

## Alcohol Action Ireland policy briefing

# Alcohol and road safety



April 2026

## About us

Alcohol Action Ireland (AAI) is the national independent advocate for reducing alcohol harm. We campaign for the burden of alcohol harm to be lifted from the individual, community and State, and have a strong track record in effective advocacy, campaigning and policy research.

Our work involves providing information on alcohol-related issues, creating awareness of alcohol-related harm and offering policy solutions with the potential to reduce that harm, with a particular emphasis on the implementation of the Public Health (Alcohol) Act 2018. Our overarching goal is to achieve a reduction in consumption of alcohol and the consequent health and social harms which alcohol causes in society.

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## Foreword by Donna Price, IRVA

Drink driving is entirely preventable. Yet the families we represent are living with the irreversible, sudden and violent death of their loved ones because somebody made the conscious decision to get behind the wheel after consuming alcohol. Behind every statistic is a real person, a life cut short, a future extinguished, and a family left destroyed forever. The impact does not end with the funeral. It lives on in our shattered lives. In the empty chair at the dinner table, in milestones never reached, in grandchildren never met, in ordinary days that suddenly feel unbearable.



We cannot continue to treat drink driving as a lapse in judgement. It is a serious crime - a conscious decision taken to drive while impaired and in so doing to endanger others. If we are committed to reducing road deaths and delivering on Vision Zero, we must have rigorous and highly visible enforcement, and this must be consistent and properly resourced. There must be a real likelihood of being caught if you are drink driving, and of losing your license. We must expect to meet regular garda checkpoints with mandatory intoxicant testing on our journeys, not just on holiday weekends.

Mandatory alcohol interlock devices for convicted offenders should be introduced without delay, particularly for repeat and recidivist offenders. Vehicles should be impounded and automatic custodial sentences for repeat offenders should also be introduced in order to protect other road users. These are not extreme measures - they are proportionate, evidence-based actions designed to prevent further tragedy. Deterrence works when consequences are certain.

Families affected by drink driving do not need sympathy after the fact - they want to see swift and meaningful action that will spare other families the utter devastation of such a preventable loss. We now work tirelessly to spare others. We work to ensure that no one else has to endure the knock on the door that destroys your whole world in an instant.

Despite repeated voiced commitments to road safety and Vision Zero, there has been a complete lack of urgency and tangible progress from Government in implementing the measures that we all know save lives. We cannot afford further delay. Every life lost on our roads is one too many, and each one is much more than a number to their families, friends and communities.

**Donna Price is founder and president of the Irish Road Victims Association**

## Summary

Road safety is an issue which impacts families in every county in Ireland. The current government strategy on road safety set an ambitious target in 2021 of a 50% reduction in road deaths and serious injuries by 2030.[1]

However, there has actually been an upward trend in road deaths with 2025 being the worst year for such deaths since 2014[2], with An Garda Síochána recording 179 fatal collisions which resulted in 190 lives lost on Irish public roads and in public places.[3] Alcohol is a critical factor in road safety with over a third (35%) of driver fatalities (2016-2020) with a toxicology result available having a positive toxicology for alcohol[4] in Ireland. Almost 1 in 8 drivers (12%) admit to drink driving in the past year[5] - that's around 424,500 people[6]. Meanwhile Ireland has the lowest level of roadside breath testing in the EU[7]. Only 5,002 drink drivers were arrested in 2024[8].

Addressing drink driving must be a priority.

### Key facts:

- Over a third (35%) of driver fatalities (2016-2020) with a toxicology result available had a positive toxicology for alcohol.
- Almost one in eight drivers (12%) admit to drink driving - that's around 424,500 people a year.
- Ireland has the lowest level of roadside breath testing in the EU
- Only 5,002 arrests for drink driving were made in 2024.
- There are cumbersome procedures around the collection of blood samples following collisions leading some offenders to evade detection.
- 37% of prosecutions for drink driving do not succeed in court.[9]

This report collates relevant national and international data and puts forward a series of recommendations.

