Why Aren’t Sobriety Checkpoints Widely Adopted as an Enforcement Strategy in the United States?

James C. Fell¹
Susan A. Ferguson²
Allan F. Williams²
Michele Fields²

¹Pacific Institute for Research and Evaluation (PIRE)
Calverton, MD 20705-3102, USA
Tel.: 301-755-2746; Fax: 301-755-2799; E-mail: fell@pire.org
²Insurance Institute for Highway Safety
1005 North Glebe Road
Arlington, VA  22201-4751, USA

Keywords
Sobriety checkpoints, driving while intoxicated, effectiveness, funding mechanisms, police resources, task forces

Abstract
Sobriety checkpoints have been used by police in the United States for at least the past two decades to enforce impaired driving laws. Research has indicated that sobriety checkpoints are effective in reducing drinking and driving and alcohol-related fatal crashes. Despite this evidence, many police agencies have been unenthusiastic about using checkpoints. Information was collected from all 50 states plus the District of Columbia on the use of sobriety checkpoints. A total of 37 states reported conducting sobriety checkpoints at least once or twice during the year. Only 11 states reported that checkpoints were conducted on a weekly basis. Thirteen states do not conduct checkpoints because of either legal or policy issues. More detailed information was collected from 5 states that conduct checkpoints frequently and matched with information from 5 similar states that conduct checkpoints infrequently. States with frequent checkpoint programs had several common features such as program themes, support from task forces and citizen activist groups, use of a moderate number of police at the checkpoints, and use of all available funding mechanisms (federal, state, local) to support them. States with infrequent checkpoints claimed a lack of funding and police resources as reasons for not conducting more checkpoints, preferred saturation patrols over checkpoints because they were more “productive,” and used large numbers of police officers when they did conduct checkpoints. Ways to overcome perceived barriers to checkpoint use are discussed.
Introduction
Research has indicated that sobriety checkpoints that are well publicized and have high public visibility can serve as a general deterrent to impaired driving (1, 2, 3, 4, 5, 6). A summary of the U.S. literature examined nine studies through the early 1990s and concluded that “the cumulation of evidence supports the hypothesis that checkpoints reduce impaired driving” (7). A demonstration program in Tennessee (“Checkpoint Tennessee”) was sponsored by the National Highway Traffic Safety Administration (NHTSA) in 1995 to determine if highly publicized checkpoints conducted throughout the state on a weekly basis would have an effect on impaired driving in the state. The evaluation of that program showed a 20 percent reduction in alcohol-related fatal crashes extending at least 21 months after conclusion of the formal program (8). A review of the latest literature on the effectiveness of sobriety checkpoints and random breath testing in reducing motor vehicle crash injuries was recently completed by the Centers for Disease Control (CDC). Six studies that met the study criteria found that checkpoints were effective in reducing alcohol-related fatalities and injuries (9).

Despite the evidence supporting the increased use of sobriety checkpoints and guidance on how to conduct them, many police agencies have been unenthusiastic about adopting this practice. Sobriety checkpoints are still underused, except in a minority of states. The present study provided the opportunity to address the question of why this is so. The approach taken was to attempt to determine why some states conduct checkpoints frequently while other states do not, identifying impediments to checkpoint use as perceived by officials in low-use states.

Methods
In cooperation with the National Association of Governors’ Highway Safety Representatives (NAGHSR), a survey questionnaire on sobriety checkpoint use was sent to each state’s highway safety office in June 2000. By the middle of July 2000, all 50 states and the District of Columbia had responded.

Ten states were selected for further study. Five reported frequent use of sobriety checkpoints on a statewide basis and were geographically diverse. Five other states that reported infrequent use of checkpoints were selected for comparison. Efforts were made to select high- and low-use states that were similar in population and geography. Inquiries were made as to who makes the decision to conduct checkpoints in the state, how they are funded, how they are publicized, how many police officers are typically used, opinions as to the effectiveness of sobriety checkpoints, the use of other enforcement strategies, and impediments to conducting more checkpoints.

Telephone and personal interviews were used to gather the data. At least two officials, and sometimes as many as five, were interviewed in each state. In each state selected, in-depth interviews were conducted with at least one official from the State Office of Highway Safety, in addition to top-level police officials (e.g., commanders, chiefs, captains) mainly at the state level.

Results
In summary, 37 states plus the District of Columbia reported they presently conduct sobriety checkpoints, and 13 reported they do not. Of the 37 states conducting checkpoints, only 11 states reported they conduct checkpoints at least on a weekly basis throughout the state. Another 13 states and the District of Columbia reported they conduct checkpoints once or twice a month. There were 8 states that reported infrequent use of checkpoints (every other month or only
during major holiday periods) and 5 states that conduct them only when resources were available (Table 1).

