

REPORTER

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

ISSUE HIGHLIGHTS

Message from the ICADTS PresidentP.1
ICADTS Co-Sponsors International Symposium in BrazilP.3
AAAM Issues 2014 Call for AbstractsP.3
Was the Cheshire Cat Right in the End? Bridging the Gap between Technology and Legislation on DWI Developing CountriesP.4
TRB Issues Circular on Countermeasures to Address Impaired Driving OffendersP.6
TIRF Publishes Report on Trends among Fatally Injured Teen Drivers, 2000-2010P.6
US Alcohol-Related Fatalities Increased in 2012P.7
Alcohol-Related Crashes Cost the US \$125 BillionP.7
A Compendium of Proven Community-Based Prevention ProgramsP.7
Reports from ICADTS Stipend AwardeesP.8
Expert Working Groups: Get Involved with Important ICADTS ActivitiesP.10
Belated Recognition of the Southern HemisphereP.10

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.

MESSAGE FROM THE ICADTS PRESIDENT

Dear ICADTS Members,

This letter reports to you about our **T2013** conference held from the 25th to the 28th August 2013 in Brisbane Queensland, Australia. It provides me with the opportunity to tell you about some of the outcomes and highlights of our triennial international meeting.

The ICADTS conferences have achieved a long-standing and highly-regarded reputation as the leading international meeting in the field of alcohol, drugs and traffic safety and T2013 was the third ICADTS Conference to be held in Australia.

T2013 presented a global forum during which all those involved in road safety and injury prevention research and policy, particularly from the fields of drugs and alcohol, were able to meet with researchers, academics and professionals to discuss and present on the latest work being undertaken in the field. It brought together **303 delegates** from **39 countries** drawn from the areas of public health and safety, traffic and transport psychology, law, medicine, economics, law enforcement, public policy, education, pharmacology, toxicology, forensic science, human factors, alcohol intervention and rehabilitation. It was particularly pleasing that this conference attracted a large number of postgraduate students and academics from low- and middle-income countries.

Some idea of the exciting international outreach of the conference is given by the wide variety of backgrounds of the following outstanding keynote speakers:

- 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 Non-communicable Disease Control and Prevention, China CDC;
- Dr Kazuko Okamura, Senior Researcher, National Research Institute of Police Science, Japan;
- The Honourable Mr Justice Kofi Barnes, Judge of the Ontario Superior Court, Canada;
- Rob McInerney, Chief Executive Officer, international Road Assessment Programme (iRAP);
 and
- Dr Ralph Hingson, ICADTS Past President and Director of the Division of Epidemiology and Prevention research, NIAAA, USA.

The conference is the occasion when ICADTS presents formal awards to outstanding scholars who have made major contributions to our field. The T2013 awards follow.

Widmark Awards for Outstanding Contributions to the Field were given to:

Professor Jean Shope for her outstanding contribution to international leadership through advancing scholarship and knowledge in the field of young drivers. Particular recognition was given to her research on the development and evaluation of the Graduated License Program (GLP) and to international knowledge in the area of school based prevention and community safety education programs.

MESSAGE FROM THE ICADTS PRESIDENT (CONT.)

Dr Barry Logan for his contribution to the field through forensic science. The award recognised his major and ongoing achievements in the science of the effects of drugs on driving performance and to his development of excellence in programs for evaluation and special evidence in courts.

Mr James Fell for his significant leadership through extended research and policy contributions to key safety issues. His extended research commitment has including young driver safety, GLP's, lowering BAC levels in the USA and roadside licence suspensions.

Borkenstein Awards for recognition of individuals who have made outstanding contributions to international cooperation in alcohol and drug-related traffic safety programs were given to:

Dr Robert Voas for his distinguished contributions to the field during his 40-year career. The Award acknowledged his important and significant commitment to research and policy in the alcohol, drugs and driving field including national studies on BAC laws, zero tolerance, vehicle sanctions, interlocks, underage binge drinking and international legislative differences.

Mr Gerald Waters received an Award in recognition of his achievements as a dedicated advocate for road safety in New Zealand. It acknowledged his outstanding commitment to promoting evidence based policy changes in relation to drink driving. His consultative and international collaborations have been considered to be a driving force behind recent meaningful changes in drink driving legislation in New Zealand.

