



REPORTER

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

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WWW.ICADTSINTERNATIONAL.COM

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 Council Members and Colleagues:

Plans are moving forward for T2016 in Gramado, Brazil, October 16 to 19. The call for abstracts is out and more details are emerging on travel, lodging, and possible side trips. Make sure to check out the conference website, www.t2016.org. This conference will be different from the preceding 20 organized by ICADTS—it will be our first in a developing country and the first to feature preconference workshops designed for participants who may be new to the field or who have not had the opportunity for extensive training in traffic safety and in impaired driving.

One of the key activities of every ICADTS conference is the meeting of the general membership of the organization. We only have this opportunity once every 3 years, and it is a good time to enhance member participation in the organization. An important item on the agenda for this meeting will be discussion of our newly drafted strategic plan. The ICADTS Executive Board and others have been busy over the last 2 years developing the areas in which we want to move the organization forward. Some of our proposed objectives include greater involvement in low- and middle-income countries, increasing and broadening membership, providing more opportunities for young researchers, and making the expertise of our members and the organization more available to the global road safety community. We have some ambitious goals and will be looking to members for further input on the plan and help to put it into action.

I hope to see you in Gramado.

Kathryn Stewart, ICADTS President ■

16 REASONS TO VISIT BRAZIL AND JOIN T2016

This year Brazil is hosting, in addition to the Olympic Games, the first ICADTS Conference in Latin America. The event will take place in Gramado at the Wish Serrano Resort and Convention Center from October 16 to 19, 2016. The Organizing Committee invites professionals, students, and authorities whose work focuses on drugs and traffic safety to visit the official website (www.t2016.org), complete the registration, and submit their abstracts.

The T2016 scientific program includes a 4-day schedule starting on Sunday with two preconference courses designed to discuss (1) training for police officers and enforcement personnel and (2) research, prevention, and policy in impaired driving. Speakers and trainers for these courses, as well as for many other sessions, are already confirmed, and we will include their biosketches in the next issue of the Reporter.

The main program begins on Monday, when morning sessions will cover drunk and drugged driving in developing countries. Partnerships, NGOs, and policy will have their moment on Tuesday and, finally, we will be focusing on illegal and new drugs on the last day of the scientific activities. As usual, simultaneous panel sessions and expert workgroup meetings will occur in the afternoons.

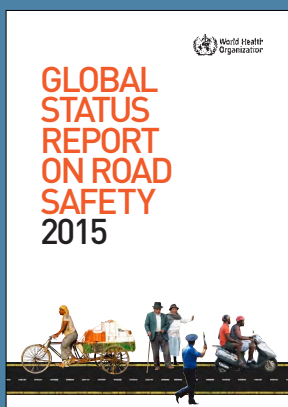
If you have already registered and sent your abstract, it is time to plan your trip to Brazil and enjoy our beautiful landscapes. October is a time of mild weather and temperature in the whole country. We understand the natural concerns about the Zika virus, but given the season and the region in the country, we assure you that this should not affect your trip.

We have selected 15 reasons—in addition to attending T2016—why you should come. Check it out!



1. **T2016** (Work comes first, and then comes the pleasure!)
2. **National Park of Aparados da Serra**
3. **Florianopolis Island**
4. **Iguazu Falls**
5. **Bonito**
6. **Pantanal**
7. **Amazon Rainforest**
8. **Brasília**
9. **Lençóis Maranhenses**
10. **Jericoacoara**
11. **Porto de Galinhas**
12. **Fernando de Noronha**
13. **Chapada Diamantina**
14. **Pelourinho**
15. **Ouro Preto**
16. **Rio de Janeiro**

Choose your destination and contact **TRIBECA TOURISM**, the official travel agency of T2016 and book your tour! Email reservas@tribecaturismo.com.br; Phone +55 51 3076-7002 ■



THIRD GLOBAL STATUS REPORT ON ROAD SAFETY RELEASED

In recognition of the scale of the health and development problem presented by traffic crashes, the United Nations General Assembly adopted a resolution in 2010 that led to the establishment of the Decade of Action for Road Safety (2011–2020). The resolution called on Member States to take the necessary steps to make their roads safer, and for the World Health Organization (WHO) to monitor the situation through its Global status report on road safety series. This report, the third in the series, serves as a tool to assess the impact of changes 3 years into the Decade of Action and to highlight where more action is needed.

