

# REPORTER

The Newsletter of The International Council on Alcohol, Drugs & Traffic Safety

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[WWW.ICADTS.ORG](http://WWW.ICADTS.ORG)

The International Council on Alcohol, Drugs & Traffic Safety (ICADTS) is an independent nonprofit body whose only goal is to reduce mortality and morbidity brought about by misuse of alcohol and drugs by operators of vehicles in all modes of transportation.



## LETTER FROM THE ICADTS PRESIDENT

Dear ICADTS Members,

Our up-coming conference is the most important time and opportunity in the ICADTS tri-annual calendar. It enables our scientists and policy makers to meet and discuss the latest findings and developments in the field with relevant experts and emerging scholars and importantly to recognize our experts in the field.

As members specializing in the alcohol, other drugs and traffic field it sometimes seems as though it is the only issue in the road safety field. However, in reality it is a specialist area even at CARRS-Q the big road safety research centre that is sponsoring the T2013 conference. This is why attending our conference is so important. It provides a unique opportunity for us to meet each other and to listen and learn from colleagues of like minds, interests and expertise. As an example in this edition some of the newer areas that have been attracting research and policy interest that will be presented at T2013 are raised.

Papers will be presented examining relevant issues of road safety in a very wide variety of countries. These include but are not limited to South America, China and Japan as well as drawing on the ongoing strength and involvement of our European, North American and Australian and New Zealand members. The location of T2013 in Brisbane has the additional geographical value in that it has attracted a strong representation from the relevant community of scholars in the southern hemisphere.

We do hope that as many of you as possible will be able to join your Council at T2013 and look forward very much to meeting with you.

Mary Sheehan AO

President ■



## DESIGNER DRUGS: FEATURED TOPIC AT T2013

Designer drugs are not captured in most current workplace screening programs, yet they may present the new face of drug abuse and an increasing workplace safety issue. T2013 Conference Chair and Centre for Accident Research and Road Safety – Queensland (CARRS-Q) Director Professor Barry Watson—said “many organizations already have alcohol and other drug screening programs that test employees’ urine and oral fluid to evaluate whether they can safely perform at work.” Yet new designer drugs are arriving at an unprecedented rate and are much more difficult to detect, presenting a constant challenge for drug-monitoring programs.

“Despite illegal blood alcohol concentration limits being in place for over 40 years and the dangers of drugged driving becoming increasingly recognized, impaired driving remains one of the major causes of death and injury on our roads and in our workplaces. Being a step ahead in the detection of impairing drugs is crucial for workplace health and safety programs and will be the topic of a special session at the T2013 international conference in August,” Professor Watson said.

T2013: The 20th International Council on Alcohol, Drugs and Traffic Safety Conference will be held from 25-28 August at the Brisbane Convention and Exhibition Centre and will bring together more than 400 delegates from around Australia and overseas, drawn from the areas of public health and safety, traffic and transport psychology, public health, law, medicine, economics, law enforcement, public policy, education, pharmacology, toxicology, forensic science, human factors, and alcohol intervention and rehabilitation.

The Designer Drugs Session, to be held in conjunction with the conference, will profile synthetic cannabinoids as the new face of drug abuse, investigate the epidemiological background on the latest new drugs in Europe, present case studies on driver intoxication, and unveil new ways for screening and confirmation of the presence of these new drugs in drugged drivers.

Session presenters will include:

- Marilyn A. Huestis, PhD—Chief, Chemistry and Drug Metabolism, Intramural Research Program, National Institute on Drug Abuse, National Institutes of Health, USA and Chair of the ICADTS Illicit Drugs and Driving Workgroup;
- Steven W. Gust, PhD—Director, International Program, National Institute on Drug Abuse, USA; and
- Barry Logan, PhD—President, American Academy of Forensic Sciences

The T2013 Conference will provide an update on worldwide developments in impaired driving, key geographic regions of emerging issues, and at-risk populations by international keynote speakers including:

- Pablo Martinez Carignano, Road Safety General Director of the Buenos Aires City Government;
- Dr Leilei Duan, Director of the Injury Prevention Division, National Centre for Chronic and Noncommunicable Disease Control and Prevention, China CDC;
- Dr Kazuko Okamura, Senior Researcher, National Research Institute of Police Science, Japan; and
- Dr Ralph Hingson, ICADTS Past President; and
- Dr Wolf-Rudiger Nickel, ICADTS Immediate Past President.