The Haddon Award to recognise meritorious service by non-governmental organisations was given to:

Professor Javier Alvarez who is a physician and Professor in the Department of Pharmacology, Valladolid University, Spain. He has made major contributions to research and related changes in European policy on alcohol, drugs and driving through involvement in many relevant policy and research bodies. These have included IMMORTAL, Alcoholock and DRUID and significant contributions to international policy including WHO-Europe.

Another major focus of the conference was our program of **Expert Working Groups**. These are led by distinguished scholars in a nominated key area and involve working as an informed community to develop guidelines for best practice and policy. This year the focus of a significant component of T2013 was on the Workshop areas and many of the leaders and members organised scientific sessions, lead panels and chaired relevant sessions. All council members and particularly our new members are strongly encouraged to consider joining one of the working groups. We are hoping to make the management of these groups more flexible for our international membership by taking advantage of the communication capabilities offered by the Internet. Members should keep an eye out for relevant material in future *Reporters*.

While talking about the working groups I would like to take this opportunity to give particular recognition to **Dr Paul Marques**. Dr Marques is an outstanding scholar who has managed and coordinated the working group program for a number of years. He has taken personal responsibility for the group considering research and policy on Alcohol Ignition Interlocks and co-chairs the group on Alcohol biomarkers. He has had a distinguished research career and his relevant experience and scholarship include national research into the effectiveness and user response to alcohol monitoring and control devices. With Bob Voas he drafted the first NHTSA Model Specifications for Ignition Interlock devices. He has published the first evidence of the DUI predictors that are embedded in the patterns of failed BAC tests found in the interlock recorder device. Collaborating with European colleagues and US laboratories he is evaluating whether evidence from biological markers of drinking is likely to help improve risk profiling of DUI offenders so that future government initiatives, including treatment, can be more thoughtfully targeted and scaled to lower the public risk posed by particular drink driving offenders.

He has now stepped down from this position and the Council is most grateful for his years of commitment to the Expert Working group initiative. This position will now be held by **Professor Gordon Smith** from the University of Maryland. I look forward to reporting on our emerging further initiatives in this area in the next *Reporter*.



MESSAGE FROM THE ICADTS PRESIDENT (CONT.)

I now realise that this letter looking back at T2013 is really an honour call for some of our members. I hope it gives new members an overview of the depth and breadth of expertise in the council.

Finally, it gives us all great pleasure to advise that T2016 will be held in Gramado, Brazil and this is covered more fully in the rest of this issue of *The Reporter*.

Mary Sheehan, ICADTS President ■



ICADTS CO-SPONSORS INTERNATIONAL SYMPOSIUM IN BRAZIL

The International Symposium on Drugs, Alcohol and Traffic (SIDAT) took place in October as a satellite event of the 18th Brazilian Congress of Toxicology (CB TOX). The conference, cosponsored by ICADTS, gathered a multidisciplinary group of 294 researchers, academics, managers, and professionals who work in traffic safety to discuss alcohol and other drugs and the impact on traffic safety. The conference organizer was the Center for Drug and Alcohol Research (CPAD) of the Hospital de Clinicas of Porto Alegre and Federal University of Rio Grande do Sul, through its Center of Studies and Research on Traffic and Alcohol (NEPTA).

This symposium – proposed to be the first of a series in the country – was designed to enhance the knowledge and networking among professionals in traffic safety with regard to public policies, prevention, supervision, and punishment of impaired driving offenders. The culmination of this effort will be the 2016 International Council on Alcohol, Drugs and Traffic Safety (ICADTS) Conference in Gramado, Rio Grande do Sul, Brazil on 2nd to 5th October 2016. T2016 will be organized under the presidency of Dr. Flavio Pechansky (CPAD) and vice-presidency of Drs Renata Limberger (Universidade Federal do Rio Grande do Sul [UFRGS]) and Tanara Sousa (CPAD).

Expert presenters at SIDAT included representatives from Norway and the United States facilitating interaction among professionals, researchers, professors, students, and technicians from several public and private institutions from Brazil and other Latin American countries. The goal of SIDAT is to promote the use of scientific evidence in decision-making regarding public policies as well as to facilitate collaboration between research centers and public institutions.

