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THE PROVEN POWER OF RANDOM BREATH TESTING

*Lessons from
New Zealand & Australia*

Dave Cliff
CEO, GRSP



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Deterrence theory

General deterrence

Impact of the threat of legal punishment on the public at large.

(e.g., Highly-visible enforcement supported by public awareness programmes - such as breath testing large numbers of drivers.)



General Deterrence is most effective at deterring 'simple' unsafe behaviours e.g. Driving with excess breath/blood alcohol.

Specific deterrence

Impact of the actual punishment on those who are apprehended.

(e.g., Intensive enforcement operations penalising large numbers of speeding drivers.)



Specific Deterrence is most effective at deterring 'complex' behaviours e.g. speeding.



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RANDOM & COMPULSORY BREATH TESTING AND THE BOOZE BUS - DEFINED

Random Breath Testing (RBT) & Compulsory Breath Testing (CBT)



Allows police to stop drivers at *any time* or *place* without suspicion, with no legal restrictions on when or where tests are conducted.

Booze Bus



Police vehicle used to facilitate driver evidential breath testing at checkpoint sites.



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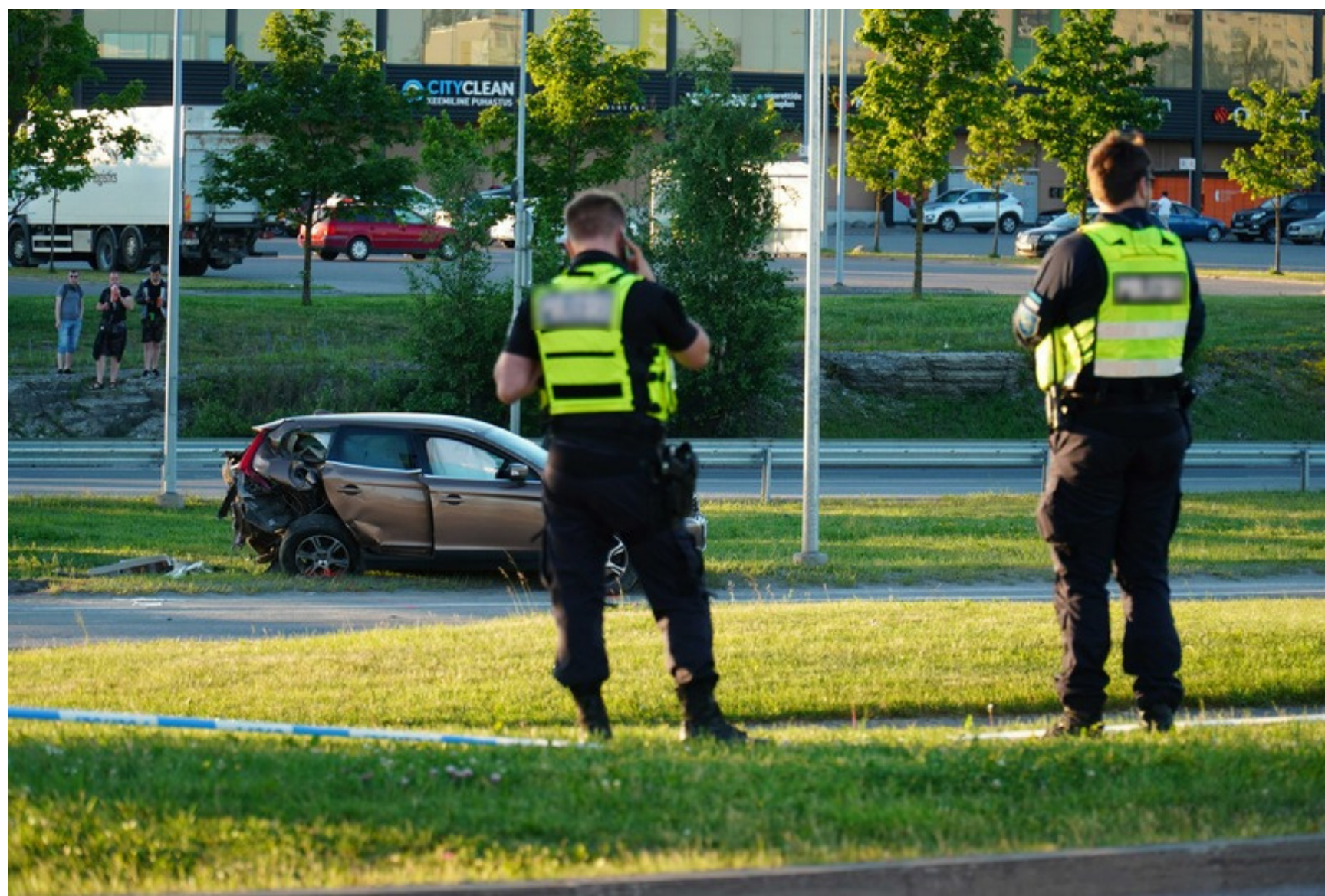


