Ignition Interlock Landscape in 2016

Traffic Issue Brief (December 2016)

This Brief was produced by the Traffic Resource Center for Judges, an initiative of the National Center for State Courts (NCSC). The Traffic Resource Center is a cooperative effort between the Department of Transportation and the National Center for State Courts (NCSC) to establish a resource for judges, court administrators, court clerks, and other court staff on issues related to traffic adjudication.



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Every state has enacted legislation requiring or permitting the use of breath alcohol ignition interlock devices (hereinafter referred to as "ignition interlock") to prevent alcohol-impaired driving. More and more, research is showing that mandating the technology makes a difference. For instance, the University of Pennsylvania's Perleman School of Medicine Study, published in March 2016 in the American Journal of Public Health, compared DUI fatalities in states with and without mandatory ignition-interlock laws. States with such laws saw 15% fewer drunken driving deaths. Mothers Against Drunk Driving found that from October 2003 to December 2015, ignition interlocks stopped more than 78,000 attempts to drive drunk in Pennsylvania alone. Both of these studies persuaded Pennsylvania legislators to pass a new ignition interlock requirement, to take effect in August 2017. Any first-time DUI offenders in the state of Pennsylvania will be required to install an ignition interlock device on all vehicles owned by the offender.

However, not all the research is positive. For instance, California is also considering a bill requiring all first-time DUI offenders to install an ignition interlock device on his or her vehicle for a specified period of time in order to get a restricted license or to reinstate his or her license and to remove the required suspension time before a person can get a restricted license. However, Californian legislators may be less persuaded by research in their state. A 2015 California Department of Motor Vehicles report from four counties running pilot ignition interlock programs (Alameda, Los Angeles, Sacramento, and Tulare) found no meaningful drop in drunk driving. The DMV found the interlock ignition program "does not appear to be associated with a reduction in the number of first-time DUI convictions and repeat DUI offenses in the pilot counties." The DMV report concluded "there were no differences in the license-based rates of DUI convictions in the pilot counties among first, second or third-or-more DUI offenders."

Two problems persist with ignition interlocks: 1) many drivers ordered to install an ignition interlock continue to drive without installing/using the device correctly; and 2) failure to monitor the offender in a timely and effective manner ultimately negates the purpose of the interlock. With regards to the first problem, research shows that fewer than 30% of offenders ordered to install interlocks actually do it. Ignition interlocks are expensive; some estimates surpass \$1,500 in annual installation and maintenance costs per driver. Many drivers simply can't afford to have them installed.

Offenders who actually do install interlocks often attempt to circumvent the device during the first few weeks after installation by tampering with the breath sample, attempting to disconnect the device itself from the vehicle's starter, or using another vehicle without an ignition interlock. To remedy some of these problems, some states have established vehicle usage criteria when offenders are ordered to install in interlock (e.g., the average number of miles an offender would be expected to drive to and from work on a weekly basis). If it subsequently determined that the vehicle with the ignition

interlock has not been drive the expected number of miles, the state can further sanction the offender if there is no justification for the low mileage.

Legislative actions in Virginia present a possible solution to some of these circumvention practices. In May 2016, Virginia's Governor approved revised regulations for Virginia's Ignition Interlock Program that 1) require all ignition interlocks to be equipped with cameras to record the date, time, and photo of all persons providing breath samples; 2) increase the amount of rolling retests, requiring one within the first 5 minutes after the start of the motor vehicle and randomly thereafter at least once every 45 to 60 minutes; 3) create testing requirements for those permitted to install interlock systems to boost knowledge of and compliance with Virginia laws and regulations.

Equipping ignition interlocks with cameras provides necessary evidence to prove when an offender gets another person to complete a breathalyzer test. Ensuring that the offender's breath is being tested, and not their child's, spouse's or any other person's is an important monitoring resource that most states currently do not have. Most states simply don't have the resources to ensure compliance al all. While increasing the number of rolling retests is also helpful in monitoring an offender, unless there are immediate consequence for violations resulting from such tests, the effort may be wasted if there is no communication with the court regarding the outcomes of these tests. It's one thing for the interlock device provider to monitor and flag any violations, but it's another step to communicate those violations to the proper authorities and then another step for the offender to actually receive appropriate consequences in a timely manner. All too often, an offender is not confronted with his/her violations until a prior-scheduled hearing, 6 months after the violations, with a judge that may be uninformed of the violations. If there is no clear chain of authority and responsibility between vendors and program staff, if there are poor communications and/or lack of training among practitioners, the entire ignition interlock exercise is pointless.

Even with well-funded and coordinated monitoring, a state's ignition interlock program only reduces recidivism while the device is installed in an offender's vehicle. The research indicates that once the device is removed, recidivism rates increase to levels comparable to those offenders who were not required to have an interlock installed as part of their sanction. It may be that repeat offenders require a permanent interlock device to ensure sober driving. Alternatively, the success of ignition interlock programs may be increased by combining them with substance abuse treatment. If a state's interlock program is well-funded and monitored, it could coordinate with substance abuse providers to provide individual offenders with specialized treatment. For instance, objective data regarding an offender's alcohol use through monitoring reports (e.g., if an individual has a high number of early morning lockouts indicating continued nighttime heavy drinking) can provide a substance abuse counselor with evidence to counter an offender's denial of drinking during the treatment process. Combining ignition interlock with substance abuse treatment may be the only effective way to reduce recidivism rates.

Reports and studies analyzing ignition interlock devices continue to educate the community of stakeholders committed to reducing impaired driving. The 2016 landscape of ignition interlock legislative developments provides both encouragement and important points for improvement.

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