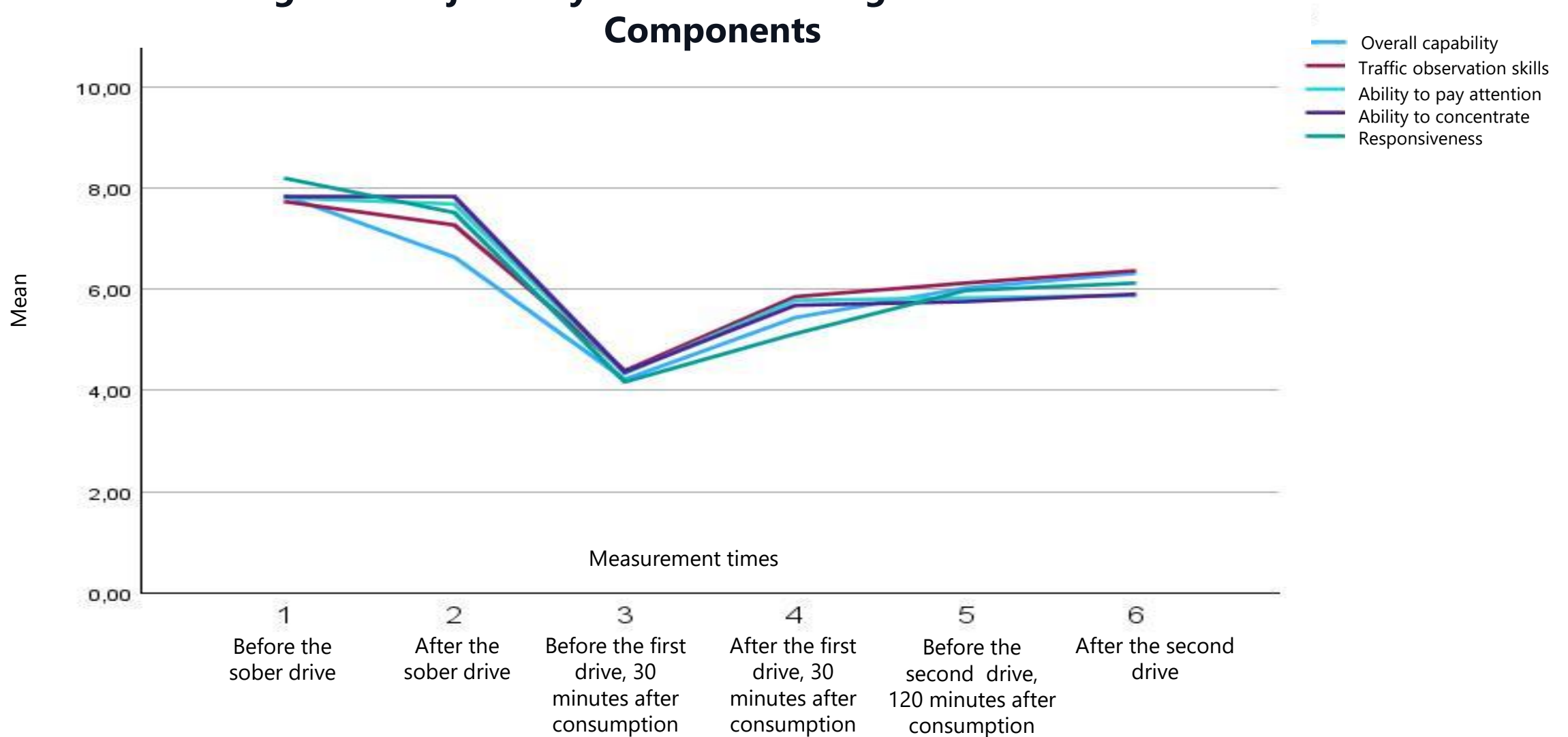
Differences between measurement time points:

-Measurements taken before and after each drive do not differ significantly from one another

-There are significant differences between all measurements except between measurements 4 and 6 (both taken after the two cannabis-induced drives)

Results - 5

Changes in Subjectively Assessed Driving Skills - Performance Components



BLOCK 1: Fixed Factors & Driving Experience

Before the first drive under the influence of cannabis

Age, Gender, Years of driving license held, Driving experience in KM, Subjective driving experience:

No Relevance for predicting driving ability (subjective rating)

BLOCK 2: History of Cannabis Use

Before the first drive under the influence of cannabis

Frequency of consumption, Age at first use, Self-rated cannabis tolerance, Number of times having driven under cannabis influence before:

No Relevance for predicting driving ability (subjective rating)

Research question: What factors predict subjective driving ability (self-assessment of driving safety)?