Held triennially around the globe, the ICADTS Conference has achieved a long-standing and highly regarded reputation as the leading international meeting in the field of alcohol, drugs and traffic safety.

The full scientific program will be released on the conference Web site [www.t2013.com](http://www.t2013.com) later this month. Online registration is now open.

The Australasian Road Safety Research, Policing and Education Conference ([www.rsrpe2013.com.au](http://www.rsrpe2013.com.au)), one of the most important road safety conferences in Australasia, will immediately follow T2013 in the same Brisbane venue from 28-30 August 2013.

“The consecutive timing of the forums will make an important contribution to the UN Decade of Action for Road Safety and present exciting professional development opportunities for researchers, practitioners and policy-makers,” Professor Watson said. ■



## WORKING GROUP MEETING IN BRISBANE

An ICADTS Interlock Working/Expert Group Meeting is scheduled from 2:30 pm to 4:30 pm on Sunday, 25 August 2013, at the main Brisbane Conference site. All conference attendees who are interested in interlock topics are welcome to attend. The agenda is still under development; if anyone would like to propose a discussion topic, please send a note to Paul Marques (marques@pire.org) before mid-August. At the meeting, the final version of our multinational interlock program compilation will be distributed and/or made available on the Internet. The final document reflects contributions from colleagues in many nations that were provided over the past 3 years. ■

## U.S. NATIONAL TRANSPORTATION SAFETY BOARD ISSUES IMPAIRED DRIVING RECOMMENDATIONS

The U.S. National Transportation Safety Board (NTSB) recently issued a report describing the scope of the impaired driving problem and summarized progress that has been made and the effectiveness of current and emerging alcohol-impaired driving countermeasures. It issued recommendations regarding new approaches and actions needed to reduce and ultimately eliminate alcohol-impaired driving.

The recommendations in this report represent the culmination of a year-long NTSB effort focused on the problem of substance-impaired driving, including the 2012 forum, "Reaching Zero: Actions to Eliminate Substance-Impaired Driving."

Specifically, the report makes recommendations to the states in the following safety issue areas:

- Reducing the per se blood alcohol concentration (BAC) limit for all drivers from the current .08 to .05, which is the limit in many European and other countries;
- Conducting high-visibility enforcement of impaired driving laws and incorporating passive alcohol sensing technology into enforcement efforts;
- Expanding the use of in-vehicle devices to prevent operation by an impaired driver;
- Using driving while intoxicated (DWI) courts and other programs to reduce recidivism by repeat DWI offenders;
- Establishing measurable goals for reducing impaired driving and tracking progress toward those goals.

On the federal side, the report recommends that the National Highway Traffic Safety Administration (NHTSA) support state efforts by seeking authority to award incentive grants to states for establishing per se BAC limits of 0.05 or lower and by establishing best practices for alcohol ignition interlock programs and creating incentives to encourage states to adopt the best practices. It also recommends that NHTSA develop and disseminate to states best practices for DWI courts.

The recommendation regarding lowering the BAC limit has generated considerable discussion and controversy despite the positive experience of countries that did so many years ago.