The conference was an auspicious beginning of the planning process for T2016. ICADTS representatives were given a tour of the proposed conference facilities in Gramado. The beauty and charm of the setting will provide a perfect environment for a lively conference in 2016.



AAAM ISSUES 2014 CALL FOR ABSTRACTS

The Association for the Advancement of Automotive Medicine (AAAM) has issued the call for abstracts for its 58th Annual Conference to take place on the 12th to 15th October 2014 at BMW Welt in Munich, Germany. Abstract submissions will be accepted until Monday 13 January, 2014. The AAAM is a scientific professional organization devoted entirely to traffic related injury control. Its multidisciplinary membership represents medicine, behavioural research, biomechanics, engineering, epidemiology, statistics, education, law, and public policy. The conference combines clinical, research, academic and administrative backgrounds. Visit the website at www.aaam.org for more information.

WAS THE CHESHIRE CAT RIGHT IN THE END? BRIDGING THE GAP BETWEEN TECHNOLOGY AND LEGISLATION ON DWI IN DEVELOPING COUNTRIES

Flavio Pechansky, MD, PhD and Veralice Gonçalves, BA

From the Nucleus for Studies and Research on Traffic and Alcohol (NEPTA) at the Center for Drug and Alcohol Studies – HCPAD/UFRGS

"Would you tell me, please, which way I ought to go from here?

That depends a good deal on where you want to get to, said the Cat.

I don't much care where - said Alice.

Then it doesn't matter which way you go, said the Cat.

- so long as I get somewhere, Alice added as an explanation."

Dialogue between Alice and the Cheshire Cat – from Lewis Carroll's Alice's Adventures in Wonderland, 1865

The lines above are quite suggestive. They are – among the many stories that create the fantastic world of Alice through the mind of Lewis Carroll – a good example of what a biased perception of "technology transfer" can generate. As another character of Carroll portrays – the white rabbit who is always running late – developing countries may be trying to bridge the gap of technology transfer in the drunk/drugged driving (DWI) field without a proper focus on where they want to go and which goals they want to reach. This is particularly true with regard to the appropriate generation of research evidence in the field, use of technology and parsimonious investment of public funds. For the purpose of this article, we will use Brazil as a case example, since we believe it exemplifies the stage where many developing countries – in particular in South America – are with regard to this issue.

Efforts to reduce deaths and injuries caused by traffic crashes related to DWI have been conducted by public and private agencies worldwide. They are targeted to defined actions based on systematically collected data in routine and specific research through field sobriety tests, blood, urine, or breath collection tests. In order to make this possible, technology and legislation need to be aligned and in similar stages of development so as to produce effective results. A good example of the appropriate use of technology: in countries like the United States, Canada, Australia and Norway, legislative change is concerned with adapting the laws to require the installation of interlock devices for repeat offenders and drivers that have been identified for the first time on a DWI offense. These laws are based on solid, repeated measures, in countries where there is a tradition of decision-making based on scientific evidence that has been collected for decades. Although a few advocate that the use of high technology such as interlocks should be considered in Brazil and other developing countries, this may not be our priority. We are still struggling with putting data together and understand data tendencies, as well as discussing different interpretations of the DWI laws - such as Brazil's "zero tolerance act" (June 2008, revised in December 2012). While developed countries have rounds of collected data – allowing them to test the most effective actions to reduce the rates of DWI deaths, developing countries still struggle to provide their police teams with the appropriate equipment and with minimum training required for the development of safety policies. However, we may end up running in different directions like Alice, since there is a distance between legislation, a culture of rules and their meaning, and its proper enforcement.

The extremely high mortality rates on our roads entitle us to create shortcuts and toughen our laws without proper systematic data collection. The gap is as large as the mortality rates from traffic crashes. For example, we ask the reader to compare traffic death rates per 100,000 population of countries such as Australia (6.1), Canada (6.8), the U.S. (11.4) and Norway (4.3), with figures provided by the World Health Organization for South American countries:

WAS THE CHESHIRE CAT RIGHT IN THE END? BRIDGING THE GAP BETWEEN TECHNOLOGY AND LEGISLATION ON DWI IN DEVELOPING COUNTRIES (CONT.)