It must also be acknowledged that Ireland's heavy drinking environment is part of the picture and addressing this must form part of the solution.

Much of what is recommended requires cooperation across multiple government departments. However, if taken together they will bring Ireland closer to achieving the RSA's laudable target of zero deaths on Irish roads by 2050.

# Recommendations

## Policy

Act on the significant international evidence that reducing population level alcohol consumption by enhancing controls on price, marketing and availability has an impact in reducing alcohol related collisions.

## Blood sample collection

Address issues re the collection of blood samples from suspected drink drivers. Ireland should introduce the Australian system where any Emergency Dept (ED) doctor/nurse may take a sample and store it in a one-way safe in EDs to preserve the chain of evidence. This would greatly reduce the likelihood of an offender escaping detection.

## Treatment

Drink driving offenders should be provided with access to treatment and there must be a significant enhancement of service provision.

## Garda resources

Gardaí must get greater resourcing to tackle drink driving.

## Conviction levels & loopholes

Ireland's low level of drink driving convictions must be investigated and any legal loopholes must be closed.

## Standard breath test target

Ireland should move to a target equal to every licensed driver being breath tested at least once a year – a standard that has been adopted in Australia and other jurisdictions.

## Blood sample window

The window for taking blood samples following a collision must be extended from the current 3-hour limit to 12 hours. This is particularly relevant given the long distances to some hospitals from collisions in rural areas.

## Vehicles impounded

Vehicles should be impounded at the time of a failed breath test, as is the case for uninsured vehicles.

## Ignition interlock system

Introduce the alcohol ignition interlock system for offenders. The alcohol ignition interlock is a personal alcohol breath-test device for drivers that automatically prevents a vehicle from starting if the individual is over the limit.

## Children's welfare

A welfare check on the family should be carried out when someone provides a positive breath test and there are children or juveniles present in the vehicle.

## Alcohol – a major factor in road safety

Recent years have seen a significant toll on Irish roads with 2025 being the worst year for fatalities since 2014.

Alcohol is a serious factor in relation to road safety in Ireland. Analysis of coronial data found that 35% of driver fatalities (2016-2020) with a toxicology result available had a positive toxicology for alcohol[10]. However, Ireland has the lowest level of roadside breath test checkpoints in the EU.[11] In 2024 just 5,002 people were arrested for drink driving.[12]

A study in France[13] found that drivers under the influence of alcohol are 17.8 times more likely to be responsible for a fatal collision, and the proportion of fatal collisions which would be prevented if no drivers ever exceeded the legal limit for alcohol is estimated at 27.7%. However, there are proven measures as outlined by the World Health Organisation[14] to reduce drink driving and given the toll on our roads from alcohol, it is essential that all such policy levers are implemented.

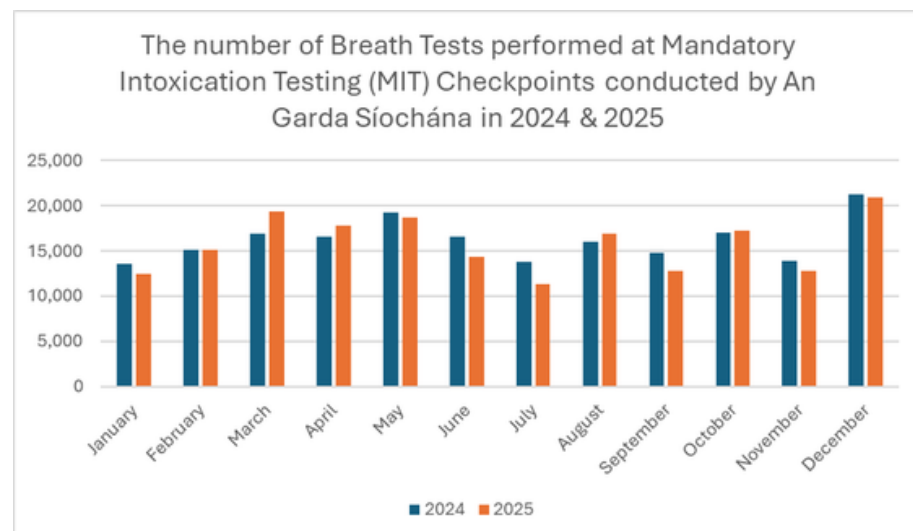
Research suggests a positive relationship between licencing hours and alcohol-related harms, such as drink driving – especially in areas where there are poor public transport services.[15] [16] As a result the World Health Organization (WHO) identified licencing laws as a measure to combat drink driving.[17] Indeed, it was to guard against increases in drink driving that the HSE urged government not to extend the trading hours of pubs and nightclubs via the Sale of Alcohol Bill.[18] This is because medical professionals know, more than most, the impact of drink driving on human health and human life.