To view the complete report, go to: <http://www.nts.gov/doclib/reports/2013/SR1301.pdf>. ■



Reaching Zero: Actions to Eliminate  
Alcohol-Impaired Driving



Safety Report  
NTSB/SR-1301  
PB2013-106566



# STUDY OF SWEDISH PROGRAM FOR DRUNK-DRIVING OFFENDERS

A Swedish program, called SMADIT, has recently been evaluated. This program allows the police to offer suspected drunk drivers contact with social services or dependency care and treatment services. A recent report summarizes the results of interviews with 14 suspected alcohol-drunk drivers about their perceptions and experience of the SMADIT method. The results show that the drunk-driving incident and its consequences have been a turning point in the suspected drunk drivers' lives. The report suggests ways in which the program could be improved. To view the full report, in Swedish with an abstract in English, go to

<http://www.vti.se/sv/publikationer/smadit-ur-den-misstankte-rattfylleristens-perspektiv-en-intervjustudie/>. ■

# IMPAIRED LEGISLATION: ANALYSING POSSIBLE AUSTRALIAN REFORMS TO CANADA'S IMPAIRED DRIVING LAWS

Canadian legislation and enforcement measures have sought to create parallel approaches to tackling the similar problems of alcohol- and drug-impaired driving. However, a gap exists when targeting drug-impaired driving: the drivers' licenses of drug-impaired drivers cannot be immediately suspended at the roadside. An upcoming article examines the approach undertaken by the State of Victoria, Australia, to drug-impaired driving, analysing its experience with oral-fluid-testing devices. It also examines the drug evaluation process used by Canadian Drug Recognition Evaluator (DRE) police officers, which are based on divided-attention tests and recorded observations.

The purpose of the article was to determine if the methods used by Australia against drug-impaired drivers, namely the use of oral-fluid devices at the roadside to detect drug-impaired drivers, would be appropriate in Canada. Relevant research literature in the field of testing for impairment was reviewed, which included the manner of testing, the legal requirements, and the detection schemes used in Canada and Australia. Academic science journals were used to understand the scientific processes through which certain drugs affect the body. Other sources included the instruments and methods used to detect drug levels, either licit or illicit, in drivers, and the DRE and Drug Evaluation and Classification (DEC) manuals were reviewed.

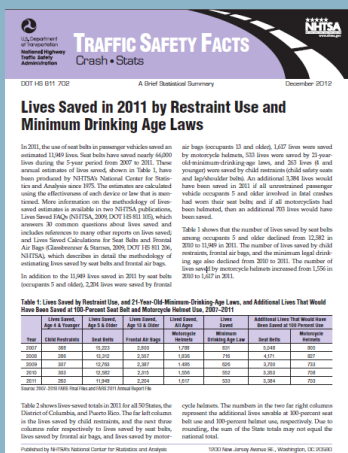
The article concludes that the use of oral-fluid devices would not be adequate for what is required in Ontario because oral fluid devices are not sufficiently sensitive to detect the numerous drug categories currently available and because they are insufficiently accurate. The article recommends that Canadian jurisdictions develop a method of detecting drug-impaired drivers at the roadside, based on the DRE evaluation, to allow for immediate roadside license suspensions of drug-impaired drivers.

The full article by Sarah Livermore will be published soon in the *Canadian Criminal Law Review*.

Sarah Livermore, B.A. (Hons.), MA, recently received her master's degree from Carleton University and is currently employed as a Research Associate at Westboro Associates in Ottawa. ■

# LIVES SAVED BY AGE 21 PURCHASE AGE IN UNITED STATES

A recent report by the U.S. National Highway Traffic Safety Administration estimates that 533 traffic fatalities were prevented in 2011 by the minimum purchase age of 21 in the United States. The estimated number of lives saved each year by these laws varies. In 2007, for example, the estimate was 831 lives saved. The full report, which includes estimates of lives saved by seatbelt use, can be viewed at <http://www.nrd.nhtsa.dot.gov/Pubs/811702.pdf>. ■





## RECENT NHTSA PUBLICATION – COUNTERMEASURES THAT WORK

**Countermeasures that Work** is a basic reference guide, which is designed to assist State Highway Safety Offices and others involved in the field of highway safety in selecting and implementing effective, evidence-based countermeasures to address traffic safety problem areas. The publication describes major strategies and countermeasures that are relevant and their use, effectiveness, costs, and implementation time. It also provides references to the most important research summaries and individual studies. This year's publication is the Seventh Edition of Countermeasures that Work. It contains chapters on a number of topics, including alcohol-impaired and drugged driving, seatbelt use, speeding, distracted driving, young drivers, and others.