This report shows that the number of road traffic deaths—1.25 million in 2013—has remained fairly constant since 2007, despite the increase in global motorization and population, and the predicted rise in deaths. This suggests that interventions to improve global road safety are preventing increases that otherwise would have occurred. The report highlights that the situation is worse in low-income countries, where rates are more than double those in high-income countries and there are a disproportionate number of deaths relative to the (lower) level of motorization. The African Region continues to have the highest road traffic death rates, while the lowest rates are in the European Region.

Regarding impaired driving, the report notes that only 34 countries, representing 2.1 billion people, have national drink driving laws with a BAC limit of less than or equal to 0.05 g/dl as well as lower limits of less than or equal to 0.02 g/dl for young and novice drivers. Twenty-one of these countries are in the European Region, suggesting the need to extend good practice globally. Nonetheless, progress has been made since



Dr. Richard Compton

2011, during which time eight countries (representing 287 million people) have brought their drink driving laws into line with best practices. Forty-six countries have set legal BAC limits for commercial drivers at less than or equal to 0.02 g/dl. Of the countries assessed for the report, 176 (98%) have a national drink driving law in place but only 134 of these are based on BAC limits.

To view the report, go to http://www.who.int/violence_injury_prevention/road_safety_status/2015/en/. ■

DR. RICHARD COMPTON RECEIVES 2015 ROBERT F. BORKENSTEIN AWARD

The Alcohol, Drugs and Impairment Division of the U.S. National Safety Council named Dr. Richard Compton as the recipient of the 2015 Robert F. Borkenstein Award. Dr. Compton, a long-time ICADTS member and current Treasurer, has worked for the National Highway Traffic Safety Administration (NHTSA) for more than 35 years. Dr. Compton has contributed to research on human factors and action programs to reduce injury and death caused by alcohol- and drug-impaired driving.

Dr. Compton first began his career at NHTSA as a Research Psychologist, and since 2002 has been the Director of the Office of Behavioral Safety Research. Throughout his career, he has authored and published more than 60 reports, papers, and articles on transportation safety. His alcohol- and drug-impaired driving research includes evaluations of new technologies and examinations of the effectiveness of sanctions, enforcement, public information, and education campaigns.

An international leader in the area of drugged driving, Dr. Compton has also examined the impairing effects of a range of legal and illegal drugs, from marijuana to antihistamines. He has advanced the frontiers of behavioral science with landmark studies such as the National Roadside Survey of Alcohol and Drug Use by Drivers, and with important breakthroughs for law enforcement such as the collection of oral fluid and blood samples at the roadside. ■

CHANGES IN IMPAIRED DRIVING LAWS IN EUROPE

Belgium and France: Following France, the Belgian government will introduce a 0.2 g/l blood alcohol limit for young and novice drivers and require alcohol interlocks for vehicles used in public transport.

France's lower BAC limit came into force in July 2015 and the country's alcohol interlock requirements were extended to all coaches in September 2015. Previously they were only required on coaches carrying school children. Urban buses are excluded from the measure.

The new Belgian measures are part of a 15-point road safety plan announced by transport minister Jacqueline Galant in response to worsening official figures that show road deaths increased by 4% in Belgium last year.

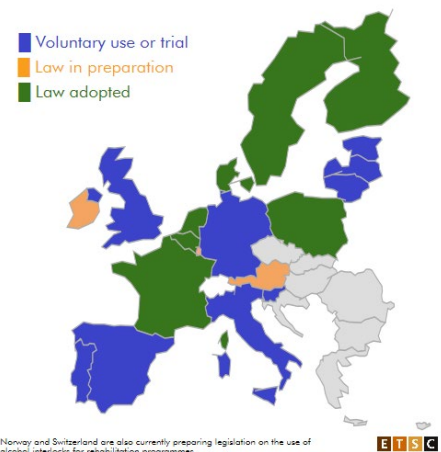
The United Kingdom: A new report for the UK's Parliamentary Advisory Council for Transport Safety (PACTS) and the RAC Foundation has found that deaths and serious injuries on English and Welsh roads would be prevented if drink drive limits were reduced following Scotland's reduction from 0.8 g/l to 0.5 last year.

The research by Professor Richard Allsop presents a "cautious" estimate that a similar move in England and Wales would lead to 25 fewer deaths and 95 fewer serious injuries. In Northern Ireland, a Road Traffic Amendment Bill is already working its way through the legislative process. It proposes a lowered general BAC limit of 0.5, and 0.2 for novice and some commercial drivers.

A survey by the UK's Royal Society for Public Health published earlier this month found that two thirds of motorists who admitted to drink driving would avoid driving after drinking altogether if the drink drive limit was reduced.

Alcohol Interlocks in the EU

December 2015



Norway and Switzerland are also currently preparing legislation on the use of alcohol interlocks for rehabilitation programmes.