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GLOBAL DRINK DRIVING ENFORCEMENT PRACTICE

The most reliable measure of the minimum impact of alcohol affected driving on crash fatalities is to measure.

The number of drivers fatally injured and found to have a Blood Alcohol Content (BAC) over .05





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HOMEL'S PRINCIPLES – DETERRING DRINK DRIVING

Drink drive deterrence will be most effective when it follows these principles:

Highly
visible

Rigorously
enforced

Sustained

Well
publicised



Other key requirements

- Random and unpredictable times and locations.
- Focused on key risk times (*i.e. high alcohol hours – times and days of the week when alcohol-impaired driving peaks*).
- Dosage – Sufficient testing to generate deterrence
- Different approaches to urban and rural breath testing essential



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**HIGHLY
VISIBLE**

As many drivers as possible must be exposed to highly visible random breath testing.





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RIGOROUS ENFORCEMENT

The credibility of the programme must be maintained:

- No one should avoid testing (*every driver stopped is tested*)
- Focus on high alcohol hours
- Ensure deployment is random and unpredictable
- Set testing targets: ***One breath test per licenced driver per year***



Australia wide finding:

- While many drivers were aware of RBT on the roads, they did not see RBT as random. Most indicated they knew when and where RBT was conducted on the roads.

Papafotiou & Boorman 2011





DRINK DRIVING POLICING – HIGH ALCOHOL HOURS

2-hour band	Mon	Tue	Wed	Thu	Fri	Sat	Sun
12:00-01:59 am	55	51	68	73	101	233	300
02:00-03:59 am	34	36	42	58	70	157	261
04:00-05:59 am	23	28	20	39	44	138	159
06:00-07:59 am	38	40	33	57	60	76	91
08:00-09:59 am	44	39	46	54	49	45	66
10:00-11:59 am	37	23	31	44	30	72	55
12:00-13:59 pm	35	41	67	53	51	77	79
2:00-3:59 pm	82	78	84	85	102	93	98
4:00-5:59 pm	103	87	111	122	128	154	124
6:00-7:59 pm	89	109	134	128	176	188	154
8:00-9:59 pm	78	107	113	141	194	230	146
10:00-11:59 pm	72	94	142	165	287	304	93
Total	690	733	891	1031	1229	1767	1626

Red Shaded
Time Periods

Yellow Shaded
Time Periods

Unshaded
Time Periods



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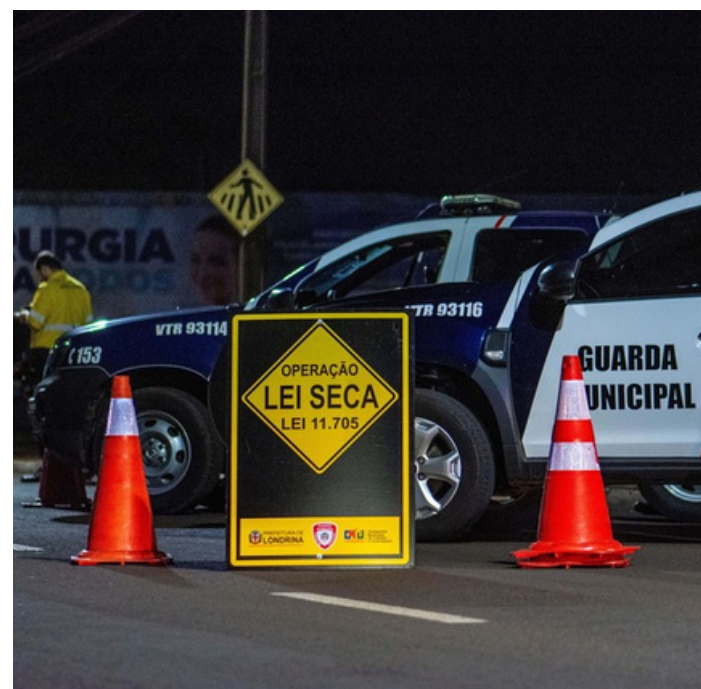
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SUSTAINED