→ Driving ability = Self-assessment of whether one feels capable of driving a car in one's current condition



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BLOCK 3: Current driving ability	Before the first drive under the influence of cannabis		After the first drive under the influence of cannabis	
	Correlation with driving ability	Regression coefficient	Correlation with driving ability	Regression coefficient
Self-Assessment of Performance	0,58**	-0,04	0,65**	0,40*
Self-Assessment of Driving Ability	-0,74**	-0,34*	-0,68**	-0,23*
Self-assessment compared to others	0,37*	-0,11	0,30	-0,08
Self-Assessment Confidence	-0,47**	-0,09	-	-
		Significant change in R² for Block 3 (R²=0.63; p=0.004)		Significant change in R ² for Block 3 (R ² =0.62; p=0.002)

Research question: Predicting One's Driving Fitness

Results - 7

Research Question: What effect do serum THC levels and frequency of use (THC-carboxylic acid in hair) have on subjective driving ability (self-assessment of driving safety)?

Fixed effects	Coefficient	Significance
Constant term	3.721	$p < .001$
THC blood levels	-0.043	$p = .078$
Frequency of use	-0.275	$p = .018$
THC blood levels * Frequency of use	0.025	$p = .023$

THC blood levels before and after the first driving session **do NOT correlate** with subjective driving ability:

- Before driving: $r = -0.039$ ($p = 0.807$)
- After driving: $r = 0.034$ ($p = 0.834$)

Frequency of use is more important than the current THC blood level

Frequency of use moderates the relationship between blood THC blood levels and subjective self-assessment of driving ability

Subjective driving ability (self-assessment)