## Enhanced enforcement of laws - significant increase in random breath testing needed

According to research[19] from the Road Safety Authority published in 2025, almost one in eight drivers (12%) admit to drink driving in the past year which is up from 9% in 2021. CSO data[20] gives the total number of driving licenses, full and learners held in Ireland in 2024, as 3,538,732. This suggests approximately 424,500 people take a lethal weapon onto roads in Ireland each year after drinking, or around 1,160 every day. However, in 2023 there were just 5,052 arrests for drink driving and in 2024 the number was 5,002[21], while last year there were 4,867 arrests[22].

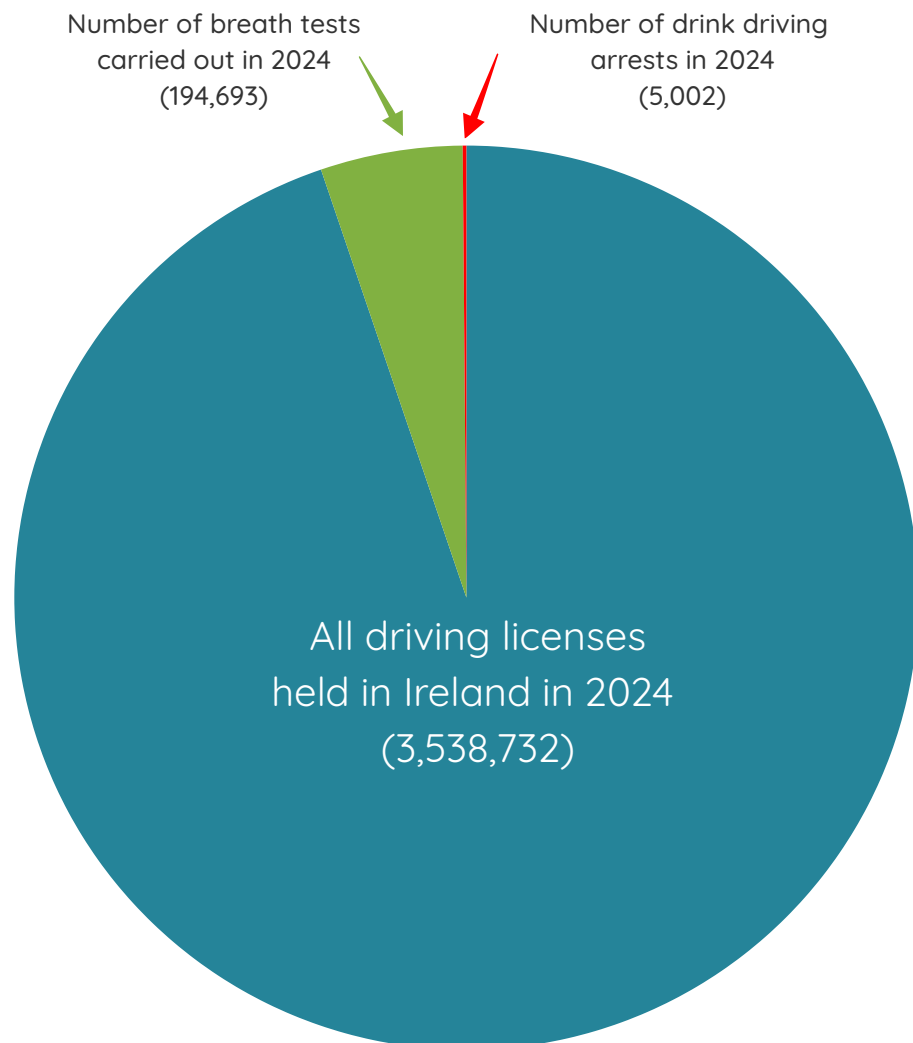
Given that 12% of motorists admit to driving after using alcohol, most drink drivers are not being caught and are freely posing a danger on our roads. This is not surprising as Ireland has the lowest level of roadside breath test checkpoints in the EU according to data from the European Transport Safety Council (ETSC) [23]. An Garda Síochána reports that 189,736 breath tests were carried out in 2025[24]. This suggests a rate of breath testing among licensed drivers of just 5.3%.

