Best Practices for Alcohol Interlock Programs: Findings from Two Workshops

D.J. Beirness and R.D. Robertson
Traffic Injury Research Foundation of Canada

Abstract
Since their introduction nearly two decades ago, considerable knowledge and experience have been accumulated on alcohol interlock programs. Researchers, interlock service providers, and program administrators attended two workshops – the first to help identify a series of best practices for interlock program development; the second to discuss the use of interlocks as part of a licence reinstatement program for DWI offenders.

Introduction
Alcohol interlock devices have become increasingly popular as a means to prevent persons convicted of a DWI offence from repeating the behaviour. These devices are a form of incapacitation and serve as a bridge between full suspension and full licence reinstatement. Interlocks allow offenders to operate a vehicle legitimately within the driver licensing system while at the same time provide the public with the assurance that offenders will only be able to drive when their BAC is below a specified (low) value.

Five Canadian jurisdictions and 42 American states have legislation that allows the installation of interlock devices in the vehicles of DWI offenders. However, not all jurisdictions with legislation are currently operating interlock programs. It is estimated that there are more than 40,000 interlock devices currently in use throughout North America. This is in contrast with an estimated 1.5 million DWI offenders in North America each year. Participation rates in most interlock programs are relatively low – typically less than 10% of offenders participate in an interlock program.

There remains significant potential for the growth of interlock programs. More – and better – interlock programs will undoubtedly serve to increase the number of offenders who participate in these programs. The control of DWI offenders through interlock programs will ultimately improve safety for all drivers.

In this context, interlock programs have received implicit endorsement in federal legislation in both Canada and the United States. In July 1999, the Criminal Code of Canada was amended to allow provinces to reduce the mandatory period of driving prohibition for a first DWI offence from one year to three months provided the offender participates in an alcohol interlock program for the remainder of the one-year period. The legislation was amended in December 2001 to allow repeat DWI offenders the opportunity to reduce the mandatory driving prohibition if they
participate in an interlock program. This legislation provided the impetus for provinces to renew their interest in the development and/or expansion of such programs.

In the United States, the Transportation Equity Act for the 21st Century (TEA-21) contains a financial incentive for states to strengthen their programs to control repeat DWI offenders. Failure to comply will result in a portion of the state’s highway construction funds being diverted to traffic safety programs. One of the alternatives that will assist states in their efforts to comply with this legislation involves establishing an alcohol interlock program. Not surprisingly, this has sparked renewed interest in the development of interlock programs throughout the United States.

Since these laws were passed, the demand for information about interlock programs has escalated dramatically. Although considerable information exists about interlock programs, it tends to be scattered throughout scientific journals, technical reports and other documents. Those searching for the best available information on the operation and effectiveness of interlock programs must wade through an ever-expanding volume of literature containing the collective knowledge on the subject. In this context, there is a need for a collected source of information that provides legislators, policy makers and program administrators with the best possible advice for the development of interlock programs. The need for a discussion of best advice for interlock programs was the impetus for an international workshop.

In light of the demonstrated effectiveness of interlock programs, there is a desire to expand programs to include more DWI offenders. To date, many interlock programs have operated on a voluntary basis – i.e., DWI offenders can voluntarily participate in the interlock program, usually in exchange for a reduction in the length of licence suspension. In other programs, judges order DWI offenders to participate in an interlock program as a condition of probation. Recently, there has been interest in using interlocks as part of a licence reinstatement program – essentially requiring participation in an interlock program as a condition of licence reinstatement. This approach would help ensure that as many DWI offenders as possible participate in an interlock program. In the absence of a formal evaluation of the impact of voluntary versus mandatory interlock programs, it was deemed essential to discuss the issues surrounding the use of interlocks as part of a system of licence reinstatement. This formed the basis for a second international workshop on interlock programs.