ETSC

Source: The ETSC Drink Driving Monitor,
[http://us3.campaign-archive1.com/?u=30dc714251cd4cee96f2b85ca&id=0e3d72adca&e=\[UNIQID\]](http://us3.campaign-archive1.com/?u=30dc714251cd4cee96f2b85ca&id=0e3d72adca&e=[UNIQID]).

A year after a lower drink drive limit was introduced in Scotland, a Scottish Government survey found 82% of people agreed that drinking any alcohol before driving is unacceptable, while 12% disagreed.

Meanwhile, police figures show the number of drink driving offences in Scotland fell by 12.5% from December 2014 until August compared to the same period the previous year. This is a drop in the number of offences from 4,208 to 3,682. Source: The ETSC Drink Driving Monitor, [http://us3.campaign-archive1.com/?u=30dc714251cd4cee96f2b85ca&id=0e3d72adca&e=\[UNIQID\]](http://us3.campaign-archive1.com/?u=30dc714251cd4cee96f2b85ca&id=0e3d72adca&e=[UNIQID]). ■

DRIVING SAFETY AND BEHAVIOR INDEX IN THE UK

The IAM (Institute of Advanced Motorists)—the UK's largest independent road safety charity—recently released its report on the safety culture index in the UK. The prime objective of the report has been to study UK motorists' attitudes and behaviors concerning driving safety and to track any changes over time. This initial report will form a baseline for future annual surveys looking at potential car driving problems faced by current drivers compared with the past and their perception of threats to personal safety whilst driving. The study also provides insight into the relative acceptability of driver's behaviour versus their actual self-reported performance on the road. The report shows the key areas of road safety legislation and police enforcement priority that will command the highest levels of public support. Findings were based on a panel of 2,000 drivers in the UK.

Some of the key findings include the following:

- Driver distractions (text messaging and social media) are the two biggest issues drivers feel are a threat to their personal safety with 93% and 92% of drivers claiming it is a very or somewhat serious threat, followed by drink and drug driving at 90% and 89% respectively.
- A distinction needs to be made between illegal drugs and prescription—just over half of drivers believe people driving after using prescription drugs is a very or somewhat serious threat.
- Tackling drink driving is a significant concern—over three quarters support reducing the drink drive limit to that recently introduced in Scotland and 95% support a new law requiring repeat drink drive offenders to use a device that won't allow their car to start if they have been drinking (i.e., an alcohol ignition interlock device).
- More than half of respondents (56%) think drink and drug driving should be the first priority for traffic police—40% higher than the second of uninsured/unlicensed drivers.

To see the full report, go to <http://www.iam.org.uk/component/content/article?id=20713>. ■



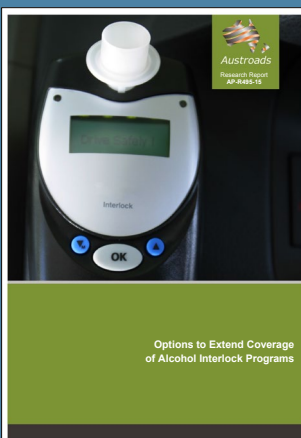
AUSTROADS PUBLICATION ON INTERLOCKS

Austroroads, the association of Australasian road transport and traffic agencies, recently published *Options to Extend Coverage of Alcohol Interlock Programs*. This report examines the evidence base and develops options to extend the coverage of alcohol interlock programs to a wider segment of drink driving offenders; other high-risk groups; corporate fleets; and, if appropriate, the broader driving population on a voluntary basis. The report assesses where additional road safety benefit could be gained over and above existing strategies to mitigate the frequency and consequences of drink driving.

The report also presents an overview of current Australasian drink driving legislation and alcohol interlock program requirements. It identifies gaps in current alcohol interlock programs in Australasia and overseas, identifies opportunities to expand alcohol interlock programs, and assesses whether evidence shows a need to expand their coverage given rates of alcohol-related crashes and blood alcohol concentration offences.

The report examines published evaluations of alcohol interlock programs to understand their effectiveness and to assist in making recommendations as to how current programs could be modified, expanded, or tailored to specific driver/rider groups. A review of current and future alcohol interlock technology builds an understanding of system specification, cost, and device calibration issues that impact driver and community acceptance. This review, as well as an examination into community attitudes to the expansion of alcohol interlock devices, helps to identify options to expand current alcohol interlock programs.