For the general public to change *behaviour*, it is essential the programme is **ONGOING!**



WRONG!

We ran drink drive operations
over Easter and Christmas....
... that problem was solved.



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WELL PUBLICISED

- ***'Ongoing publicity'*** to highlight the road policing activity (*greatly enhances deterrence impact*).
- Media releases in local newspapers support the approach.
- The programme must reach all 'cultures' and age groups in the community that are at risk!
- Professionalism of the Police Operation



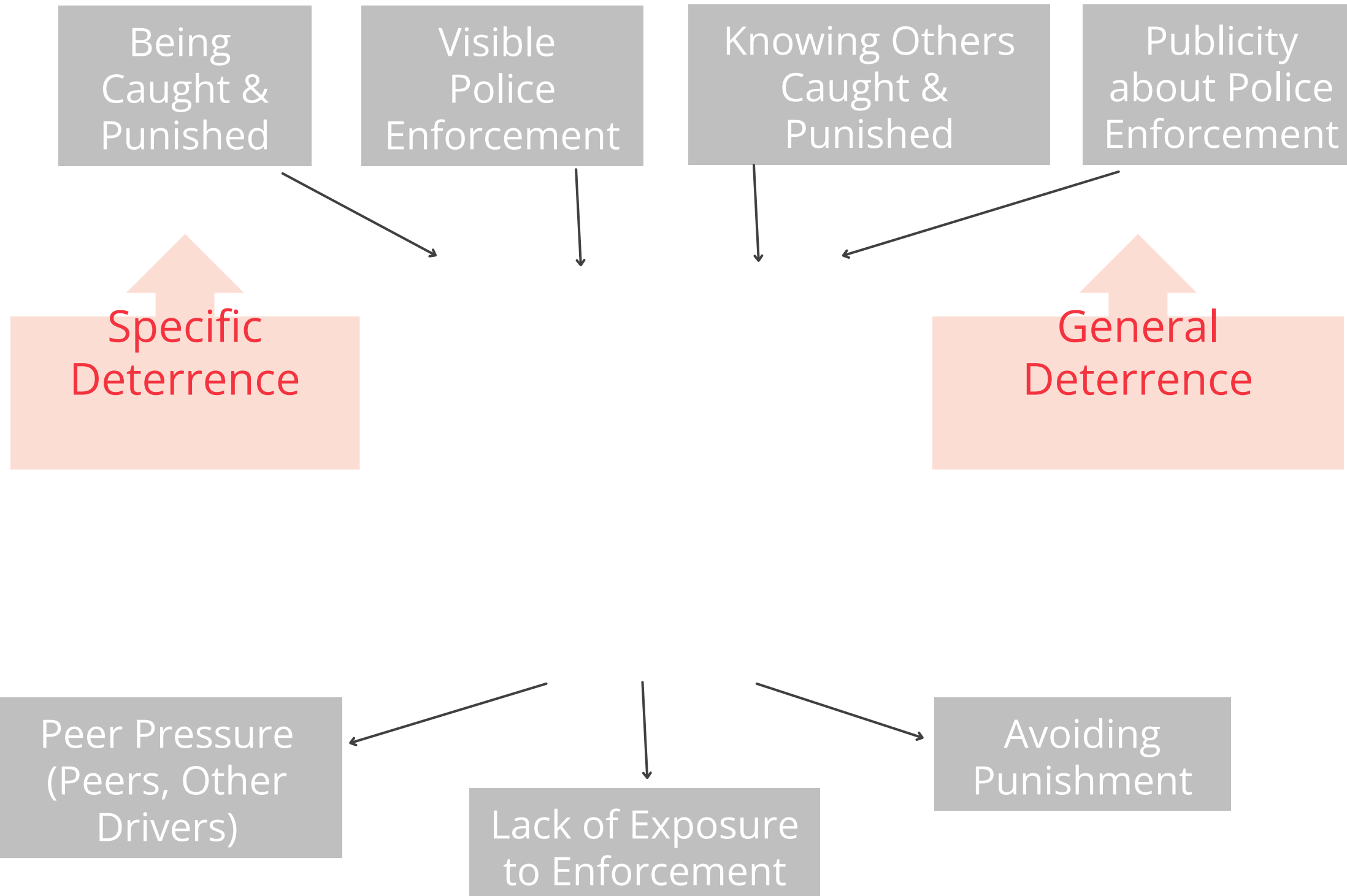
I never forgot being breath tested. It was like driving through a movie set.