While there has been some improvement in the amount of breath testing being carried out annually, the level is still very low. Garda activity at known high-risk times of the year such as at holiday periods are welcome. However, the monthly data[25] makes clear that even during these high-profile campaigns the testing level does not greatly change.



This low level of testing means that offenders know they are not likely to be detected. Indeed the 2025 survey from the RSA indicates that three in four drivers say it is unlikely or very unlikely that they will be tested.[26]

The ETSC recommends that countries should set clear targets for annual road-side breath testing.[27] AAI strongly recommends that Ireland should move to a target equal to every licensed driver being breath tested at least once a year – a standard that has been adopted in Australia and other jurisdictions. There is significant evidence of the efficacy of this approach and for its cost-effectiveness. [28] For example, 14% of driver fatalities in Australia[29] have a positive toxicology for alcohol compared with 35% in Ireland.[30]



<https://alcoholireland.ie/facts-about-alcohol/alcohol-and-driving/>

## Improvements in legislation needed in relation to offending

Alongside enforcement of current legislation there are also a number of issues which should be addressed with additional legislation. These include:

- Vehicles should be impounded at time of a failed breath test as is the case for uninsured vehicles.
- Extend window for taking blood samples following a collision. There is a need for an extension of the current 3-hour limit to 12 hours. This is particularly relevant given the long distances to some hospitals from collisions in rural areas.
- Sample should not need to be taken under Garda caution. Introduce the Australian system where any Emergency Dept doctor/nurse may take a sample and store it in a one-way safe in EDs to preserve the chain of evidence. This would greatly reduce the likelihood of an offender escaping detection.
- The alcohol ignition interlock system should be introduced for offenders. The alcohol ignition interlock is a personal alcohol breath-test device for drivers that automatically prevents a vehicle from starting if the individual is over the limit. This has been under consideration by government for some years, but progress seems to have stalled.[31]
- Greater resourcing of An Garda Síochána to tackle drink driving is required.
- Investigation into Ireland's low level of drink driving convictions is required.

### **Impounding of vehicle at time of a failed breath test**

If a driver fails a roadside alcohol breath test, they are arrested for drink driving. Thereafter, if Gardaí believe the arrested individual to be a threat to the safety of themselves or others, they may detain them for a period of up to six hours after arrest.[32] However, they may also be released at an earlier stage. In addition, Gardaí have the power to deal with the intoxicated driver's vehicle to prevent it from being driven illegally. To achieve this An Garda Síochána will generally secure the vehicle at the scene, or secure it elsewhere if they believe it poses a danger.