**Method**
Two one-day workshops were held – the first in Montreal in September, 2000; the other in Toronto in November, 2001. In attendance was an international group of researchers, interlock manufacturers, policy makers, and program specialists. The purposes of the first workshop were to discuss the current state of knowledge on the effectiveness of interlock programs and to work towards a set of “best practices” for interlock programs. The purpose of the second workshop was to discuss issues surrounding the role of interlocks as part of a licence reinstatement program.
Results
At the first workshop, a number of issues concerning the efficient and effective use of interlocks were discussed. Of particular interest were the factors that appear to facilitate the success of interlock programs as well as factors that might mitigate effectiveness or were in need of further study. The major issues included: circumvention, participation rates, program authority, program duration, eligibility, traffic safety benefits, and program cost. As a result of these discussions, a list of ten “best practices” for interlock programs was produced. These are summarized below and described in more detail in the report on the workshop (1).

- **Perspective.** It is deemed essential that interlock programs be viewed as more than a breath test device installed in a vehicle. Rather, it is best described as a program that consists of a set of coordinated activities -- including monitoring, communication, and rehabilitation -- designed to prevent impaired driving among participants. It is also important to view interlock programs not as an additional punishment but as a form of incapacitation that allows offenders to drive legally while at the same time preventing them from driving impaired.
- **Legislation.** The interlock program needs to be supported by strong, clear legislation that specifies the administrative authority for the program, the eligibility criteria, the conditions of participation, and supplementary provisions that prohibit the participant and others from attempting to circumvent the interlock.
- **Equipment.** The interlock device used in the program should be alcohol-specific, must meet or exceed a set of approved performance specifications, and must be certified by a reputable private or government laboratory.
- **Service provider.** In recognition of the special role played by the interlock service provider as the liaison between the participant and the administrative authority for the program, it is recommended that the firm selected as the service provider must demonstrate an understanding of the clientele and be prepared to provide a level of service commensurate with the needs of this population.
- **Eligibility.** Every effort should be made to have as many DWI offenders as possible participate in the interlock program. Exclusions should be minimal and reserved for those rare cases in which the operation of a motor vehicle is not recommended under any circumstances.
- **Participation.** Interlock programs should combine the best features of voluntary and mandatory programs. This system would ensure that all DWI offenders participate in the program but would allow offenders the option of early entry into the program either immediately upon conviction or in exchange for a reduction in the length of suspension.
- **Program authority.** Administrative authority for the interlock program should reside with the agency responsible for driver licensing and control. This does not preclude a judge from ordering participation in an interlock program for DWI offenders deemed to be at high risk and in need of a high level of supervision.
- **Monitoring.** Interlock program participants should be monitored regularly – e.g., monthly – and should include a review of data from the interlock data recorder.
- **Program duration.** Rather than requiring participation in an interlock program for a fixed period of time, the duration of program participation should be dependent upon the individual’s success in the program. Consideration should also be given to a system of
being removed from the program progressively, for example by restricting the times and
days of the week during which the interlock is operational.

- **Program integration.** Every effort should be made to integrate the interlock program with
other DWI countermeasure programs and sanctions, particularly rehabilitation.

A second workshop was held to examine a number of issues that were raised during the first
workshop but for which time did not allow a thorough discussion. These included: low
participation rates, post-interlock recidivism, program duration, enhancing participation, failure
to reinstate, and predictors of success/failure. In the interests of exploring the frontiers of
interlock programs, it was decided that a discussion of these issues would be most beneficial
within the context of using interlocks as part of a licence reinstatement program. The main
points of discussion are summarized below.

- **Low participation rates.** Participation in voluntary programs is typically very low –
about 10% of DWI offenders elect to participate. The incentive for participation is often
a reduction in the length of licence suspension. The fact that so few offenders participate
in the program suggests that the benefits of participation (e.g., ability to drive legally) do
not compensate for the disincentives (e.g., cost, inconvenience).

- **Failure to reinstate.** For many years, licensing authorities used suspension as last resort
in driver improvement programs. This approach was based on the assumption that
drivers valued their driver’s licence would actively seek to have it reinstated. Recent
evidence indicates that many DWI offenders never become reinstated. The longer the
suspension the lower the likelihood the offender will seek reinstatement. Many of these
individuals continue to drive under suspension. More needs to be done to understand the
reasons for failure to reinstate. Having DWI offenders enter an interlock program as
soon as possible after conviction would help ensure offenders drove legally and only
when sober. It would also keep them under the supervision and control of licensing
authorities.

