



REPORTER

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

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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.



INTERLOCKS FOR FIRST-TIME DUI CONVICTIONS CUT REPEAT OFFENSES; STUDY OF WASHINGTON DRIVERS SUPPORTS MANDATORY INTERLOCK LAWS

People convicted for the first time of alcohol-impaired driving are less likely to reoffend if they have to install alcohol interlocks on their vehicles, a new study by the Insurance Institute for Highway Safety shows. The finding provides support for requiring the devices for all offenders, not just those with multiple arrests or high blood alcohol concentrations (BACs).

Researchers studied driver records in Washington for people with convictions related to alcohol-impaired driving. They found that after the state expanded its interlock requirement to everyone convicted of driving under the influence (DUI), the recidivism rate for people affected by the expansion fell 12%. Only about a third of those offenders actually went through with interlock installations. If all of them had, their recidivism rate would have fallen by nearly half, the researchers estimate.

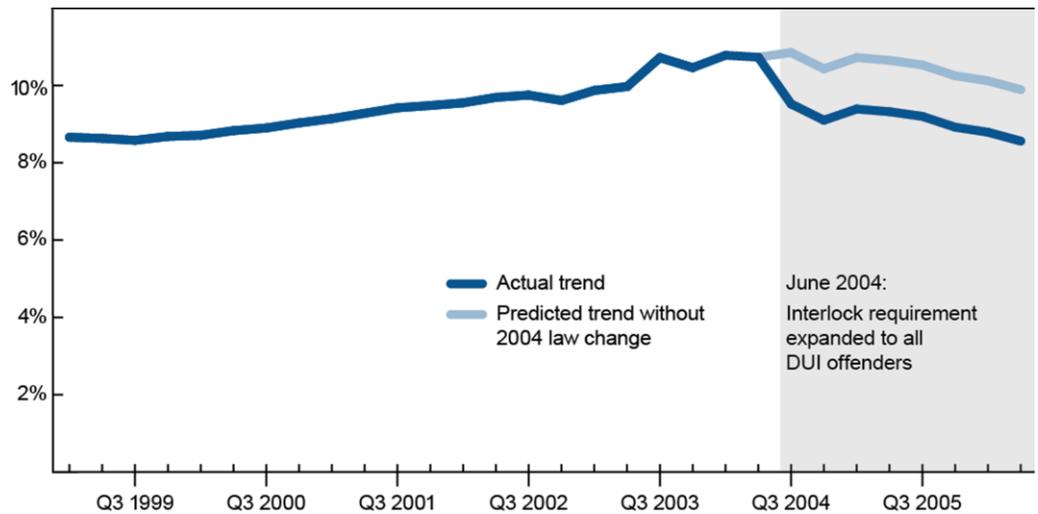
An alcohol interlock is a breath-testing unit that a driver must blow into before starting the vehicle. If the reading exceeds a preset level, the vehicle will not start. Previous studies have found that offenders who install interlocks are much less likely to be rearrested on DUI charges than those who do not.

Legislation pending in the U.S. Congress would encourage states to require interlocks for all impaired-driving convictions by linking highway funds to the issue. "Drivers with previous impaired-driving convictions are overrepresented in alcohol-related fatal crashes, so deterring people from reoffending is a good first step to reduce the death toll," says Anne McCartt, the Institute's senior vice president for research and the study's main author. "As this study shows, the more offenders are covered by an interlock law, the better it works."

"This report from the Insurance Institute for Highway Safety provides strong validation for MADD's Campaign to Eliminate Drunk Driving and our efforts to require all convicted drunk drivers to use an ignition interlock device," says Jan Withers, national president of Mothers Against Drunk Driving. "We will continue to work at the state and federal levels to ensure that all Americans are protected by comprehensive and lifesaving interlock laws."

Washington is one of 15 U. S. states that require everyone convicted of DUI to install an interlock for a certain period in order to drive. Another 22 states apply the restriction to drivers with high BACs and/or to repeat offenders. Elsewhere, interlock restrictions are not mandatory but may be imposed.

INTERLOCKS FOR FIRST-TIME DUI CONVICTIONS CUT REPEAT OFFENSES; STUDY OF WASHINGTON DRIVERS SUPPORTS MANDATORY INTERLOCK LAWS (CONT.)



