

Reducing Alcohol-Impaired Driving Through Ignition Interlock Policies

Based on strong evidence of effectiveness for reducing re-arrests among people previously convicted of alcohol-impaired driving, the Community Preventive Services Task Force (Task Force) recommends the use of ignition interlocks. Also known as breath alcohol ignition interlock devices, these electronic devices connect a breath alcohol analyzer to the ignition and/or other control systems of a motor vehicle for the purpose of preventing operation by an impaired driver. The Guide to Community Preventive Services (The Community Guide) recommendation for ignition interlocks is based on reduction in re-arrest rates (by an average of 67 percent compared to a control group), fewer alcohol-related accidents than for drivers with a suspended license, and overall crash rates similar to the general population.

Task Force Recommendation: [Reducing Alcohol Impaired Driving: Ignition Interlocks](#)

Translating Recommendations into Public Health Practice and Policy. State health officials can offer evidence-based research and tools to support implementation of ignition interlock policies.

Partnerships. Ignition interlock interventions often involve participation by numerous partners spanning the judicial and legislative branches; departments of motor vehicles, transportation, and public health law enforcement agencies; and governor’s offices.

Issues and Considerations. Currently, the public health benefits associated with ignition interlock devices are limited by the small number of offenders who install the devices in their vehicles. According to the Community Preventive Services Task Force, “More widespread and sustained use of interlocks ... could have a substantial impact on alcohol-related crashes.” To that end, The Community Guide can help stakeholders identify evidence-based strategies for implementing effective interlock programs. To address the cost barrier, states often rely on fees and surcharges paid by offenders to fund state programs. To increase use among indigent users, some states have adopted strategies for offsetting costs, such as indigent funds and funds from interlock device providers.¹

Action Steps. The action steps that follow in Table 1 provide a continuum of options for state agencies that want to inform ignition interlock policies.

Table 1. Action Steps and Options

Phase	Action Steps and Options
Pre-Implementation	<ul style="list-style-type: none"> • Gather baseline data about ignition interlock laws and practices. State ignition interlock laws are available on the National Conference of State Legislatures website. • Analyze current policies to determine if they meet Task Force recommendations. If they do not, connect with key stakeholders to inform and build consensus for more effective regulations. • Inform and educate internal and external partners about Task Force recommendations related to ignition interlocks. • Engage key partners in transportation and law enforcement, health, and the judicial system to inform them about the research supporting ignition interlock strategies. If the state health agency does not have a role currently, state health officials can identify opportunities to contribute knowledge and public health resources.

¹ National Highway Traffic Safety Administration. “Ignition Interlocks—What You Need to Know: A Toolkit for Policymakers, Highway Safety Professionals, and Advocates.” 2009.

Implementation	<ul style="list-style-type: none"> • <u>Consider adoption of model policies.</u> NHTSA’s 2010 report “Key Features of Ignition Interlock Programs” is a useful starting point to examine current requirements and identify enhanced features (e.g., performance monitoring or increased linkages to treatment) that could improve program effectiveness and outcomes. • <u>Develop informational resources to educate stakeholders about ignition interlock systems.</u> A website and/or print materials—brochures, posters, fact sheets—can educate the public about the research supporting ignition interlock devices. New York State produced a webinar and conferences to inform judges about the law and the sentencing process.
Evaluation/ Improvement	<ul style="list-style-type: none"> • <u>Evaluate outcomes and improve programs.</u> Evaluations of interlock programs can inform state legislators and program managers about program outcomes and areas for improvement. The Colorado Division of Behavioral Health, for example, is collecting data to evaluate short and long term results related to its treatment model. • <u>Identify opportunities to incorporate related recommendations.</u> Partners involved in ignition interlock strategies can also consider other related, evidence-based interventions, including blood alcohol concentration laws, sobriety checkpoints, and mass media campaigns to reduce alcohol-impaired driving.

State Experiences. Despite the strong evidence supporting ignition interlocks, state policies vary and use of ignition interlock devices is low. According to the National Conference of State Legislatures, 14 states have mandatory ignition interlock requirements for all alcohol-related driving offenses. A 2009 report by the National Highway Traffic Safety Administration found that 47 states and the District of Columbia allow the use of ignition interlock devices.²

State health agencies fulfill different roles in interlock programs. State health agencies in **Colorado** and **Arkansas**, for example, publish a list of approved or certified interlock devices. The Arkansas Department of Health also adopted regulations for the devices. Other state health agencies fulfill blood alcohol laboratory analysis and reporting functions.

Beyond these roles, state health officials can also fulfill other core public health functions by assessing needs, informing policy development (with evidence-based resources and tools), and evaluating and improving programs. As a result of evidence-based research supporting ignition interlock policies for first-time offenders, **Virginia** Gov. Bob McDonnell signed legislation in 2012 that required installation of ignition interlock devices for first-time drunk drivers.

Additional Resources and Links

An electronic version of this and other action sheets, with links to the resources listed in this document, is available at <http://www.astho.org/Programs/Evidence-Based-Public-Health/>.

- ASTHO Fact Sheet, [Interventions to Reduce Alcohol-Impaired Driving](#)
- ASTHO Case Study, “[Virginia: Strengthening Evidence-Based Health Policy on Alcohol-Impaired Driving](#)”
- NHTSA, “[Key Features for Ignition Interlock Programs](#)”
- NHTSA, “[Ignition Interlocks—What You Need to Know: A Toolkit for Policymakers, Highway Safety Professionals, and Advocates](#)”
- NHTSA, [Case Studies of Ignition Interlock Programs](#), April 2012
- “[Effectiveness of Ignition Interlocks for Preventing Alcohol-Impaired Driving and Alcohol-Related Crashes: A Community Guide Systematic Review](#)”

² *Ibid.*