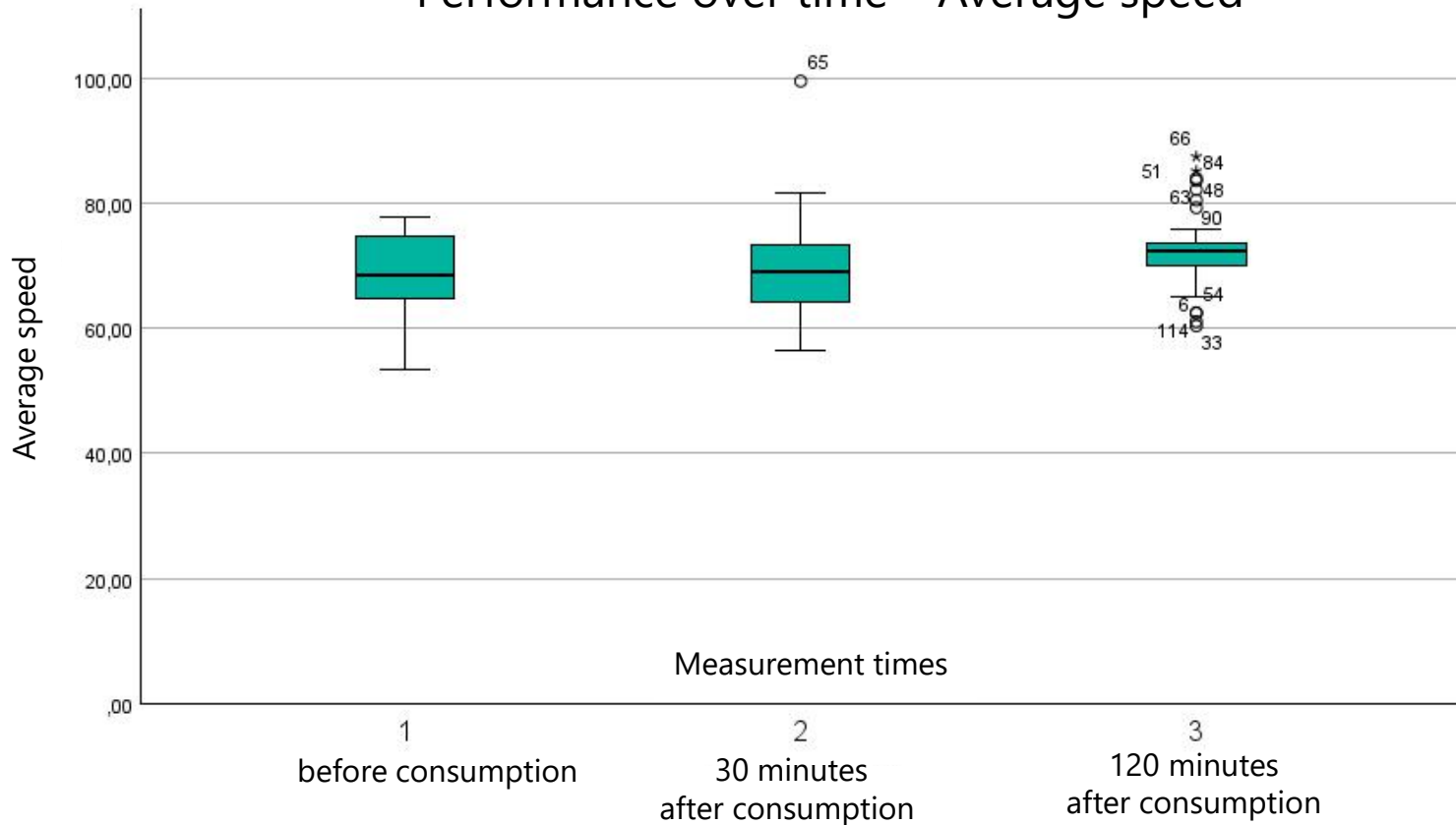


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04 Subjective and objective parameters of driving behavior

Results - 8

Performance over time – Average speed



Further details:

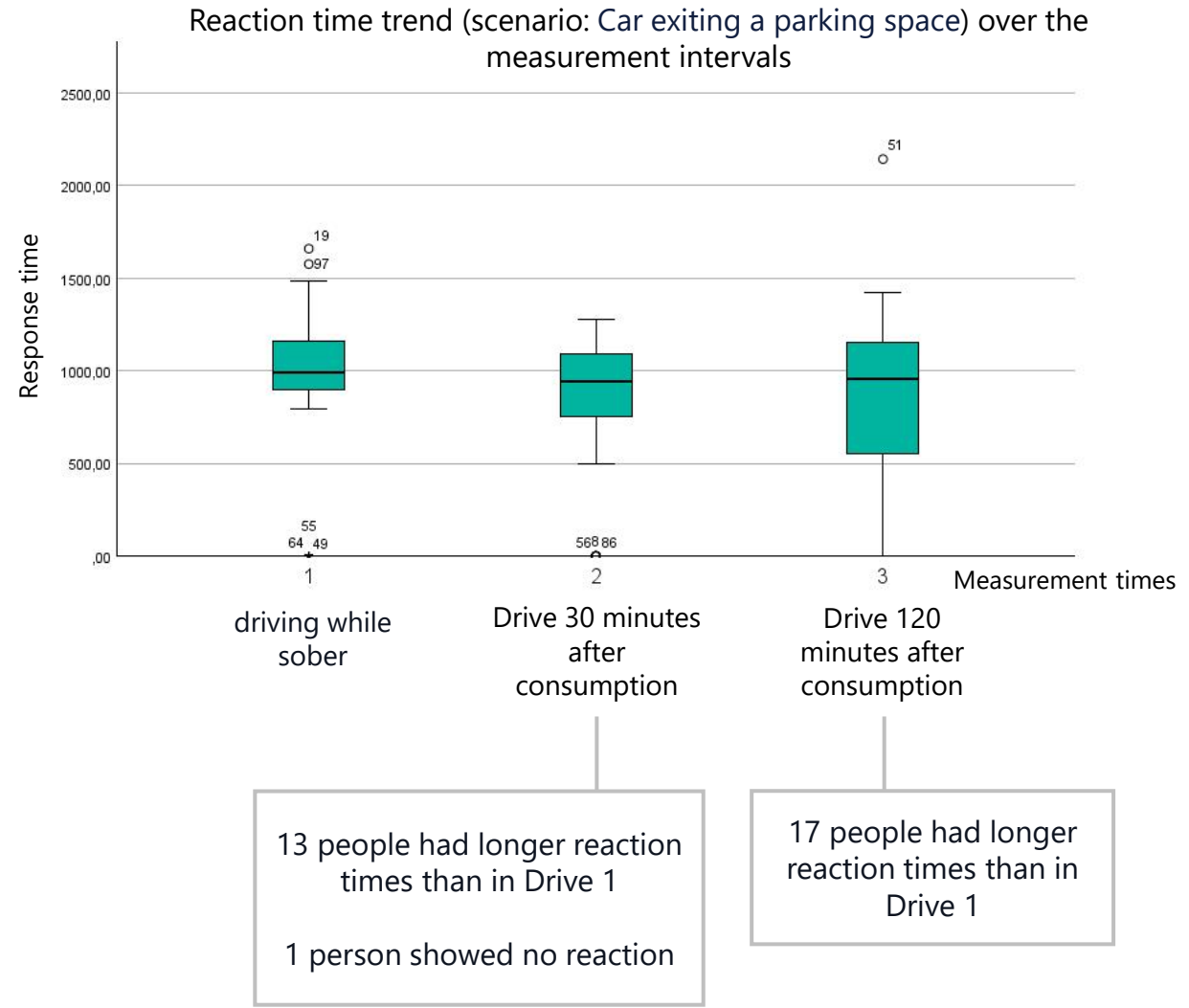
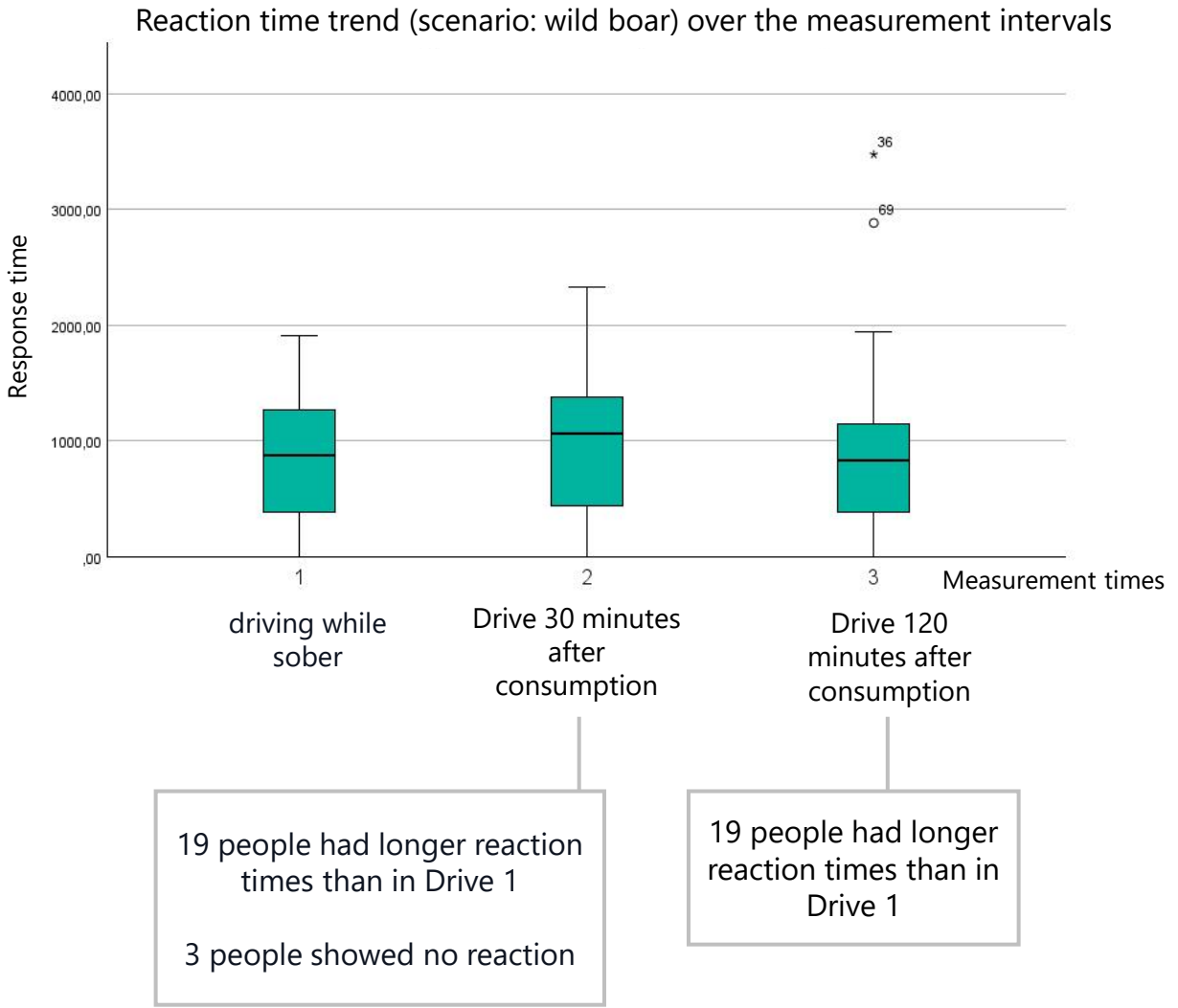
- Speed limit: 80 km/h
- Drive 1:
 - 0 people exceeding 80 km/h
- Drive 2:
 - 3 people exceeding 80 km/h
 - 20 people drive slower than in Run 1
- Drive 3:
 - 6 people exceeding 80 km/h
 - 12 people are driving slower than in Run 1
- Very large differences between participants

