



Mandatory Ignition Interlock Devices for All Convicted DUI Offenders

Responsibility.org Position:

Responsibility.org is dedicated to eliminating all forms of impaired driving. Given this, we support mandatory and effective use of ignition interlock devices (IID) for all convicted driving under the influence (DUI) offenders, even first offenders. Effective use of interlocks requires focus on implementation of laws which includes verification of installation for all offenders ordered to install devices, monitoring and supervision while the device is installed, accountability for non-compliance, and assessment and treatment (if indicated).

Responsibility.org also supports states' efforts to provide financial assistance for individuals who require it to complete installation.

This paper includes the most current and relevant data for this position as of May 27, 2025.

Overview:

Alcohol IIDs are highly effective countermeasures for separating drinking from driving. Offenders must blow into the device to start the vehicle, and if their breath registers a blood alcohol concentration (BAC) above a pre-set limit (typically 0.02 g/dL), the vehicle will not start. The interlock also requires rolling retests to ensure sobriety throughout the entire duration of the trip. If the driver fails or misses the retest, the vehicle does not automatically shut off. Instead, the device logs the event and, in some cases, alerts the driver with signals like flashing lights or a honking horn until the driver turns the vehicle off or provides a valid breath sample.

The device technology is reliable, detects only ethyl alcohol, and records all actions, with data stored in the device and downloaded at monthly or bi-monthly service center visits. The devices do not produce false positives when there are other environmental contaminants and are calibrated at service center visits. The information downloaded (e.g., start attempts, lockouts, rolling retests, vehicle miles traveled) is sent to the designated monitoring agency, who usually has the authority to act on any violations or circumvention attempts.

Interlocks significantly reduce recidivism among both high-risk and first-time DUI offenders while installed; they are most effective when paired with other interventions such as screening, assessment, and treatment.

Prevalence:

Every state has passed some form of interlock legislation and achieved different degrees of program implementation. Responsibility.org's research shows that 31 states and Washington, D.C., require ignition interlocks for all DUI offenders. Ten states require individuals with a high BAC (>0.15 g/dL) and repeat offenses to install an interlock, and an additional two states mandate the use of the device for repeat offenders. Lookback periods vary from five years to a lifetime across these states. There are additional states that have provisions that are discretionary or incentivized. Despite significant progress, more work is needed to strengthen existing practices and increase program participation rates. **Although all states have interlock programs, only 15% of individuals arrested for DUI and 42% of those convicted of DUI install the device (Robertson et al., 2022). This means that most eligible offenders fail to comply with installation requirements.** Noncompliance can threaten public safety, prevent offenders from practicing sober driving with the device, and may contribute to recidivism.

Access Responsibility.org's interactive [State Laws Map](#) for more details.

Research Highlights:

- According to the Center of Disease Control (CDC), ignition interlock devices, while installed, reduce repeat driving while impaired (DWI) offenses by about 70%.
- A research study found a 26% reduction in the number of drunk drivers involved in fatal crashes in states with all offender laws compared to those states with no law (Teoh et al., 2021).
- More than 10 evaluations of interlock programs have reported reductions in recidivism ranging from 35- 90%, with an average reduction of 64% (Willis et al., 2004).
- A 2011 study commissioned by the CDC involving a systematic review of 15 peer-reviewed studies on interlocks revealed that, while the devices were installed, the re-arrest rate of offenders decreased by a median of 67% compared to groups who never had an interlock installed (Elder et al., 2011).
- A study of New Mexico's interlock program (Marques et al., 2010) found that first offenders who participated had a 61% lower recidivism rate while the device was installed and a 39% lower recidivism rate following the removal of the interlock compared to offenders who never installed the device.
- Research by Kaufman and Wiebe (2016) examined the impact that the passage of all offender interlock laws had on alcohol-involved crashes (defined as any crash involving at least one driver who had a blood alcohol concentration of 0.01 g/dL or higher) in 18 states. The authors found that requiring all drivers convicted of DUI to install an interlock was associated with a 15% reduction in the rate of alcohol-involved crash deaths; this translates into an estimated 915 lives saved.
- An examination of the effects of state interlock laws on alcohol-involved fatal crashes in the U.S. found that interlocks may reduce the occurrence of these crashes (McGinty et al., 2017). State laws that require interlocks for all DUI offenders were associated with a 7% decrease in the rate of fatal crashes involving a driver above the legal limit (0.08

g/dL) and an 8% decrease in the rate of fatal crashes involving a high-BAC (>0.15 g/dL) driver. This translates into an estimated 1,250 prevented fatal crashes involving a drunk driver. The study also found that laws requiring interlocks for high-risk offenders (such as repeat drunk drivers), may reduce alcohol-involved fatal crashes two years post-implementation.