Trend in 2-year recidivism rates for simple DUI offenders arrested from January 1999 through June 2006

The researchers found that the expansion of the interlock requirement reduced the 2-year recidivism rate for first-time simple DUI offenders by 1.3 percentage points. For example, in the second quarter of 2006, the last part of the study period, the recidivism rate was 9.3%. That is a 12% reduction from the 10.6% that would have been expected without the change. There also was an 11% reduction in recidivism (from 10.2% to 9.1%) among all first offenders, including those convicted of negligent driving, those with high BACs, and other types.

The change in the law did not result in all offenders getting interlocks, but the number who did increased sharply. Among simple DUI offenders, about a third had the devices installed, compared with less than 5% before. The researchers estimated what would have happened if everyone had gotten interlocks and concluded that recidivism would have fallen much more steeply. For instance, recidivism for simple DUI offenders arrested in the second quarter of 2006 would have gone from 9.3% to 5.3%. If all first offenders arrested in that quarter, including those convicted of negligent driving, had gotten interlocks, the rate would have dropped from 9.1% to 3.2%.

For more information, go to www.iihs.org. ■

TRAFFIC INJURY PREVENTION PUBLISHES SPECIAL SECTION ON REDUCING DRINK-DRIVING IN LOW- AND MIDDLE-INCOME COUNTRIES

The official ICADTS Journal, *Traffic Injury Prevention (TIP)*, has published a special section on drinking and driving in low- and middle-income countries. Much progress has been made in reducing alcohol-impaired driving crashes and the related injuries and deaths in countries around the world. Unfortunately, this progress has not been shared by many low- and middle-income countries. Articles in *TIP* provide descriptions of the current drink-driving problems in four countries (China, Colombia, Nigeria, and Vietnam) and the laws, policies, enforcement efforts, and public attitudes related to drink-driving. These descriptions show clearly the particular challenges faced by these and other low- and middle-income countries. These include lack of reliable traffic safety data and a variety of challenges related to the particular geographic, economic, cultural, and social situations in each country. These articles indicate the need to focus on capacity building at the organizational and individual level in these countries. The assessments also indicate that a long-term commitment to strengthening policies, implementation, and evaluation will be needed.



TRAFFIC INJURY PREVENTION PUBLISHES SPECIAL SECTION ON REDUCING DRINK-DRIVING IN LOW- AND MIDDLE-INCOME COUNTRIES (CONT.)

The countries included in the *TIP* articles are all included in the Drink-Driving Initiative of Global Actions on Harmful Drinking. This initiative sponsored the situation assessments described in the journal, as well as ongoing intervention programs to reduce drink-driving in these and other countries.

The articles are published in Volume 13, Issue 2 of *Traffic Injury Prevention* and can be accessed at <http://www.tandfonline.com/toc/gcpi20/13/2>. ■

TRB RELEASES REPORT ON COMMERCIAL OPERATOR DRUG- AND ALCOHOL-TESTING ACROSS MODES

The Commercial Truck and Bus Safety Synthesis Program of the Transportation Research Board has released a report synthesizing available research on drug and alcohol testing of commercial drivers and operators in the transportation system. The primary objective of this synthesis is to identify the current practices used to deter drug and alcohol use among operators within the U.S. Department of Transportation (DOT) regulated community. Operators included in the testing program include safety-sensitive positions in aviation, maritime, motor carrier, pipelines, public transportation, and rail.