The theatre of road policing





HOMEL'S BUCKET (1986)





BEST PRACTICE PRINCIPLES (1)

1. Threshold for the intensity of RBT operations in urban areas before it is certain that crash reductions will result. No more than approximately 20 hours per 100 square kilometers per week.
2. RBT in urban areas has residual effects on crashes in the area of testing operations for at least two weeks after the operations cease.
3. RBT carried out during times of the week when drink-driving is frequent is highly likely to produce crash reductions, whereas there is less certainty about its effects when carried out at other times.

DRINK DRIVING PREVENTION

Unpredictable. Unavoidable. Everywhere

**THINK BEFORE
YOU DRINK.
DON'T DRIVE**

Road policing is most effective when it is **unpredictable**, **unavoidable** and appears to operate **everywhere**.

Road policing operations need to be:

Conducted in an intensive and sustained manner
(to increase the public's perceived risk of detention)

As random in nature as possible
(to maintain unpredictability)

Utilise both highly visible operations
(to promote general deterrence)
And **targeted operations** (to reduce punishment avoidance)

Supported by mass media and public education campaigns
(to reinforce general deterrence, anywhere, any time, anybody)



THE MESSAGE IS CLEAR

ANYWHERE ANY TIME ANYBODY EVERY TIME

**DRIVE SOBER. ARRIVE SAFER.
EVERY CHOICE MATTERS.**

**OUR GOAL:
ZERO DEATHS. ZERO EXCUSES.**

**YOUR CHOICES
SAVE LIVES.**

**DRINK DRIVING
COSTS MORE THAN YOU THINK.**

**MAKE THE RIGHT CALL
DON'T DRINK & DRIVE.**



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VICTORIA RBT RESULTS - LONG-TERM REDUCTION IN DRINK DRIVING DEATHS

Since the late 1970s, **drivers killed with BAC ≥ 0.05 have shown a clear downward trend** alongside expanded RBT:

1978–1988: Deaths fell from **165 to 105 (–36%)** as RBT expanded

1989–1992 scale-up: Testing doubled to >900,000 drivers - Fatalities dropped **from 114 to 45 (–60%)**





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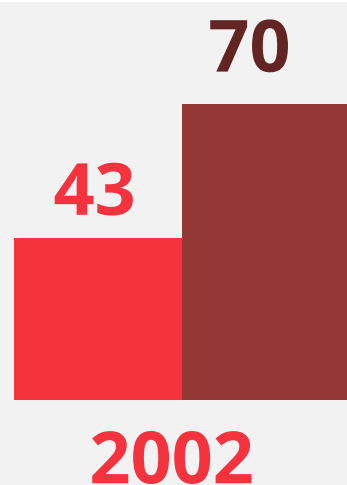


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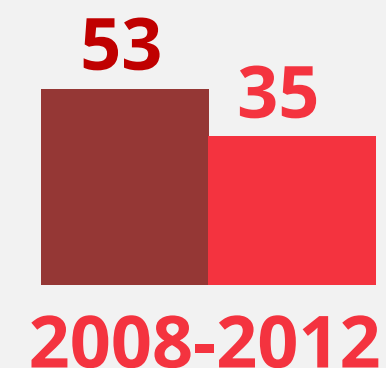
VICTORIA RBT RESULTS – LONG-TERM REDUCTION IN DRINK DRIVING DEATHS