- Results from a survey of DUI offenders required to install an interlock in Santa Fe, New Mexico revealed 87% felt interlocks reduced driving after drinking. Furthermore, 85% of the offenders thought that interlocks were fair to DUI offenders and 67% believed that all convicted DUI offenders should be required to install the device (Robertson et al., 2006).
- A study by Voas et al. (2016) evaluated a Florida policy mandating alcohol treatment for DUI offenders who use ignition interlocks. Offenders with three separate interlock violations—defined as two instances within four hours in which the device prevented the vehicle from starting—were required to undergo treatment for alcohol use disorder. This intervention resulted in a 32% reduction in recidivism after the interlock device was removed, compared to a control group that did not receive treatment.

Policies to Strengthen Interlock Programs:

Most states have passed strong all offender or, at a minimum, required high-BAC and repeat offenders to install ignition interlocks. As a result, in recent years the focus has shifted to improving the implementation of programs and strengthening program infrastructure. Common interlock program improvements include:

- Removing opt or wait out provisions that allow offenders to wait out the interlock installation period by agreeing not to drive during that timeframe.
- Creating hybrid interlock programs that leverage the strengths of both administrative (managed by a state licensing or related agency) and judicial models (administered by the courts) which limits the likelihood that an offender can avoid the interlock sanction.
- Allowing offenders to install the interlock post-arrest and pre-conviction and permit that each day the device is installed is credited against their post-conviction interlock term.
- Reducing the hard suspension period for those offenders who install the interlock.
- Improving the monitoring of offenders by designating a single agency with the authority to supervise offenders and act when there is non-compliance.
- Defining program violations and creating offenses for tampering with devices and device circumvention.
- Establishing compliance-based exit criteria (many states have these criteria which ensure that non-compliant offenders have their interlock installation period extended until they demonstrate behavior change). See the Governors Highway Safety Association's [report on the effects of compliance-based removal laws on alcohol-impaired driving recidivism](#) to learn more.

- Applying graduated sanctions for non-compliance.
- Tying assessment and treatment to the interlock program so that an offender who requires treatment goes through the program while the interlock is installed. The interlock will act as a safety net if there is a relapse.
- Requiring or incentivizing DUI offenders who refuse a chemical test to install an ignition interlock.

Also see the [recommendations](#) from the National Highway Traffic Safety Administration's State Ignition Interlock Symposium on topics such as IID program funding and compliance-based removal, as well as the American Association of Motor Vehicle Administrators' (AAMVA) [2023 Ignition Interlock Program Best Practices Guide, Edition 3](#), designed to assist policymakers and jurisdictions in implementing of ignition interlock programs.

Established in 1991 as a national not-for-profit organization, Responsibility.org leads the fight to eliminate drunk and impaired driving and underage drinking.

References:

Centers for Disease Control and Prevention. (n.d.). *Ignition interlock: Successful practices for states*. https://www.cdc.gov/impaired-driving/media/pdfs/Ignition-Interlock_Successful_Practices_for_States-a_1.pdf

Elder, R.W., Voas, R., Beirness, D., Shults, R.A., Sleet, D.A., Nichols, J.L., & Compton, R. (2011). Effectiveness of Ignition Interlocks for Preventing Alcohol-Impaired Driving and Alcohol-Related Crashes. *American Journal of Preventative Medicine*, 40(3), 362-376.

Kaufman, E., & Wiebe, D. (2016). Impact of state ignition interlock laws on alcohol-involved crash deaths in the United States. *American Journal of Public Health*, 106(5), 865-871.

Marques, P.R., Voas, R.B., Roth, R., & Tippetts, S.A. (2010). *Evaluation of the New Mexico Ignition Interlock Program*. DOT HS 811 410. Washington, D.C.: National Highway Traffic Safety Administration.

McGinty, E. E., Tung, G., Shulman-Laniel, J., Hardy, R., Rutkow, L., Frattaroli, S., & Vernick, J. S. (2017). Ignition interlock laws: Effects on fatal motor vehicle crashes, 1982-2013. *American Journal of Preventive Medicine*, 52(3), 417-423. <https://doi.org/10.1016/j.amepre.2016.10.043>

Robertson, R. D., Barrett, H., & Vanlaar, W. G. M. (2022). *Ignition interlock installations: 2019 state data*. Traffic Injury Research Foundation.

Robertson, R.D., Vanlaar, W.G.M., & Simpson, H.M. (2006). *Ignition Interlocks: From Research to Practice: A Primer for Judges*. Ottawa: Traffic Injury Research Foundation.

Teoh, E. R., Fell, J. C., Scherer, M., & Wolfe, D. E. R. (2021). State alcohol ignition interlock laws and fatal crashes. *Traffic Injury Prevention*, 22(8), 589–592.
<https://doi.org/10.1080/15389588.2021.1984439>

Voas, R. B., Tippetts, A. S., Bergen, G., Grosz, M., & Marques, P. (2016). Mandating treatment based on interlock performance: Evidence for effectiveness. *Alcoholism: Clinical and Experimental Research*. doi:10.1111/acer.13149

Willis, C., Lybrand, S., & Bellamy, N. (2004). Alcohol Ignition Interlock Programmes for Reducing Drink Driving Recidivism (Review). *The Cochrane Database of Systematic Reviews* (4).