The report is available at [www.nhtsa.gov/staticfiles/nti/pdf/811727.pdf](http://www.nhtsa.gov/staticfiles/nti/pdf/811727.pdf). ■

## ALCOHOL-MONITORING PROGRAM CURBS REPEAT ARRESTS FOR DUI

A South Dakota program that uses twice-daily breath tests to keep people sober after they have been charged with alcohol-related offenses has reduced the number of repeat arrests for driving under the influence (DUI). The program, called the 24/7 Sobriety Project, was studied by researchers from the RAND Corporation. They found that it resulted in a 12% decrease in repeat DUI arrests. It also reduced domestic violence arrests by 9%.

The 24/7 program began as a pilot project in 2005. It makes twice-daily breath tests a condition of bail for anyone rearrested on a DUI charge. A person who failed or skipped a breath test was immediately jailed for a short term, usually one or two days. The program was expanded to other counties and other offenses involving alcohol, such as assault and domestic violence. A 2007 law allows judges to order any defendant they believe has an alcohol problem into the program as a condition of bail or a suspended sentence. DUI offenders still predominate, making up 63% of the people who entered the program from 2005 to 2010. Participation is required for repeat DUI offenders who have lost their licenses to get permits to drive to and from work. Continuous alcohol-monitoring bracelets sometimes are used instead of breath testing.

Looking at arrest data through 2010, the study found a 12% reduction in repeat DUI arrests with the program, compared with patterns of arrests in counties without it. Domestic violence arrests were reduced by 9%. There was no significant effect on first-time DUI arrests.

The article, "Efficacy of frequent monitoring with swift, certain, and modest sanctions for violations: insights from South Dakota's 24/7 Sobriety Project" by B. Kilmer et al. is in the January 2013 issue of the *American Journal of Public Health*. ■

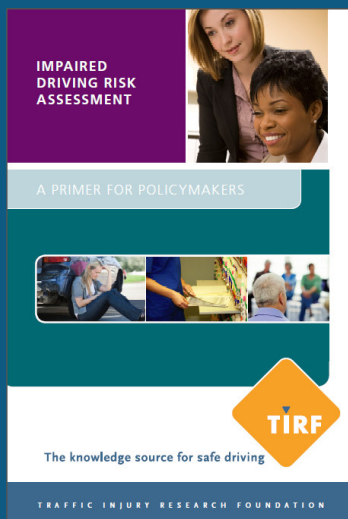
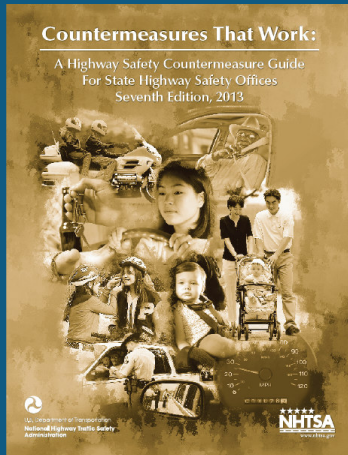
## IMPAIRED-DRIVING RISK ASSESSMENT: A PRIMER FOR POLICYMAKERS

A report recently published by the Traffic Injury Research Foundation provides an overview of risk assessment practices in Canada for impaired drivers. The report includes some recommendations to inform and/or guide future efforts to develop or improve best practices related to risk assessment in both systems.

Growing economic challenges mean that jurisdictions are seeking ways to use resources more effectively and efficiently to best manage drunk drivers to protect the public. The use of research-based risk assessment tools and practices is one way to attain this goal and a linchpin to making the best use of available resources. The report is based on focus groups involving remedial impaired-driver program practitioners and criminal justice professionals and a survey of justice professionals.