Periods of **reduced RBT volume or visibility** led to reversals:

Late 1990s decline in testing
fatalities increased



Renewed RBT intensity and system
improvements led to further declines
fatalities fell



Sustained, large-scale testing (3–4 million tests/year)

- Over time, there is a consistent **inverse relationship between RBT intensity and fatalities**
- When testing increases → deaths decline
- When testing or visibility decreases → deaths rise





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DEATHS IN CRASHES INVOLVING ALCOHOL IMPAIRED DRIVERS (1984 - 2024) NEW ZEALAND





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THE RURAL DRINK DRIVING PROBLEM

- Research shows that car-based Random Breath Testing (RBT) in rural areas is as effective as combined car- and bus-based RBT operations in urban settings.
- To maximise deterrence and enforcement coverage, RBT operations should target both major highways and minor local roads.
- Greater emphasis should be placed on mobile, car-based RBT patrols, particularly around hotels, clubs, pubs, and other licensed venues where alcohol consumption is concentrated.



Drink driving remains a significant challenge in rural areas, where dispersed populations and extensive road networks can make enforcement more difficult.



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THE RURAL DRINK DRIVING PROBLEM

Patrol cars are well suited to monitoring minor roads, reducing opportunities for offenders to avoid checkpoints by using alternative routes.

Booze buses should be strategically positioned in towns and high-traffic locations to maintain a visible enforcement presence.

A coordinated combination of car-based patrols and bus-based RBT operations can significantly increase the perceived risk of detection among drivers.

Increasing the visibility, reach, and unpredictability of RBT in rural communities is critical to reducing drink driving and improving road safety outcomes.

Strategic Principles of Drink Drive
Enforcement – Cameron, Diamatopoulou
& Delaney (2006)





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THE ROLE OF POLICING LEADERSHIP

1

Create an atmosphere of trust

2

Educate police on Homel's principles and operational good practice

3

Accountability

4

Set meaningful targets, measure performance and explain why





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FURTHER DRINK DRIVE REDUCTION OPPORTUNITIES

**Extended trading hours
(on-premise venues such as
bars and pubs):**

*Generally associated with
increases in assaults,
unintentional injuries, and
drink-driving offences.*

**Restricted trading hours
(on- and off-premise alcohol
outlets):**

*Generally associated with
decreases in assaults and
alcohol-related hospitalisations.*

Evidence indicates that longer alcohol sales hours increase alcohol-related harm, while restricting trading hours reduces harm. Limiting alcohol availability through trading-hour restrictions is an effective public health measure to reduce violence and injury

Nepal et al 2020



KEY PRINCIPLES

for Effective Drink Driving Enforcement

- **Police Leadership** – Committed police and leadership matters.
- **Sustained & Smart Road Policing** - Must follow best practice – use unpredictable times and locations.
- **High Testing Volume** - Significant increases in breath tests are needed to generate deterrence.
- **Data-Driven Policing** – Use alcohol related serious crash data, identify high alcohol hours, conduct last drink drive surveys, and public attitude surveys to guide operations.
- **Public Awareness Matters** - Well-targeted campaigns can enhance the impact of road policing efforts.
- **Training and Equipping Police** - Police need comprehensive training to understand Homel's deterrence strategy and apply the theory effectively – both the *why* and the *how* of breath testing. Police need to be resourced.
- **Continuous Improvement** - Ongoing evaluation needed to identify and share good practice.
- **Penalties, Enabling Legislation and Rehabilitation** – Review both penalty and system problems and assess rehabilitation programmes.
- **Restrict alcohol trading hours** - Extended hours → more harm, restricted hours → less harm

Global Road Safety Partnership Secretariat



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of Red Cross
And Red Crescent
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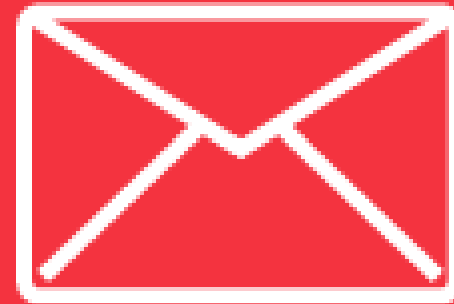
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