Table 1. Road Traffic Death Rates in South America, 2010

Table 1: Notal Traine Beath Nates in South America, 2010			
Country	Estimated number of	Estimated road traffic	
	road traffic death	death rate	
		(per 100,000 population)	
Argentina	5,094	12.6	
Bolivia	1,910	19.2	
Brazil	43,869	22.5	
Chile	2,098	12.3	
Colombia	7,225	15.6	
Ecuador	3,911	27.0	
Guyana	210	27.8	
Paraguay	1,383	21.4	
Peru	4,622	15.9	
Suriname	103	19.6	
Uruguay	723	21.5	
Venezuela	10,791	37.2	

Source: World Health Organization. Global Health Observatory Data Repository. http://apps.who.int/gho/data/node.main.A997?lang=en, accessed in 10/29/2013

As the reader can see, our extremely high rates justify urgent measures such as the "no alcohol at all" law in Brazil. A legal shock, aimed at creating a new moment in the tragic history of deaths in Brazilian traffic, which hovers around 43,000 cases per year. The new law allows for the use of any measure to ascertain alcohol or drug use – breath tests, other fluids, a field sobriety test or a clinical examination. Police may not be properly trained to do so, however, and an evaluation provided by a police officer may be questioned in court by a good team of lawyers. In practice, there are still loopholes that prevent these measures from being used in court as full evidence against a driver who has used drugs or alcohol. There is still room for debate on whether requiring a driver to provide evidence at a sobriety checkpoint road block violates the constitutional rights of individuals. Perhaps the focus should not be solely on buying the latest technical device. Attention should also be paid to the wider picture of the legal framework.

Another important aspect is that Brazilian and South American DWI data are still diffuse and incomplete –but to the best of our knowledge fatalities are still on the rise. On top of that, lack of an integrated information system between health and enforcement allows for attitudes and policies which are generated in a similar way as Alice's conversation with the cat – they may go in different directions. There are, indeed, great efforts to obtain sources of funding for equipping the police to identify drivers who are positive for alcohol or drugs. These efforts are not to acquire the latest models and faster tools for collecting screening materials, but rather to provide basic instrumentation. As long as this traffic safety gap exists, other investments should continue to be made in the training of traffic officers and in development of public policies. In Brazil, in addition to these investments, the expansion of coverage of services for the rapid delivery of emergency services to injured crash victims and policies to strengthen law enforcement still depends on a large chunk of public funds, and full coverage is a problem in the country. The effectiveness of actions undertaken by the implementation of these policies is a matter of systems management, and is still a challenge for administrators, policymakers and the public in general. We still have work to do, since the distance between scientific evidence - provided by the few investigators of this







WAS THE CHESHIRE CAT RIGHT IN THE END? BRIDGING THE GAP BETWEEN TECHNOLOGY AND LEGISLATION ON DWI IN DEVELOPING COUNTRIES (CONT.)

field in Brazil – and political will – incensed more by ideology than hard data - makes us run like the white rabbit who is always late, but in a rush to get to nowhere. So, in the end, the Cheshire Cat might have been right.

If you want to learn and debate about solutions for South American and other developing countries, mark your calendar. The next ICADTS meeting will be held in Gramado, Brazil, in 2016. ■

TRB ISSUES CIRCULAR ON COUNTERMEASURES TO ADDRESS IMPAIRED DRIVING OFFENDERS

The Transportation Research Board (TRB) has issued Transportation Research Circular E-C174 providing an overview of the information presented and discussions held during an August 2011 symposium that explored the current state of knowledge about how best to deal with impaired driving offenders. Click below for the full report: http://www.trb.org/main/blurbs/169412.aspx

TIRF PUBLISHES REPORT ON TRENDS AMONG FATALLY INJURED TEEN DRIVERS, 2000-2010

In Canada, motor-vehicle collisions are the leading cause of death among persons younger than age 24. The Traffic Injury Research Foundation (TIRF) has published a fact sheet summarizing the characteristics of fatally injured teen drivers in Canada (aged 16-19) from 2000 to 2010. The percentage of fatally injured 16- to 19-year old drivers who have been drinking generally increased from 2000 to 2008, then decreased until 2010. The lowest percentage of fatally injured 16- to 19-year old drivers who had been drinking (33.1%) occurred in 2002. This figure rose to 47.0% in 2008 and then decreased to 36.6% in 2010. Among fatally injured 16- to 19-year old drivers, 23.6% tested positive for drugs in 2000. In 2003, 20.5% of drivers tested positive for drugs, increasing to 43.7% in 2006. This percentage decreased slightly to 39.2% in 2010. The drugs most commonly found during this period were cannabis, cocaine and amphetamines.