To download the full report, go to <https://www.onlinepublications.austroroads.com.au/items/AP-R495-15>. ■



APIS ANNOUNCES ANNUAL UPDATE OF ALCOHOL POLICY INFORMATION

The Alcohol Policy Information System (APIS), a project of the U.S. National Institute on Alcohol Abuse and Alcoholism (NIAAA), announces its latest annual update of state-by-state alcohol policies. This update reports on nine substantive changes in state alcohol policy statutes and regulations that occurred through January 1, 2015.

Alcohol highlights include the following:

- Changes in underage drinking laws—Some states now prohibit social hosting of underage drinking parties, and Indiana eliminated driver license loss penalties for underage purchase and possession.
- New training requirements—Tennessee established a mandatory Beverage Service Training requirement for off-premises establishments.

As a first step in the planned expansion into legal data on the recreational use of cannabis, APIS staff developed the Cannabis Policy Taxonomy (CPT). The CPT provides an inventory and taxonomy of cannabis policies and is organized in policy areas under nine broad categories. Researchers, especially those new to the cannabis policy field, can examine the CPT to gain an appreciation of the nature and scope of cannabis policies and the specific issues these policies address. See http://alcoholpolicy.niaaa.nih.gov/cannabis_policy_taxonomy.html.



APIS staff developed the Cannabis Policy Taxonomy (CPT)

APIS has posted a second analytic paper analyzing the use of APIS Tax data. See http://alcoholpolicy.niaaa.nih.gov/uploads/total_tax_a_suggested_method_for_calculating_alcohol_beverage_taxes.pdf.

These and other changes to current APIS policy topics are now posted to the site found at <http://www.alcoholpolicy.niaaa.nih.gov>.

This project has been funded with Federal funds from the National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Department of Health and Human Services, under Contract No. HHSN275201300002C. ■

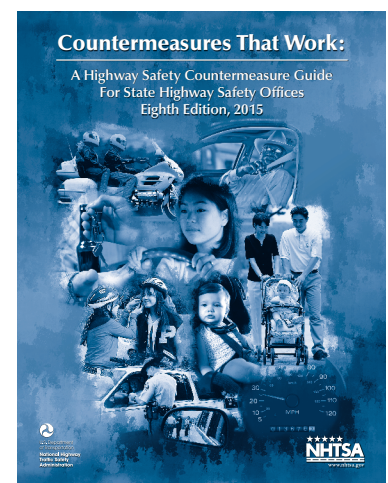
LATEST EDITION OF COUNTERMEASURES THAT WORK

Countermeasures That Work is a basic reference guide produced by the U.S. Department of Transportation. It is designed to assist those involved 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;
- summarizes strategy/countermeasure use, effectiveness, costs, and implementation time; and
- provides references to the most important research summaries and individual studies.

This year's publication is the Eighth Edition of *Countermeasures That Work*. It contains chapters regarding alcohol- and drug-impaired driving as well as seatbelts, speeding, and distracted and drowsy driving as special driver/operator populations.

To download the full report, go to <http://www.nhtsa.gov/staticfiles/nti/pdf/812202-CountermeasuresThatWork8th.pdf>. ■



DRINKING AND DRIVING IN CANADA

A recently released fact sheet summarizes findings about drinking and driving in Canada from the Road Safety Monitor (RSM), 2015, a national public opinion poll on road safety issues. A total of 1,204 Canadians completed the poll in October and November of 2015. This annual poll is conducted by the Traffic Injury Research Foundation (TIRF) in partnership with Beer Canada, State Farm, and the Toyota Canada Foundation. The survey takes the pulse of the nation on key road safety issues by means of an online survey of a random, representative sample of Canadian drivers. An examination of the percentage of persons killed in a traffic crash in Canada (excluding British Columbia where data were not available) that involved a drinking driver among all persons killed in traffic crashes on principle roadways in 2012 revealed that 29.9% of fatal crashes involved a drinking driver. This percentage declined from a peak of 37.2% in 1995 and has since remained consistently below 35%, although with some fluctuation. When asked about driving after consuming any amount of alcohol in the past 30 days, 16.6% of Canadians admitted to doing this in 2015. Prior to 2006, this percent had decreased from 19.3% in 1998 to 14.7% in 2005.

In 2015, 4.2% of respondents to the survey admitted they had driven when they thought they were over the legal limit in the past 12 months. Results suggest a continued decline since 2007 in the percentage of drivers in Canada who admitted to driving while they thought they were over the legal limit in the past 12 months.

A majority of Canadians continue to regard drinking and driving as an issue of great priority. The percentage of those who said that they were concerned or very concerned about drinking and driving increased from 69.3% in 2011 to 71.6% in 2012, and then decreased slightly to 69.5% in 2015. In six out of 10 years since 2006, when compared to other societal issues such as crime, the economy, and global warming, drinking and driving has been mentioned as the societal issue of greatest concern by Canadian drivers.