- **Enhancing participation rates.** Most interlock programs operate on a voluntary basis.
Those who choose to participate are often highly motivated to have their driving
privileges reinstated. Offenders who are ordered to participate in the interlock program
often do so reluctantly. Nevertheless, even compulsory participation results in lower
recidivism during the interlock period. Serious consideration needs to be given to the
further use of mandatory programs – e.g., participation as a condition of licence
reinstatement – as a means to enhance participation in interlock programs.

- **Eligibility.** In light of the demonstrated success of interlock programs to prevent repeat
DWI offences while offenders are participating in the program, it would be beneficial to
have as many DWI offenders as possible participate. Offenders deemed most at risk for
recidivism should not be systematically excluded from participation. Every effort should
be made to ensure that they participate in the program.

- **Judicial versus administrative authority.** Interlock programs operated under the authority
of the driver licensing administration use relicensing as the incentive for participation.
Failure to participate as required results in continued suspension. Programs operated
under judicial authority have the power to impose further sanctions for failure to
participate. This approach, however, depends on a motivated judiciary and a strong
probation system. Each approach has strengths and limitations. It may be possible to
develop a program that includes the best features of both administrative and judicial systems.

- **Post-interlock recidivism.** Evaluations of interlock programs have repeatedly found that DWI recidivism increases once participants complete the program. A variety of strategies were discussed to deal with this issue – e.g., incorporating rehabilitation into interlock programs, extending the duration of interlock programs, intensive supervision of participants, altering the criteria for program completion.

- **Program duration.** Current interlock programs are usually of fixed duration. At the end of the designated period, participants can leave the program and become fully reinstated drivers. The risk of recidivism increases following the completion of the interlock program. Some have suggested that extending the duration of the interlock program would be beneficial; others argue that this might simply delay the increase in recidivism.

- **Predicting interlock success.** An alternative to simply extending the duration of the interlock program is to use the data collected by the interlock device to determine the subsequent risk of recidivism for each participant. It may be advantageous and desirable to use these data to determine the length of the interlock program on an individual basis – shorter for low risk participants and longer for those deemed to be at higher risk. Participants identified as being at high risk of recidivism could be maintained on the interlock program until such time as they demonstrate their control over their alcohol problem and/or their ability to make good decisions regarding driving after drinking. This approach essentially requires participants to demonstrate they no longer need the interlock in order to complete their participation in the program.

- **Length of hard suspension.** Many jurisdictions require DWI offenders to serve at least a minimum period of hard suspension before being eligible for the interlock program. The length of this suspension period needs to be examined in light of the prevalence of failure to reinstate and the likelihood of recidivism during the period of suspension. Early interlock participation is probably better than later.

Using interlock programs as part of licence reinstatement programs may enhance the beneficial effects of interlock programs by increasing participation rates. There are, however, numerous issues that remain to be resolved through experience, monitoring, discussion and evaluation.

**Discussion**

Following years of research, development, and field experience, alcohol interlock programs have come of age. State of the art technology has been employed to create a system that is able to reliably identify individuals who have consumed too much alcohol and prevent them from operating the vehicle in which it is installed. A variety of systems have been incorporated into the device to prevent virtually all attempts at circumventing the interlock device. Experience with interlocks over the past decade or so indicates that they perform exceptionally well and do the job for which they were intended – i.e., to prevent those with elevated BACs from operating the vehicle in which it is installed.

As interlock programs proliferate and ever-increasing numbers of DWI offenders participate, there are many issues that will have to be dealt with. The purpose of the two workshops was to bring together a group of people familiar with interlock programs to identify some of the major
issues facing interlock programs and to discuss potential solutions. Most of these issues do not involve the interlock device itself but, rather, involve the administrative aspects of interlock programs – e.g., when to install, duration of program participation, incentives to participate, failure to reinstate. The resolution of these issues will take time and effort. Nevertheless, it is important that we continue to monitor interlock programs, assess progress, and evaluate their impact.

References