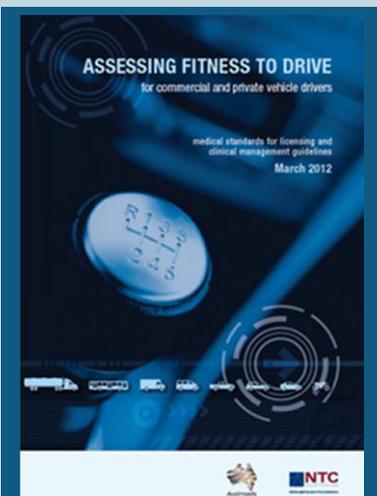
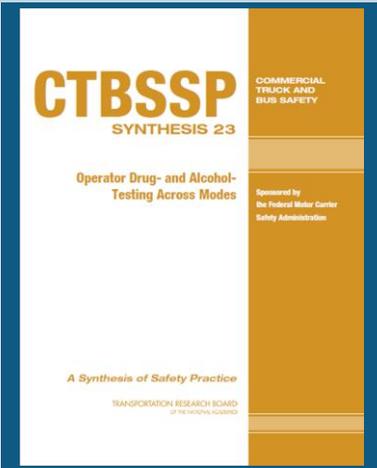
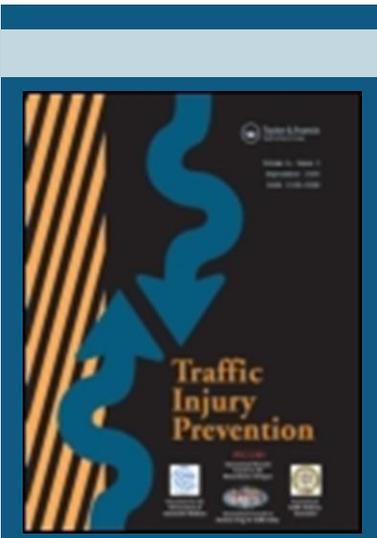
The document begins with a brief history of the transportation workplace drug- and alcohol-testing program, the general approach, the reasons for testing, some of the issues that affect the validity of the tests, and an outline of the specific regulations by mode. Some alcohol- and drug-testing statistics are also presented to give the reader a sense of the scope of the program and of the prevalence of illegal alcohol and drug use among safety-sensitive employees. The findings of inquiries to companies in the regulated community are reported, with an emphasis on alternative strategies aimed at deterring illegal alcohol and drug use among employees. Finally, some general recommendations for new research are included.

In general, drug positivity rates for the general U.S. workforce, the federally mandated, safety-sensitive workforce, and the DOT-only workforce have been declining over time. From 2008 to 2010, the drug-positivity rate for the DOT-only workforce declined from 1.64% to 1.49%. In 2008, the alcohol-positivity rate for the DOT-only workforce was 0.002%. Across modes, pre-employment, random, and reasonable cause tests resulted in the highest number of positive tests. In all modes, the type of tests with the highest positivity rate was reasonable cause/suspicion. Marijuana was the most commonly detected drug.

Dary Fiorentino and Randi Shannahan, DF Consulting, collected and synthesized the information and wrote the report. To view the full report, go to http://onlinepubs.trb.org/onlinepubs/ctbssp/ctbssp_syn_23.pdf ■

AUSTROADS RELEASES MANUAL ON ASSESSING FITNESS TO DRIVE

Austrroads, the association of Australian and New Zealand road transport and traffic authorities, has released its 2012 edition of *Assessing Fitness to Drive*. This publication provides medical standards to provide guidance to health professionals and driver licensing bodies on the health assessment of private and commercial drivers of heavy vehicles, light vehicles, and motorbikes. The standards include discussion of drug and alcohol problems as well as medicinal drug use. The publication includes information about the roles and responsibilities of health professionals, driver licensing authorities and drivers, the assessment and reporting process, and useful contacts. The full publication can be accessed at <https://www.onlinepublications.austrroads.com.au/items/AP-G56-12>. ■



ALCOHOL INTERLOCK SYMPOSIUM 2012 IN HELSINKI, FINLAND: REGISTRATION NOW OPEN



The 13th annual Alcohol Interlock Symposium will take place September 9-11 in Helsinki, Finland. The theme of this year's Symposium is "Alcohol Interlocks: A Traffic Management Tool." This theme highlights the use of interlocks in proactive commercial applications, which are becoming as prevalent in Europe as judicial programs. The Symposium venue, in Finland, provides an ideal location to discuss and illustrate the versatility of alcohol interlocks. The theme is a logical extension of the Palm Springs theme, "Integrating Systems: Creating a Continuum of Care," in that commercial and judicial programs can be considered as extremes on a continuum of care.

The theme emphasizes that interlocks are not only a reactionary solution to dealing with offenders, but also can be used as a proactive tool to manage traffic safety among company fleets, taxis, school buses, and government-owned vehicles. The approach used in these instances is different from the approach of judicial programs, in that the objective is not necessarily to rectify a drink-driving problem. Rather, the goal is to increase the quality of the services by instilling confidence among customers, clients, and the public. It also displays corporate responsibility and industry leadership. Broadening symposium attendees' perception about the versatility of interlocks and how they can be used to manage traffic safety (rather than just to sanction offenders) is believed to be an important step in broadening the field of interlocks.