The report can be viewed at

[http://www.tirf.ca/publications/PDF\\_publications/CIHR\\_ImpairedDrivingRiskAssessment\\_PrimerPolicymakers\\_8.pdf](http://www.tirf.ca/publications/PDF_publications/CIHR_ImpairedDrivingRiskAssessment_PrimerPolicymakers_8.pdf). ■



## INCREASING IMPAIRED-DRIVING ENFORCEMENT VISIBILITY: SIX CASE STUDIES

The U.S. National Highway Traffic Safety Administration has released a report presenting six case studies of high-visibility enforcement (HVE) programs currently operating in the United States. Each case study includes discussion of the program's history, enforcement strategies, visibility elements, operation, resources, use of media, educational components, funding, support from political leaders and the community, barriers encountered, and strengths of the program. Some case studies include statistics on the HVE operations (e.g., number of checkpoints, number of officers per saturation patrol) and impaired-driving crashes, arrests, and/or convictions before and after the program began. The report is intended to provide information on impaired-driving HVE programs for regional, state, and local agencies considering incorporating HVE strategies into their efforts to curb impaired driving or to modify existing programs. The report can be viewed at <http://www.nhtsa.gov/staticfiles/nti/pdf/811716.pdf>. ■

## NHTSA ANNOUNCES DIGEST OF ALCOHOL-RELATED LAWS

The U.S. National Highway Traffic Safety Administration has announced an update of its electronic library: *Digests of Impaired Driving and Selected Beverage Control Laws*. In print since 1983, these resources contain comprehensive information on critical impaired-driving laws for all 50 states, the District of Columbia, and Puerto Rico. Such laws include Basis for a DWI Offense; Chemical Breath Tests for Alcohol Concentration; Adjudication of Driving While Intoxicated (DWI) Charges; Sanctions; Administrative Licensing Actions; Ignition Interlock; Sobriety Checkpoints; Other Criminal Actions Related to DWI; DWI Offenses and Commercial Motor Vehicles; Driving While License Suspended or Revoked Where the Basis Was a DWI Offense; Minimum Age Alcohol Laws; Dram Shop Laws and Related Actions; Open Container Laws; and others.

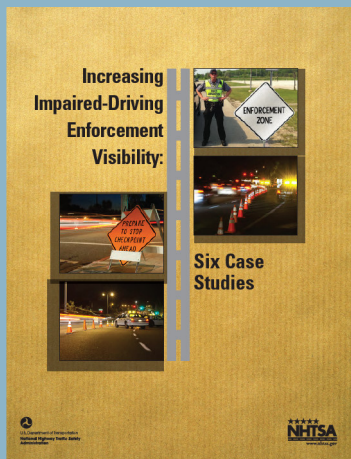
The Web site for the digest is:

<http://www.nhtsa.gov/Driving+Safety/Impaired+Driving/Digest+of+State+Alcohol+Highway+Safety+Related+Legislation>. ■

## ALCOHOL-CRASH PROBLEM IN CANADA: 2010

A report was recently released by the Canadian Council of Motor Transport Administrators Standing Committee on Road Safety Research and Policies and Transport Canada summarizing alcohol crash statistics in Canada for 2010. This report, prepared by the Traffic Injury Research Foundation (TIRF), describes the magnitude and characteristics of the alcohol-crash problem in Canada during 2010 as well as the trends. It includes data on alcohol in fatally injured drivers and pedestrians derived from the Fatality Database, developed and maintained by TIRF. Each year, TIRF compiles information from coroner and medical examiners files on the results of toxicological tests for alcohol in the blood of fatally injured drivers and pedestrians. This report also uses supplemental data obtained from police collision reports and coroner files to examine the number and percentage of people who died in alcohol-related crashes in Canada. Thus, it extends the focus beyond fatally injured drivers to include all persons killed in road crashes to provide a better indication of the magnitude and nature of the drinking-driving problem. The report also examines alcohol involvement in those crashes in which someone was seriously injured but not killed. The full report can be viewed at

[http://www.tirf.ca/publications/PDF\\_publications/2010\\_Alcohol\\_Crash\\_Problem\\_Report\\_4\\_FINAL.pdf](http://www.tirf.ca/publications/PDF_publications/2010_Alcohol_Crash_Problem_Report_4_FINAL.pdf). ■