<table>
<thead>
<tr>
<th><strong>Table 1</strong> Results of Sobriety Checkpoint Survey of U.S. States*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Are sobriety checkpoints presently conducted in your state?</strong></td>
</tr>
<tr>
<td>Yes (37 states plus DC)</td>
</tr>
<tr>
<td>No (13 states)</td>
</tr>
</tbody>
</table>

| **How frequently are sobriety checkpoints conducted in your state?** |
| Weekly (11 states) | AR, GA, HI, IN, KY, MS, NY, NC, SD, VT, VA |
| Once/twice a month (13 states plus DC) | CA, CO, DC, FL, IL, KS, MO, NE, NV, NJ, NM, OK, PA, TN |
| Every other month (4 states) | DE, MD, NH, UT |
| Only during major holiday periods (4 states) | AL, AZ, MA, OH |
| Variable, depending upon resources available (5 states) | CT, ME, ND, SC, WV |

| **Where in your state are sobriety checkpoints conducted?** |
| In every county/jurisdiction (20 states plus DC) | AL, AR, CA, DE, DC, GA, HI, IL, KS, KY, ME, MS, NY, NC, OK, SC, SD, TN, UT, VT, VA |
| Only in certain counties/jurisdictions (17 states) | AZ, CO, CT, FL, IN, MD, MA, MO, NE, NV, NH, NJ, NM, ND, OH, PA, WV |

| **Which police jurisdictions conduct sobriety checkpoints?** |
| All (state, local, sheriff, etc.) (27 states) | AL, AZ, CA, CO, FL, GA, IL, IN, KS, KY, ME, MS, MO, NV, NM, NY, NC, OH, OK, PA, SC, SD, TN, UT, VT, VA, WV |
| State and local police only (6 states) | AR, CT, DE, MD, NH, NJ |
| State police only (2 states) | MA, ND |
| Local police only (1 state plus DC) | DC, HI |
| Local police and sheriff only (1 state) | NE |

*Since this survey was conducted, two decisions have changed the status of the law. In July 2000, sobriety checkpoints were held to be legal under the Louisiana Constitution; this overruled an earlier decision. In November 2000, an Indiana intermediate appellate court has held sobriety checkpoints violate the Indiana Constitution; this decision is on appeal.*
**States with Frequent Sobriety Checkpoints**

The 5 selected frequent-use states had several common features:

- In each state, there was a program theme for sobriety checkpoint activities: “Operation Zero Tolerance” (GA), “Operation Pull-Over” (IN), “Project Zero” (NY), “Joining Forces” (NV), “Smart, Safe & Sober” (VA). These themes were highly publicized and provided an impetus for maintaining checkpoint operations.
- In 4 states (GA, IN, NY, NV), checkpoints had been recommended and supported by state task forces. Some of these task forces were statewide (GA, NY), some were from local counties (IN, NV). Task forces generally are made up of officials from different agencies with a role in DWI prevention, citizen activists, and representatives from local businesses and civic groups. They make recommendations to the legislatures, police, etc. regarding DWI issues.
- In all 5 states, a moderate number of police officers (2-15) typically were used at checkpoint operations.
- In 4 states, all available funding from local, state, and federal sources was used to support the cost of sobriety checkpoints.
- In all 5 states, community coalitions and citizen activist groups, such as Mothers Against Drunk Driving (MADD), were supportive of checkpoint programs.

**States with Infrequent Checkpoints**

The 5 selected infrequent-use states also shared common features:

- Many reasons were given for not conducting frequent checkpoints, but most had to do with a lack of funding and police resources. Other reasons included the possibility of a public backlash, lack of coverage by the media, and inclement weather conditions.
- In 4 states (OH, IL, AZ, MD), large numbers of police officers (15 or more, 30 or more in some instances) typically were used at checkpoint operations. This results in higher costs for checkpoint operations because many of the officers are paid on an overtime basis.
- In 3 states (AL, OH, AZ), “saturation patrols” were preferred as an enforcement tool, with respondents stating that they are just as effective as checkpoints and probably “more productive.”
- Community coalitions or citizen groups generally have not pushed the states for more frequent checkpoints. Only one state (IL) reported that a citizen group, Alliance Against Impaired Motorists (AAIM), supported the use of more checkpoints.
- All 5 states indicated that sobriety checkpoints were effective and that more federal funding would probably increase sobriety checkpoint frequency.

**Discussion**

In summary, states with and without frequent checkpoints are distinguished by motivational factors and by their approaches to using financial and manpower resources. In the frequent-use states, the motivation for checkpoints comes from a combination of support by task forces, citizen activist groups, police officials who understand the power of checkpoints as a deterrence strategy, and the public. In these states, police resources generally are used efficiently, and various sources of funding are tapped. In states with infrequent checkpoints, available funds often are not sought and too many police officers are used at checkpoints. Some of the barriers
to checkpoints can be overcome through education and training. Enlightened task forces and citizen activist groups can provide the motivation to use this effective enforcement tool.

Acknowledgements
The authors wish to thank Barbara Harsha, Executive Director of NAGHSR for her assistance in conducting the survey of the states and the highway safety offices from all 50 states, and the District of Columbia for providing the necessary information. Appreciation is also extended to the numerous police officials who were interviewed and provided candid and important information. This work was supported by the Insurance Institute for Highway Safety. The opinions, findings, and conclusions expressed in this publication are those of the author(s) and do not necessarily reflect the views of the Insurance Institute for Highway Safety.

References