Given how far commercial programs have progressed in Europe and other parts of the world, it is timely to focus attention on them and discuss their strengths and limitations, how they are delivered, what research needs should be addressed, and how they compare to judicial programs.

Included in the program will be sessions examining Finland's interlock program, challenges in European Union (EU) programs, program leadership, data security, expanding treatment opportunities in interlock programs, and jurisdictional reciprocity (which is an important problem in the EU). Plenary speakers will include Ms. Raija Vahasalo, member of the Finnish Parliament who introduced the interlock legislation; Mr. Pasi Kemppainen, President of TISPOL (the organization of traffic police forces of Europe); and Mr. Mikko Paatero, Finnish National Police Commissioner.

More information and the registration form can be found at www.interlocksymposium.com. ■



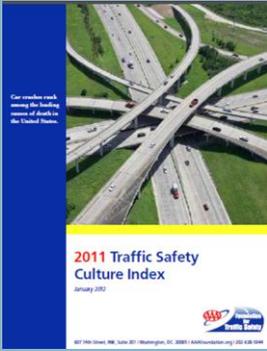
BRIEF INTERVENTION IN EMERGENCY DEPARTMENT CAN DECREASE DRINKING AND DRIVING

A recent study shows that brief interventions in the emergency department can reduce harmful and hazardous drinking, including drinking and driving. This was a randomized study of 889 adult emergency department patients found to have hazardous and harmful drinking patterns. A total of 740 received an emergency practitioner-performed Brief Negotiation Interview, a Brief Negotiation Interview with a 1-month followup telephone booster, or standard care. The study also included a standard care with a no-assessments (n=149) group to examine the effect of assessments on drinking outcomes. The reduction in the mean number of drinks in the past 7 days from baseline to 6 and 12 months was significantly greater in the Brief Negotiation Interview with booster and Brief Negotiation Interview than in standard care. The reduction in 28-day binge episodes was also greater in the Brief Negotiation Interview with booster and Brief Negotiation Interview. The Brief Negotiation Interview with booster offered no significant benefit over the Brief Negotiation Interview alone. There were no differences in drinking outcomes between the standard care and standard care/no-assessment groups. The reductions in rates of driving after drinking more than 3 drinks from baseline to 12 months were greater in the Brief Negotiation Interview (38% to 29%) and Brief Negotiation Interview with booster (39% to 31%) groups than in the standard care group (43% to 42%). The authors concluded that emergency practitioner-performed brief interventions can reduce alcohol consumption and episodes of driving after drinking in hazardous and harmful drinkers. These results support the use of brief interventions in emergency department settings.

Source: D'Onofrio G, Fiellin DA, Pantalon MV, Chawarski MC, Owens PH, Degutis LC, Busch SH, Bernstein SL, O'Connor PG. *Ann Emerg Med*. 2012; ePub. ■



AAA REPORT ON SAFETY CULTURE IN THE U.S.



The AAA Foundation for Traffic Safety recently released its report on safety culture in the U.S. Since 2006, the Foundation has been sponsoring research to better understand the traffic safety culture. The Foundation's long-term vision is to create a "social climate in which traffic safety is highly valued and rigorously pursued." In 2008, the AAA Foundation conducted the first annual *Traffic Safety Culture Index*, a nationally representative telephone survey, to assess a few key indicators of the degree to which traffic safety is valued and pursued. As in previous years, this fourth annual *Traffic Safety Culture Index* found that, in some ways, Americans do appear to value safe travel and desire a greater level of safety than they now experience. For example, 70% of Americans say that the government should give more attention to making roads and highways safer, which is similar to the number that said the government should do more to increase the fuel economy of cars and take measures to reduce traffic congestion—issues that typically receive far more media attention and public debate than road safety. On the other hand, this survey also highlights some aspects of the current traffic safety culture that might be characterized most appropriately as a "do as I say, not as I do" attitude that exists behind the wheel. For example, many drivers say that it is completely unacceptable to drive 10 mph over the speed limit on residential streets, yet admit having done that in the past month.

Some of the reported attitudes and behaviors related to drinking and driving follow:

- Drivers view drinking and driving as a very serious threat, and virtually all disapprove of drinking and driving and acknowledge that others also disapprove of it. Fourteen percent, however, admit to drinking and driving at least once in the past year, and of these, more than 1 in 5 (21%; 3% of all drivers) said they had done so in the past month.
- There is almost universal support for requiring alcohol-ignition interlocks for drivers convicted of DWI more than once, and 3 in 4 Americans support an interlock requirement for first-time DWI offenders.