### CCMTA Road Safety Report Series

#### ALCOHOL-CRASH PROBLEM IN CANADA: 2010

Prepared For

Canadian Council of Motor Transport Administrators  
Standing Committee on Road Safety Research and Policies

and

Transport Canada

By

Traffic Injury Research Foundation of Canada  
1715 Regent Street, Suite 200  
Ottawa, Ontario

March 2011

# WHY IS ROAD SAFETY IN THE UNITED STATES NOT ON PAR WITH SWEDEN, THE UNITED KINGDOM, AND THE NETHERLANDS?

UMTRI-2013-1 JANUARY 2013

WHY IS ROAD SAFETY IN THE U.S.  
NOT ON PAR WITH SWEDEN,  
THE U.K., AND THE NETHERLANDS?

LESSONS TO BE LEARNED

JUHA LUOMA  
MICHAEL SIVAK



This study compared road safety and related factors in the United States with those in Sweden, the United Kingdom, and the Netherlands, to identify actions most likely to produce casualty reductions in the United States. The reviewed topics were basic country statistics, road fatalities and various fatality rates, national road-safety strategies, and selected road-safety issues.

Fatality rates in the United States are markedly higher than those in Sweden, the United Kingdom, and the Netherlands. The average fatality rate in the three European countries is 42.5 per million population, whereas the rate in the United States is 123.8. The fatality rate per billion kilometers driven is 4.6 in the European countries as compared to 7.1 in the United States.

Assessments of the proportion of alcohol-related crashes lack reliable information. With that caveat and different legal limits in mind, country reports indicate that the proportion of road fatalities attributable to alcohol was 32% for the United States, 25% for the Netherlands, 20% for Sweden, and 17% for the United States.

The main differences that seem to account for these disparities in rates concerned structural and cultural factors (such as vehicle distance driven), and procedural factors (such as road-safety strategies and targets, alcohol-impaired driving, exceeding speed limits, and use of seat belts).

The main recommendations for improving road safety in the United States follow:

1. Lower states' BAC limits to 0.5 g/l and introduce effective random breath testing
2. Reexamine the current speed-limit policies and improve speed enforcement
3. Implement primary seat-belt-wearing laws in each state that would cover both front and rear occupants, and reward vehicle manufacturers for installation of advanced seat-belt reminders
4. Reconsider road-safety target setting so that the focus is on reducing fatalities and not on reducing fatality rate per distance driven
5. Consider new strategies to reduce vehicle distance driven.

The report was written by Juha Luoma and Michael Sivak at the University of Michigan Transportation Research Institute and can be viewed at

<http://deepblue.lib.umich.edu/bitstream/handle/2027.42/95704/102922.pdf?sequence=1>. ■

## CALL FOR PRESENTERS: TRB 2014 FULL-DAY WORKSHOP ON IGNITION INTERLOCKS

If you are interested in presenting your latest interlock research during a full-day interactive workshop (see description below) in conjunction with the annual TRB 2014 in Washington D.C., contact Eileen Taylor at PIRE ASAP but before August 1, 2013: ([taylor@pire.org](mailto:taylor@pire.org); 301- 755-2719).

*Note that these full-day workshops fill quickly, so presenters and attendees should register as soon as TRB registration is open.*

### Next Step Research Issues: Expanding and extending the risk reduction benefits of alcohol interlocks

**Abstract:** Jurisdictions are increasingly enacting laws that mandate impaired-driving offenders to install ignition interlocks, but laws vary widely and installation rates are low. This full-day workshop presents the latest research findings on the effectiveness of and challenges for interlock programs. Attendees will engage in highly interactive discussions and develop action items and next-step research recommendations to expand compliance and extend the effectiveness of interlocks after program completion.