Taken together, however, this means that individuals could be released while still intoxicated and retake control of their vehicle, as six hours is only enough time for the body to burn off about six standard drinks which is the equivalent of about three pints of beer. Under the Section 41 Road Traffic Act 1996 Gardaí have the power to impound unlicensed, untaxed and insured vehicles, however, they do not have the powers to impound a vehicle taken from an intoxicated driver.[33]

For example, the vehicle of an uninsured driver may be retained until evidence is given that it is insured in accordance with the law, while an individual arrested for drink driving could, technically, retake control of their vehicle immediately upon release.[34]

Therefore, AAI is calling on the Minister for Transport to ensure vehicles taken from intoxicated drivers are treated in a similar fashion to unlicensed, untaxed, and uninsured vehicles. Under Section 41 of the Road Traffic Act 1996 the Minister can, after consultation with the Minister for Justice, pass regulations authorising and providing for An Garda Síochána to detain, remove, store and subsequently release vehicles which have been taken from a driver who has failed a roadside breath test.[35]

#### **Following a collision**

- Extend time-window for taking blood samples
- Allow ED emergency medicine consultant doctors to collect a specimen without direction by a Garda

There is a need for an extension of the current 3-hour limit to 12 hours. This is particularly relevant given the long distances to some hospitals from collisions in rural areas.

Sample should not need to be taken under Garda caution. Currently, the Road Traffic Act 2010 (as amended by the Road Traffic Act 2014) sets out the obligation for a driver to provide a blood or urine specimen while in hospital in the circumstances where a Garda has formed the opinion that the person was driving or attempting to drive a vehicle where an event occurred in relation to a vehicle in consequence of which or following which a person is injured.[36]

If the Garda forms the opinion that the driver is incapable of complying with the legal requirement of permitting a sample of blood to be taken or of urine to be provided, that Garda has the power to direct a designated doctor or nurse to take a specimen of blood from the driver.[37]

Unfortunately, the current system is not agile enough to deal with the realities of intoxicated driving in Ireland combined with the time-pressures Gardaí find themselves under. The necessity for a Garda to be present to designate a doctor or nurse to take a blood sample from an intoxicated patient who has been involved in a traffic incident decelerates the responsiveness of the system. This is compounded by a condensed 3-hour window which creates additional difficulties as oftentimes Gardaí cannot attend the ED within such a short timeframe.

Resultantly, doctors and staff in Emergency Departments regularly witness intoxicated patients evading drink-drive testing due to such constraints.

Thankfully, some simple legislative and policy changes, in line with internationally recognised standards, can resolve these issues, thus making Ireland's roads safer, reducing pressures on Gardaí, improving efficiency and resource allocation in Emergency Departments, while protecting patient rights and the integrity of the blood sample collection process.

In the first instance, AAI is proposing that emergency medicine doctors be allowed to collect a specimen of blood from a patient, without direction by a Garda, where that patient has been driving and involved in a road traffic incident. The sample would be collected, and witnessed, in the usual way, using the kit provided by the Medical Bureau of Road Safety under the Road Traffic Acts.

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I have witnessed some truly horrific scenes that were the result of drink driving and having to tell someone their loved one has been killed or seriously injured is something I've had to do far too often, when more can be done to eradicate it. Unfortunately, in Emergency Departments we regularly see obviously intoxicated people avoid drink-drive testing due to the law as it currently stands. Similarly, people who make the decision to drink drive are allowed back driving immediately after failing a test, yet vehicles are removed from people who drive without tax and insurance. There is no logic in this.”

Dr Eoin Fogarty,  
Emergency Medicine and Retrieval Consultant, CUH

Thereafter, the sample would be placed in a container with a tamper-evident seal that has a unique identifying number marked on it and stored into a one-way box for collection by a member of An Garda Síochána. This approach is standard practice in many jurisdictions, such as Australia.[38] Furthermore, an expansion of the time window, from 3 hours to 12 hours, within which a blood sample can be taken to test for intoxicants would also help with ED efficiency and resource

allocation while ensuring intoxicated drivers do not evade the law. This is particularly relevant given the long distances to some hospitals from collisions in rural areas.