To see the complete report, go to <http://www.aaafoundation.org/pdf/2011TSCIndex.pdf>. ■

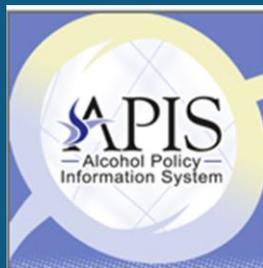
TRENDS IN RISK OF ALCOHOL-RELATED CRASHES

A recent study examined whether the relative risk of being involved in an alcohol-related crash had changed between 1996 and 2007, a period when there has been little evidence of a reduction in the percentage of all fatal crashes involving alcohol. The study compared blood-alcohol information for 2006 and 2007 fatal crash cases occurring on weekend nights (N = 6,863, 22.8% of them women) drawn from the U.S. Fatality Analysis Reporting System (FARS) with control blood-alcohol data from participants in the 2007 U.S. National Roadside Survey conducted on weekend nights (N = 6,823). Risk estimates were computed and compared with those previously obtained from the 1996 FARS and roadside survey data. Although the adult relative risk of being involved in a fatal alcohol-related crash apparently did not change from 1996 to 2007, the risk for involvement in an alcohol-related crash for women aged 20 and younger has increased to equal that for men of the same age. Further, the risk that sober men aged 20 and younger will become involved in a fatal crash has doubled over the 1996-2007 period. Conclusions: Compared with estimates obtained from a decade earlier, young women in this study who were drinking and driving are at an increased risk of involvement in alcohol-related fatal crashes. Similarly, young sober drivers in this study are more at risk of involvement in a fatal crash than they were a decade earlier.

In 1996, males younger than 21 were four times as likely as females younger than 21 to be involved in a fatal crash with a blood alcohol concentration (BAC) of .10 g/dL. In 2007, both male and female drivers younger than 21 were both about 80 times more likely to be involved in fatal crashes as their sober peers.

Source: Voas RB, Torres P, Romano E, Lacey JH, J Stud Alcohol Drugs, 73, 341-350, 2012. ■





UPCOMING EVENTS

Washington, DC, USA

May 29–June 1, 2012
20th Annual Meeting of the Society
for Prevention Research
For more information, go to
www.PreventionResearch.org

Banff, Alberta, Canada

June 10–13, 2012
Canadian Multidisciplinary Road
Safety Conference
For more information, visit
<http://www.carsp.ca>

Orlando, Florida, USA

June 14–16, 2012
Lifesavers 30th Anniversary
Conference on Highway Safety
Priorities
For more information, go to
www.lifesaversconference.org

San Francisco, California, USA

June 23–27, 2012
35th Annual Scientific Meeting of
the Research Society on
Alcoholism
[http://www.rsoa.org/2012meet-
indexAbs.htm](http://www.rsoa.org/2012meet-indexAbs.htm)

Helsinki, Finland

September 9–11, 2012
Alcohol Interlock Symposium 13
For more information, see
www.interlocksymposium.com

APIS ANNOUNCES REDESIGN AND UPDATING OF ALCOHOL TAX POLICIES

The Alcohol Policy Information System (APIS), a project of the U.S. National Institute on Alcohol Abuse and Alcoholism, announces its redesign, update, and posting of three Alcohol Tax Policies: Beer Taxes, Wine Taxes, and Distilled Spirits Taxes. Data for each type of beverage tax are available from January 1, 2003 through January 1, 2011.

The new tax policy topics (posted on January 28, 2012) provide two sets of tax rates: Specific Excise Taxes (taxes levied on the quantity of a beverage), and Ad Valorem Excise Taxes (taxes levied on the price of a beverage). To facilitate cross-state comparisons, data are provided for Index Beverages in each state at 5% ABV beer, 12% ABV wine, and 40% ABV distilled spirits.

The new tax policies replace five previous APIS alcohol tax policies (for beer, wine, distilled spirits, sparkling wine, and flavored alcoholic beverages), which had not been updated since 1/1/2007. Recent studies indicate that a 10% increase in the minimum price of an alcoholic beverage reduces consumption by 16% (Stockwell et al., 2011). In addition, another recent study showed that a 10% increase in the alcohol tax is associated with a 2.2% decrease in alcohol-related mortality (Maldonado & Wagenaar, 2010). Previous research has demonstrated that for every 1% increase in the price of beer in the United States, the traffic fatality rate declines by 0.9% (Ruhm, 1996).