To see the full report, go to

http://www.tirf.ca/publications/PDF_publications/Trends_Among_Fatally_Injured_Teen_Drivers_7.pdf





US ALCOHOL-RELATED FATALITIES INCREASED IN 2012

While motor vehicle crash fatalities increased by 3.3% overall in 2012 in the United States (from 32,479 in 2011 to 33,561 in 2012), the number of people who died in impaired driving crashes (driver BAC>.08 g/dL) increased by 4.6% from 9,865 in 2011 to 10,322 in 2012. For the latest Fact Sheet, go to: http://www-nrd.nhtsa.dot.gov/Pubs/811856.pdf

ALCOHOL-RELATED CRASHES COST THE US \$125 BILLION

A report on the costs of alcohol-related crashes in the United States in 2010 was recently published in the *Annals of Advances in Automotive Medicine (AAAM)*. Alcohol-involved crashes cost the US society an estimated \$125 billion in 2010. That was 22.5% of the societal costs of all crashes that year. One in 788 trips taken by drivers with BACs exceeding .08 g/dL resulted in a crash while 1 in 1016 trips driven at BACs equal to or greater than .08 g/dL resulted in a DWI arrest. For the full paper go to: http://www.pire.org/documents/Miller_CostofID.pdf

A COMPENDIUM OF PROVEN COMMUNITY-BASED PREVENTION PROGRAMS

The Trust for America's Health (TFAH) and New York Academy of Medicine (NYAM) released *A Compendium of Proven Community-Based Prevention Programs*, which highlights 79 evidence-based disease and injury prevention programs that have saved lives and improved health. The Compendium notes that, since 2008, the number of effective community-based programs and interventions has grown exponentially and the report identifies specific programs that can create a healthier population. The Compendium includes examples of programs that improve health in a variety of ways, including reducing alcohol misuse and preventing injury.

In the category of violence and injury prevention, *The Compendium* includes Checkpoint Tennessee. Tennessee implemented an extensive statewide sobriety checkpoint program. The volume of checkpoints increased from about 15 in the preceding year to nearly 900 in the program year. The checkpoint activity was publicized extensively. The program resulted in a 20.4 % reduction in alcohol related crashes extending at least 21 months after conclusion of the formal program, preventing nine fatal alcohol-related crashes per month.

In the category of alcohol use, the compendium includes a study examining the effects of changes to Washington State's ignition interlock laws. In June 2004, the interlock order requirement extended to first-time offenders with blood alcohol concentrations (BACs) below 0.15%. Mandating interlock orders for all first DUI convictions was associated with reductions in recidivism, even with low interlock use rates, and reductions in crashes. Recidivism among first simple DUI offenders declined by an estimated 12 percent. Among all first-time offenders, it decreased by an estimated 11 percent. The 2004 law change was associated with an 8.3% reduction in single-vehicle late-night crash risk.

Access the full report here: http://healthyamericans.org/report/110/. ■

REPORTS FROM ICADTS STIPEND AWARDEES

The ICADTS Foundation awarded stipends to young scientists and scientists from low- and middle-income countries to attend T2013 in Brisbane, Australia. It was a great pleasure to welcome these colleagues to the meeting and we look forward to working with them in the future.

Following are brief statements from the awardees about their experiences at the conference.

Dr. Anup Ghimire, Nepal

It gives me immense pleasure to present myself as one of the **ICADTS T2013** stipend awardees from an underdeveloped country, Nepal. I am currently working as an Additional Professor in School of Public Health and Community Medicine, B. P. Koirala Institute of Health Sciences, Dharan, Nepal. I am involved not only in the field of teaching and learning activities but also in funded research and I am an advisor to other independent research undergoing in the institute. It's the only tertiary hospital located in the eastern part of Nepal. Besides that, it's a deemed University with Community Medicine as a major subjects for the undergraduates and postgraduate medical students.

This visit was a lifetime opportunity for a researcher like me. I am very keen to do further joint venture research if possible with researchers interested in the field of alcohol, drugs and traffic safety. Furthermore, thank you so much once again; I am looking to further participate in such conferences if possible in the near future. This opportunity has proved to be an international exposure for me and my institute. Without your consideration, my visit to your prestigious conference would have never been possible.