### **Alcohol ignition interlock system and diversion programmes for drink drivers**

International research has shown that since the early 1990s, the rate of drinking and driving and the decline in serious road crash injuries that are alcohol-related appears to have plateaued at approximately 10% on average globally.[39] However in Ireland almost one in eight drivers admit to drink driving and over a third (35%) of driver fatalities (2016-2020) with a toxicology result available had a positive toxicology for alcohol.

Not engaging with drink drivers after they are caught is a missed opportunity to improve both public health and public safety. Therefore, it is essential to consider mechanisms other than just education, enforcement, and disqualification to mitigate drink driving risk. AAI believes a diversion programme for all drink drivers can be an important mitigation measure in tackling drink driving.

AAI believes that treatment should be prioritised when people are apprehended for drink driving so as to ensure the individual has the opportunity to receive treatment and education that will help reduce the numbers reoffending.[40] Similarly, AAI believes the introduction of alcohol ignition interlock systems offers the opportunity to address drink driving, reduce road fatalities, and protect public health and safety.[41] The provision of treatment services and the introduction of alcohol interlock systems are particularly important given more than 800 drivers were arrested numerous times for drink or drug driving between 2022 and 2024. [42]

The alcohol ignition interlock is a personal alcohol breath-test device for drivers that automatically prevents a vehicle from starting if the individual is over the limit. Ignition interlocks that automatically prevent a vehicle from starting if the individual is over the limit can protect public health and safety while also ensuring a reduction in drink driving recidivism.[43] This has been under consideration by government for some years, but progress seems to have stalled. Indeed, these are solutions which the Road Safety Authority (RSA) have pointed to in their Ireland's Road Safety Strategy 2021-2030 – 'Our Journey Towards Vision Zero'.[44]

#### **Greater resourcing of An Garda Síochána to tackle drink driving**

Unfortunately, Ireland has the lowest level of roadside breath test checkpoints in the EU [45] and in recent years concerns have been raised, via the Crowe Report, that some members of An Garda Síochána tasked with policing the roads were not fulfilling their obligations.[46] This is compounded by the fact there are almost 400 fewer gardaí in roads policing units now than there were 15 years ago, with the number of gardaí in the unit halved since 2009.[47] In addition, data from the Courts Services shows 37.74% of drink driving cases were dismissed between 2020-2023.[48]

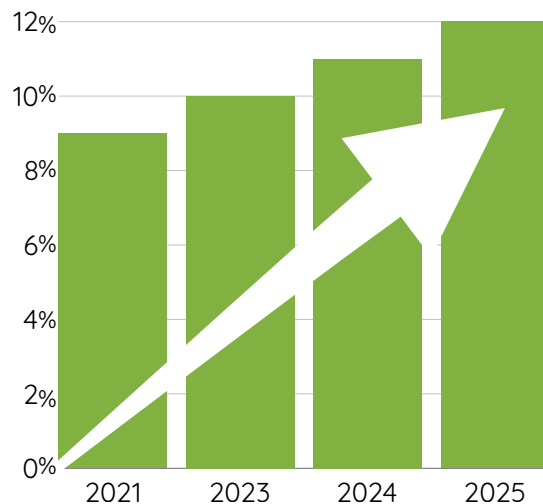
These issues point to a stretched and stressed workforce who are also carrying a significant administrative burden of paperwork. As the Association of Garda Sergeants and Inspectors (AGSI) stated – Crowe Independent Review of Roads Policing highlights the need to deliver on the report's recommendations to strengthen supervision, reform performance policy, and properly resource the force.[49] Indeed, for some time the Garda Representative Association has also outlined how increased paperwork is causing a significant administrative burden for Gardaí.[50] It may be that this has caused issues in terms of operating check points and policing roads.

Therefore, in order to ensure Gardaí have the necessary time to police roads and operate checkpoints there is a need to increase the number of civilian administrators in the service to deal with the paperwork which goes with this type of policing. Additionally, roads policing must see an increase in funding from government, year on year, to work towards the goal equal to having every driver breathalysed at least once per annum.