The APIS Web site can be found at: <http://www.alcoholpolicy.niaaa.nih.gov/>.

This project federally funded by the National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Department of Health and Human Services, under Contract No. HHSN267200800007C.

References: Maldonado-Molina, MM., Wagenaar, AC, Alcohol Clin Exp Res, 34, 1915-1921, 2010.
Ruhm, CJ, J Health Econ, 15, 435-454, 1996.
Stockwell, T, Auld, MC, Zhao, J, Martin, G, Addiction, 107, 912–920, 2012. ■

ICADTS FOUNDATION ANNOUNCES STIPEND APPLICATION PROCESS FOR DEVELOPING AND TRANSITIONAL COUNTRIES AND YOUNG SCIENTISTS

The ICADTS Foundation has developed a process to apply for support for researchers, students, and workers in the field of traffic safety from developing and transitional countries to attend one ICADTS Conference. An additional stipend will be available for young scientists.

Developing and Transitional Countries: Preference will be given to first-time attendees. Conditions of the application follow:

- Applicants should be working in related fields of alcohol, drugs, and traffic safety.
- Students involved in research projects in the area of alcohol, drugs, and traffic safety should be encouraged to apply.
- Recipients of the stipend will present a report on their participation in the conference for publication in the ICADTS REPORTER.
- If the stipend is not awarded, it will stay with the Foundation.

Application for this stipend must include the following:

- Curriculum Vitae
- Description of the job and/or research project (not longer than one page A4)
- Calculation of the cost
- Declaration by the applicant's supervisor that the applicant's circumstances are complying with the stipend's formal conditions
- Declaration by the applicant that he or she will accept the stipend's formal conditions and will agree that the decision by the Executive Board of the Foundation is not subject to appeal.

UPCOMING EVENTS (CONT.)

Boise, Idaho, USA

July 18-20, 2012

5th Annual Northwest Alcohol
Conference

<http://www.northwestalcoholconference.org>

Gold Coast, Queensland, Australia

September 20-21, 2012

Occupational Safety in Transport
Conference

For more information, go to
<http://ositconference.com/>

Wellington, New Zealand

October 1-4, 2012

11th World Conference on Injury
Prevention and Safety Promotion

For more information, visit
<http://www.conference.co.nz/worldsafety2012>

Seattle, Washington, USA

October 14-17, 2012

56th Annual Meeting for the
Advancement of Automotive
Medicine

For more information, visit
<http://www.aaam.org>

Brisbane, Queensland, Australia

August 25-28, 2013

T2013: 20th ICADTS Conference

For more information see
www.t2013.com



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

ICADTS FOUNDATION ANNOUNCES STIPEND APPLICATION PROCESS FOR DEVELOPING AND TRANSITIONAL COUNTRIES AND YOUNG SCIENTISTS (CONT.)

The maximum amount of money to support one recipient is \$2,000 for a full stipend. In addition, two stipends may be offered each year to cover registration (maximum \$500 each).

Applications must be forwarded to the ICADTS Secretary (www.icadts.org) before the 1st of April of every year in which an ICADTS Conference is to be held.

Young Scientists: Young scientists who are younger than age 35 and working in the fields of alcohol, drugs, and traffic safety are eligible to apply. They should be first-time attendees of the ICADTS Conference. Recipients of the stipend will present a report about their participation in the conference for publication in the *ICADTS REPORTER*.

Applicants should submit a request and disclose the following information:

- a. their name
- b. a summary of their background.
- c. details on their proposed contribution to the ICADTS activity
- d. other sources of financing
- e. letter of recommendation by a member of ICADTS

The maximum level of support is \$2,000.

Applications must be forwarded to the ICADTS Secretary (www.icadts.org) before the 1st of April of every year in which an ICADTS Conference is to be held. ■

WELCOME NEW ICADTS MEMBERS

New members who have joined ICADTS include:

- Angela Eichelberger, USA
- Ian Marples, Canada
- Ronald Agius, Germany

We look forward to working with each of these new ICADTS members. ■

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Pacific Institute for Research and Evaluation
11720 Beltsville Drive, Suite 900
Calverton, MD 20705
Editor: Kathryn Stewart
Email: Stewart@pire.org