Gabriel Andreuccetti, B.Sc., M.Sc., Ph.D. Candidate, Brazil

It was an honor for me to be able to participate in my first ICADTS meeting in Brisbane, Australia. Thanks to the stipend award provided to young scientists from developing countries, I had the great opportunity to present my own work to all those involved in road safety research in an international and much broader scale. Moreover, by sharing my current work on drinking and driving issues in Brazil with such a diverse group of specialists concerned with impaired driving worldwide, I could also learn from their experiences how to improve the research on traffic safety methods in my locality. After all, I believe that the greatest advantage of putting together researchers, students, and professionals who work in our field is that we can increase the development of ideas that will eventually help reduce the unacceptable number of deaths and injuries in our roads. Another remarkable benefit of my participation at the 20th ICADTS meeting was certainly the fact that I could observe how developed countries have obtained great achievements in traffic safety over the last years. One of the lessons I learned from these experiences is that investing in research and evaluation of policies played a key role in preventing alcohol and drug impaired driving in developed nations; therefore low- and middle-income countries such as my own should not overlook this relevant factor when addressing the great challenge we have ahead in terms of reducing road traffic deaths. In conclusion, I am very glad for the opportunity to gain experience and participate in the discussion of the latest advances in traffic safety research with leading experts in our area. Furthermore, I am sure that participating in future ICADTS meetings will only give further support to the progress of my academic career and I would strongly encourage other young scientists from our field to do the same.

Ivana Di Leo, Canada

I must first begin by expressing my gratitude to ICADTS for granting me the Young Scientist Stipend. This was my first time not only presenting at an international conference, but also attending one. What an experience it was! From being in Australia for the first time, to meeting leading researchers in the field (many of whom left me feeling star struck), and attending presentations that were informative and enlightening. The international platform that ICADTS has cultivated, allowed me to listen to wonderful keynote speakers who shared their inspirational stories and experiences as well as their innovative research and findings. This ultimately led to my increased awareness and broadened perspective of international issues in road traffic safety.

REPORTS FROM ICADTS STIPEND AWARDEES (CONT.)

Ivana Di Leo, Canada (Cont.)

Whenever I attend road traffic safety conferences, I always feel very excited when I learn about new and interesting research, results, and their implications. I often find myself reflecting on how the research we dedicate so much of our time towards can be applied in the real world. How will this research impact specific road traffic safety regulations? Are the appropriate people who can implement such changes in attendance? The research we conduct informs laws, and in order for change to occur, these laws must be reinforced. I was encouraged to see that Queensland police were among the audience at T2013. As Dr Judy Fleiter stated, it is our moral obligation as researchers to help policy makers and law enforcers understand our findings. I think it is important that these individuals attend road traffic safety conferences to gain a better understanding of at-risk populations, behavioural patterns, and to learn which interventions are working and which are not.

We are now a quarter of the way through the Decade of Action for Road Safety. While certain countries have observed decreases in road traffic crashes and DWI involvement, others have observed either increases or no change. As researchers, we need to continue to influence public awareness and take every opportunity we can to talk about our research and ideas, not just to colleagues but also to everyone around us in order to make this Decade of Action effective.

I am excited to see where research and its implementation take us over the next three years. I am hopeful that we will observe decreased rates of DWI offending and alcohol- and drug-related road traffic crashes. I look forward to attending T2016 in Brazil!

Jinky Lu, The Philippines

I am very privileged to have been selected to participate in the ICADTS in Brisbane, Australia. It was such a wonderful, productive, and homey experience. It was wonderful because of the intellectual and practical experiences from the technical sessions combined with the beautiful sight of Brisbane city. It was productive because we, the participants and stakeholders for the prevention of alcohol, drugs and traffic accidents have shared the theoretical and methodological devices to embark on changing the road landscapes in our respective countries. We were also given the challenge to dig deeper and probe wider on how to make this endeavor multi-disciplinary and multi-sectoral. It was also a homey experience with what a perfect organization of the conference by the secretariat, and the camaraderie amongst academics and practitioners. It is like a one whole big community of people committed to road safety.