To see the full report, go to http://www.tirf.ca/publications/PDF_publications/RSM_2015_Drinking_Driving_Eng_7.pdf. ■

16.6% of Canadians admitted to driving after consuming any amount of alcohol in the past 30 days in 2015.

2016 INTERLOCK SYMPOSIUM TO TAKE PLACE IN BRUSSELS, BELGIUM

The 2016 Interlock Symposium will be held in Belgium's Brussels-Capital Region on September 13–15, 2016. The Symposium will explore the importance of embedding ever-advancing interlock devices and features in efficient and streamlined programs. In particular, an emphasis will be placed on the growing needs of governments to deliver sustainable services, as well as the role of interlocks and increasingly automated vehicles.

For more information, visit <http://www.interlocksymposium.com/>. ■



UPCOMING EVENTS

Long Beach, CA

April 3–5, 2016
Lifesavers National Conference on
Highway Safety Priorities
<http://lifesaversconference.org>

Washington, DC

April 6–8, 2016
Alcohol Policy 17
<http://www.alcoholpolicyconference.org>

Venice, Italy

June 21–24, 2016
Symposium of the International
Academy of Legal Medicine (IALM)
<http://www.ialm2016venice.org>

Brisbane, Australia

August 2–5, 2016
6th International Conference on
Traffic & Transport Psychology
<http://icttp2016.com>

Brussels, Belgium

September 13–15, 2016
International Ignition Interlock
Symposium
<http://www.interlocksymposium.com>

Waikoloa, HI

September 17–21, 2016
60th Annual Meeting of the
Association for the Advancement of
Automotive Medicine (AAAM)
<http://www.aaam.org>

Gramado, Brazil

October 16–19, 2016
T2016
<http://www.T2016.org>



To view past issues of the
REPORTER please visit:
<http://www.icadtsinternational.com/pages/icadts-reporter.php>

GRSP LAUNCHES ADVOCACY RESOURCE CENTRE

The Global Road Safety Partnership (GRSP) has announced the launch of a key new web resource to support advocacy efforts specifically for road safety policies and implementation.

The new Advocacy Resource Centre (<http://advocacy.grsproadsafety.org/>) is a one-stop resource for organizations campaigning for road safety policies or policy implementation. It features over 800 pieces of content, which have been specifically collated and created to be useful for both road safety organizations and other organizations that may be interested in addressing road safety.

The content includes case studies, fact sheets, messages, images, and example social media posts, which can all be filtered to search in relation to behavioural risk factors and tactical approaches, such as Building Public Awareness or Mobilizing Public Action. The content is gathered from 43 countries and will continue to be built upon throughout 2016, with a key focus on low- and middle-income countries, which share the largest burden of fatalities and injuries resulting from road crashes.

The Advocacy Resource Centre also holds the Advocacy Toolkit, which is a nine-section resource detailing all aspects of constructing a successful advocacy campaign, focusing specifically on road safety. The toolkit includes guidance on topics such as planning a campaign, setting policy priorities, and political mapping, among others.

In February 2016, GRSP will hold three 1-hour webinars aimed at providing instruction and insight on effectively using the resource centre for road safety advocacy campaigns. Open to all interested parties, the webinars will include live demonstrations, key guidance, and useful tips on how to maximize the resources available.

The webinars will be held on the following dates:

- February 15, 10:00 Eastern Standard Time (GMT -5)
- February 17, 10:00 European Central Time (GMT +1)
- February 19, 15:00 China Standard Time (GMT +8)

For more information and to register your interest in attending one of the webinars, please email Mr. Blaise Murphet at blaise.murphet@ifrc.org.

QUEENSLAND, AUSTRALIA SYMPOSIUM ON DRUGS AND DRIVING

“Tackling Drug Driving in Queensland: Leading Research and Contextual Issues Symposium” was hosted by CARRS-Q in Brisbane on 17 November 2015. Government, industry, and community stakeholders attended to hear presentations by CARRS-Q researchers and Queensland Police Service on the latest research and statistics on licit and illicit drugs in the construction and road safety sectors. Recent research has indicated that the lack of any perceived likelihood of being caught for drug driving is a major barrier to behavioural change. Further research is required on random roadside drug testing impacts and Australians’ perceptions of drug driving, which will inform to develop future directions to tackle this growing problem.

Presentations available for public release have been uploaded onto the CARRS-Q website: http://www.carrsq.qut.edu.au/community/past_events.jsp.



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