### Investigation into the low level of drink driving convictions

As outlined, data from the Courts Services shows 37.74% of drink driving cases were dismissed between 2020-2023 – with a conviction rate of just 62.25%. By comparison, an analysis of data from England and Wales shows a conviction rate of 95.7% where a driver has provided a positive breath test or refused to take a breathalyser.[51] While the law in relation to drink driving varies by State in Australia, there are regularly over 10 million random breath tests conducted annually across the country,[52] with some States seeing conviction rates in excess of 80%.[53]

AAI believes it is essential that government investigate the shockingly low conviction rates for drink driving. If there are legal loopholes being exploited, then these need to be closed; while if technical mistakes in paperwork are the cause, then the Gardaí must be provided with additional resources, such as civilian administrators, to deal with the this. Nobody's interests are being served by allowing drink drivers to evade conviction. The situation is putting lives at risk.



RSA data from 2025 shows that 12% of Irish motorists admit to driving after consuming alcohol in the previous 12 months - up from 9% in 2021

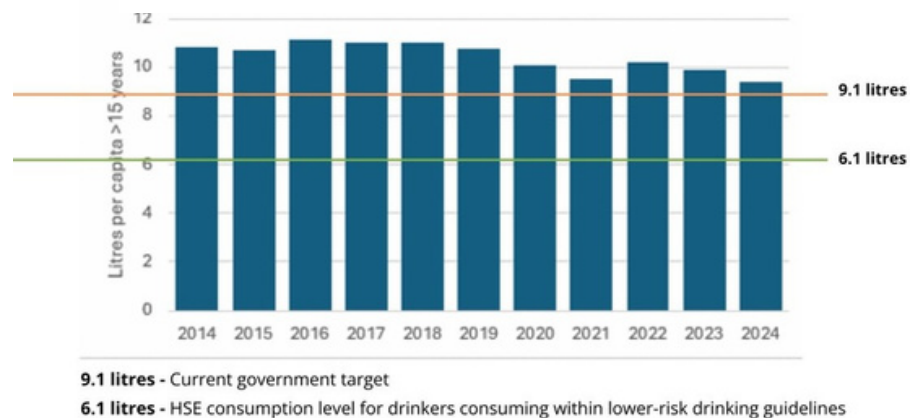
Source: <https://www.rsa.ie/docs/default-source/road-safety/r4.1-research-reports/safe-road-use/driver-attitudes-and-behaviour-survey-2025.pdf>

## Improving road safety by reducing Ireland's high alcohol consumption

Detection of offending behaviour and enforcement of legislation is essential. However, there is also a strong case for prevention measures. There is significant international evidence that reducing population level alcohol consumption by enhancing controls on price, marketing and availability has an impact in reducing alcohol related collisions.[54]

While alcohol consumption per capita has decreased in recent years, partly as a result of legislation such as the Public Health (Alcohol) Act 2018, Ireland is still consuming at high levels and we have the second highest level of binge drinking across OECD countries.[55] To put this in context, if Ireland's adult drinking population were consuming alcohol within the current HSE lower-risk guidelines, consumption per capita would be around a third lower. Consistent efforts across government to reach this target would provide many benefits, including improvements in road safety.

### Ireland's alcohol consumption per capita >15 years



### Ireland's highly affordable alcohol

Research across the EU indicates that a 10% increase in alcohol prices is associated with a 7% reduction in road deaths.[56] In Ireland, the main policy levers in relation to alcohol prices are excise duties, which are set by the Minister for Finance and the level of Minimum Unit Pricing of alcohol which is set by the Minister for Health. However there has been no increase in excise duties in over 12 years and the level of MUP which was introduced in 2022 was actually first proposed in 2015 and needs to be increased in line with inflation.