Road safety is indeed a human rights and social justice issue. Innocent lives are victimized by irresponsible motorists as a reality in many parts of the world. Road accidents represent one of the highest prevalences of mortality and disability in many countries like the Philippines. They are caused by many factors such as the use of drugs and alcohol, lack of legislation on road safety, insufficient enforcement of road-related laws, and/ or lack of recognition of the importance of building a powerful structure for road safety that should be institutionalized. Information dissemination can only go a certain way as it focuses merely on changing individual behaviour towards safety and healthful driving. This must be complemented by policies, laws and programs of government and related agencies for a holistic program on road safety, and to make it sustainable and implementable. This makes me now want to pursue a post-doctoral degree in road safety in Brisbane.

UPCOMING EVENTS

Washington, DC January 12-16, 2014 93rd Annual Meeting of the Transportation Research Board http://www.trb.org

Warsaw, Poland May 8-9, 2014 8th Fit to Drive Congress www.vdtuev.de

Vancouver, British Columbia, Canada June 1-4, 2014 Safer Roads; Healthier Communities 24th Canadian Multidisciplinary Road Safety Conference www.carsp.ca

Munich, Germany October 12-15, 2014 58th Annual Conference of the Association for the Advancement of Automotive Medicine www.aaam.org

Gramado, Brazil October 2-5, 2016 T2016 www.T2016.org



To view past issues of the REPORTER please visit: http://www.icadts.nl/reporter/reporter.html

EXPERT WORKING GROUPS: GET INVOLVED WITH IMPORTANT ICADTS ACTIVITIES

ICADTS sponsors Expert Working Groups on key topics in impaired driving. The findings of the groups are reported at ICADTS meetings and reports disseminated to the field. These Expert Working Groups provide major contributions to the field. We urge you to consider joining one or more of the groups. The current list of groups and contact people for the groups appears below.

Illegal Drugs and Driving

Marilyn Huestis (mheustis@nida.nih.gov), chair

Ignition Interlocks

Paul Marques (<u>marques@pire.org</u>), chair Bob Voas (<u>voas@pire.org</u>), co-chair

Alcohol Biomarkers

Christine Moore (cmoore@immunalysis.com), co-chair Paul Marques (marques@pire.org), co-chair

Prescribing Guidelines for Medicinal Drugs and Driving

J.J. de Gier (degiercs@worldaccess.nl), co-chair

J. Alvarez (alvarez@med.uva.es), co-chair

Standardization of Epidemiological Research on Alcohol, Drugs and Traffic Safety

Jim Fell (fell@pire.org), chair

Richard Compton (rcompton@nhtsa.dot.org), co-chair

Clinical Signs of Impairment for Other Drugs

C. Mercier-Guyon (cermtcmg@wanadoo.fr), chair

Young Drivers

Andy Murie, (amurie@madd.ca), chair

The newest group, formed at T2013 in Brisbane, will be focused on **alcohol/drug and road safety activities in lower- and middle-income countries**. This is a topic of growing interest for ICADTS and for the safety field in general. More information about this group, its subject matter, and leadership will be available soon. If you are interested in joining this group, contact Kathryn Stewart at stewart@pire.org.

We wish to recognize **J. Michael Walsh**, who stepped aside after his many years of service as Chair of ICADTS' Illegal Drugs and Driving Working Group. The Group is now capably chaired by **Marilyn Huestis** of NIDA (National Institute on Drug Abuse). We thank Mike for his many contributions to this area.

BELATED RECOGNITION OF THE SOUTHERN HEMISPHERE

The reader may note that this is the 25th year that *The Reporter* has been published. Each issue has been labeled Winter, Spring, Summer, or Fall. After all this time, it has been pointed out that this seasonal labeling is Northern Hemisphere-centric. The editor is mortified at not having noticed this before. Henceforth, editions of *The Reporter* will be labeled simply by quarters one through four. Our apologies to our valued colleagues in the Southern Hemisphere. ■

The **REPORTER** is published quarterly by ICADTS, with support from the U.S. National Highway Traffic Safety Administration. This publication is available free upon request. Contents may be reproduced with attribution.

Pacific Institute for Research and Evaluation 11720 Beltsville Drive, Suite 900 Calverton, MD 20705 Editor: Kathryn Stewart

Email: Stewart@pire.org