**Workshop Organizers:** Robert Voas (Pacific Institute for Research and Evaluation); Paul Marques (Pacific Institute for Research and Evaluation); Anne McCartt (Insurance Institute for Highway Safety); and Doug Beirness (Canadian Center on Substance Abuse). ■



## UPCOMING EVENTS

### Grand Cypress, Florida, USA

June 22-26, 2013

Research Society on Alcoholism

36th Annual Scientific Meeting

<http://www.rsoa.org/2013meetindexAbs>.

### Brisbane, Queensland, Australia

August 25-28, 2013

T2013: 20<sup>th</sup> ICADTS Conference

For more information see

[www.t2013.com](http://www.t2013.com)

### Brisbane, Queensland, Australia

August 28-30, 2013

Australasian Road Safety

Research, Policing and Education

Conference

[www.rsrpe2013.com.au](http://www.rsrpe2013.com.au)

### Quebec City, QC, Canada

September 22-25, 2013

Association for the Advancement

of Automotive Medicine

57<sup>th</sup> Annual Conference

<http://www.aaam.org/>

### Heringsdorf, Germany

September 27-28, 2013

The German Society of Traffic

Psychology and the German

Society of Traffic Medicine (DGVP

and DGVM) 9th Joint Symposium

of DGVP & DGVM

[www.verkehr-symposium.de](http://www.verkehr-symposium.de)

### Washington, DC, USA

January 14-16, 2014

93rd Annual Meeting of the

Transportation Research Board

[www.trb.gov](http://www.trb.gov)



To view past issues of the  
REPORTER please visit:

<http://www.icadts.nl/reporter/reporter.html>

## TOOLKIT TO REDUCE IMPAIRED DRIVING IN LATINO COMMUNITIES

To assist states and community-based organizations address impaired driving in the Latino community, the U.S. National Highway Traffic Safety Administration has developed the *Toolkit to Reduce Impaired Driving in Latino Communities*. The toolkit provides information on how to organize a community impaired-driving program, partnerships needed and the role each can play in the effort, how to analyze crash data and create and implement a program based on the data, and how to evaluate the program. In addition, description of existing programs and samples of materials used to address the Latino population on the dangers of impaired driving are provided, along with different templates that can be modified and customized according to a program's needs. Materials include brochures, print ads, fotonovelas, and posters. The toolkit can be viewed at <http://www.nhtsa.gov/nhtsa/hispanictoolkit/index.htm>. ■

## ICADTS REMEMBERS TOM PARRY JONES (1935-2013)



Tom Parry Jones, BSc, PhD, OBE, passed away earlier this year after a long struggle with Parkinson's disease. Tom's first ICADTS meeting was in Freiburg, Germany, in 1969 and he attended every subsequent meeting until his illness began to develop about 15 years ago. Born in Anglesey, North Wales, Tom's first language was Welsh, and he was very proud of his Welsh heritage. He received a BSc degree in chemistry from Bangor University (North Wales) in 1958, followed by a PhD on the subject of chromium chemistry done at the University of Alberta in Canada in 1962. Upon returning to the United Kingdom, Tom was appointed in 1964 as a lecturer in the Department of Chemistry, University of Wales Institute of Science and Technology (UWIST) in Cardiff (now Cardiff University). A few years later he co-founded Lion Laboratories PLC, a company based in Cardiff (now Barry) that specialized in technology for breath-alcohol testing. Tom and his associates developed a chemical tub and bag device (the Alcolyser), which was sold to the public for self-testing of sobriety and to the police in some countries for testing drunken drivers. Collaboration between university and industry led to development of the first handheld electronic instrument for breath-alcohol testing in 1973. Known in Europe as the Alcolmeter and AlcoSensor when marketed in North America, this electronic device revolutionized the way that motorists were screened for alcohol influence. Although originally intended as a preliminary roadside screening test, the good accuracy and precision of the electrochemical (fuel-cell) sensor meant that it could also be used for evidential testing. Beyond any shadow of doubt, Tom Parry Jones was the driving force behind the research, development, and worldwide acceptance of the Alcolmeter range of breath analyzers. This contribution to traffic safety ranks alongside development of the Breathalyzer instrument by Robert Frank Borkenstein in the 1950s. ■

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