Road characteristic :

- 800 m long country road in the forest
- Narrow road without a middle strip
- Several oncoming vehicles
- No crossroads, braking, or reaction maneuvers

Results - 9

Performance Trends – Reaction Times in Two Different Traffic Situations



Do subjective changes in self-assessment from sober to intoxicated correspond with objective changes in performance measures?

Comparison of actual and self-reported speed compliance between the first/second measurement run under cannabis influence versus driving sober in %



First Drive		Self-reported speed		
Actual speed		21.95	29.27	51.22
		2.44	46.24	48.78
		24.39	75.61	100

Second Drive		Self-reported speed		
Actual speed		19.51	51.22	70.73
		4.88	24.39	29.27
		24.39	75.61	100

Comparison of actual and self-assessed reaction time (**animal crossing**) between the first/second measurement run under cannabis influence versus driving sober in %



First Drive		Self-assessed responsiveness		
Actual responsiveness		2.63	47.37	50.00
		10.53	39.47	50.00
		13.16	86.86	100

Second Drive		Self-assessed responsiveness		
Actual responsiveness		9.76	43.90	53.66
		9.76	36.58	46.34
		19.52	80.48	100

Comparison of actual and self-assessed reaction time (**Sudden pulling out of a parking space**) between the first/second measurement run under cannabis influence versus driving sober in %



First Drive		Self-assessed responsiveness		
Actual responsiveness		5.00	57.50	62.50
		7.50	30.00	37.50
		12.50	87.50	100

Second Drive		Self-assessed responsiveness		
Actual responsiveness		14.63	43.90	58.53
		4.88	36.59	41.47
		19.51	80.49	100



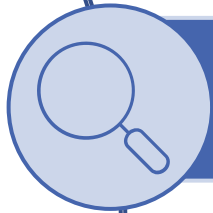
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05 Conclusion

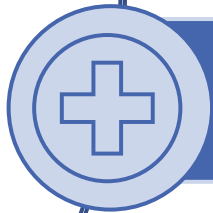
Summary



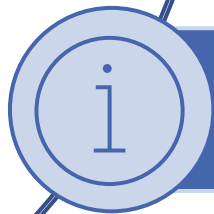
Self-assessment of the THC level in blood serum and its comparison with legal limit is complicated and hampered



We observe a disconnection between intoxication and the perception of impairment and driving ability = Hysteresis-Effect



Characteristics of driving behavior resulting from intoxication are distorted by average values; Participants' self-assessment of their driving performance was only partially accurate. It depends on factors related to subjective driving competence and tolerance



Criticism and Limitations of the study



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Suggestions?



Questions



Thank you!





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