The net result is that alcohol in Ireland is very affordable. In fact, alcohol for sale in shops is the same price today as it was 20 years ago with research from Sheffield University indicating it is now 85% more affordable.[57] AAI was disappointed that in the October budget there was no change to alcohol excise duties and believe this is a missed opportunity to reduce deaths on Irish roads.



[https://orda.shef.ac.uk/articles/report/Updated\\_analysis\\_of\\_changes\\_in\\_alcohol\\_sales\\_price\\_s\\_taxation\\_and\\_affordability\\_in\\_the\\_Republic\\_of\\_Ireland/28323830/1/files/52854602.pdf](https://orda.shef.ac.uk/articles/report/Updated_analysis_of_changes_in_alcohol_sales_price_s_taxation_and_affordability_in_the_Republic_of_Ireland/28323830/1/files/52854602.pdf)

### Marketing

Ireland has some modest controls on advertising which are designed to protect children from exposure to alcohol marketing. These arise from the Public Health (Alcohol) Act 2018. However, this legislation is still not fully implemented with important measures such as controls on the content of alcohol advertisements not yet introduced. In addition, there are no statutory controls in relation to online alcohol marketing and there is significant evidence of children's exposure to such marketing which promotes alcohol as a risk-free product essential to everyday life and its linkages to increased youth drinking.[58]

While there have been decreases in alcohol consumption across the population in recent years, unfortunately in the age group 15-24 years there has been a significant rise in drinking, from 66% in 2016 to 78% in 2025.[59] This is particularly concerning given the evidence around youth and road safety. For example, a HRB analysis[60] of Garda PULSE data found that 14% of drink-driving arrests were of young people aged 18-24 years, with data from the Road Safety Authority indicating that one-half (49%) of young driver fatalities during 2013-2017, with a toxicology result available, were positive for alcohol. Such gaps in our laws around alcohol marketing must be addressed.



### Availability

There is also a significant body of research which shows the link between increased alcohol availability through longer licensing hours and impacts on road safety.[61] For example, a one-hour extension of late-night opening hours is associated with a 30% increase in road collisions in rural areas.[62] The Programme for Government states there are plans to introduce changes to licensing hours through the Sale of Alcohol Bill/Intoxication Liquor Bill which are in development with the Department of Justice. It is essential that the Government does not make a bad situation worse through such actions.

### Enhanced treatment services

As noted, Ireland has a significant issue with alcohol consumption. Research from the Health Research Board[63] finds that more than half of all who drink are classified as hazardous drinkers and around 20% have an Alcohol Use Disorder – that's around 600,000 people. Despite these high numbers, in 2024, only 8,745 accessed alcohol treatment.[64]

There is significant evidence from the analysis of blood samples by the Medical Bureau of Road Safety[65] that many are driving when several times over the legal limit and there is a high level of repeat offenders; for example 263 drivers were arrested twice in 2024 – this is an increase of 8% on 2023. Such data suggests the likelihood of Alcohol Use Disorders within this cohort. AAI strongly urges that offenders should be provided with access to treatment and that there is a significant enhancement of service provision.

In addition, where someone provides a positive breath test and there are children or juveniles present in the vehicle, AAI recommends that the appropriate services should be notified of the incident to facilitate a welfare check on the children and family. This is incredibly important as we know that alcohol is a risk factor for child neglect and abuse as well as domestic, sexual, and gender-based violence.[66]

## Conclusion

Alcohol is a critical issue for road safety in Ireland. However, policy solutions are available which would make a significant impact. These require a whole of government commitment with co-ordinated actions across multiple departments including Finance, Justice, Health, Media and Transport. There is strong public support for action to address Ireland's alcohol issues despite opposition from vested interests. Surely the government must call time on drink driving on Irish roads.

In 2024, Ireland's alcohol use per drinker aged 15 years or older was:

262 cans of beer  
+  
11 bottles of spirits  
+  
39 bottles of wine  
+  
31 cans of cider



<https://alcoholireland.ie/facts-about-alcohol/how-much-do-we-drink/>

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