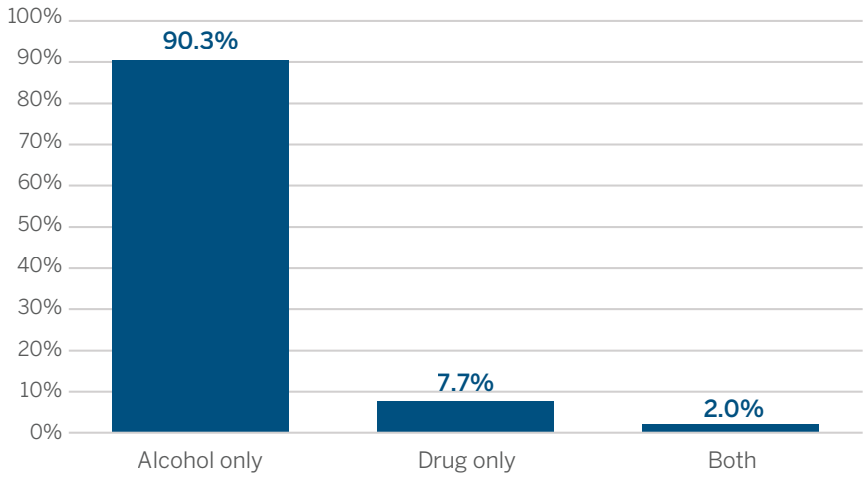
IMPAIRED DRIVING 2025[1]

Alcohol and drug use impair driving. Depressants (such as alcohol, marijuana, and opioids) can slow reaction time and coordination. Stimulants (such as cocaine and methamphetamine) can make drivers paranoid and excitable, resulting in increased reckless and aggressive behavior.[2] In Indiana, drug and alcohol impairment remain a significant contributor to severe traffic collisions, despite declines in recent years.

In 2025, impaired-driving collisions accounted for 1.8% of all Indiana collisions (Table 1). Collisions are identified as impaired-driving collisions when at least one driver has a blood alcohol content (BAC) of 0.08 g/dl or higher or tests positive for a Schedule I or Schedule II controlled substance,[3] or a substance produced when the body breaks down one of those drugs (a metabolite).[4] Most impaired-driving collisions involved alcohol impairment alone (90.3%), while drug impairment alone contributed to 7.7%, and combined alcohol and drug impairment contributed to 2.0% (Figure 1). Collision impairment rates varied by county, ranging from 46.9 impaired collisions per 1,000 total collisions in Randolph County to no impaired collisions reported in Switzerland County (Map 1).

Figure 1. Types of impaired collisions in Indiana, 2025



1 The analysis throughout this brief uses data principally from the Indiana State Police, Automated Reporting Information Exchange System (ARIES), downloaded March 12, 2026.

2 National Highway Transportation Safety Administration. (n.d.). Many substances can impair driving. Retrieved September 2, 2026, https://www.nhtsa.gov/risky-driving/drug-impaired-driving.

3 These schedules are defined in Indiana Code § 35-48-2.

4 This terminology does not indicate that the collision was caused by impairment, only that an impaired driver was involved.

2025 KEY FINDINGS

- Alcohol and drug-impaired collisions accounted for about 2% of all Indiana collisions.
- Alcohol and drug-impaired collisions accounted for 24% of all traffic fatalities.
- Individuals involved in collisions with an impaired driver were 18 times more likely to be killed than those involved in collisions without an impaired driver.
- Impaired-driving collisions occurred most commonly between 8:00 p.m. and 11:59 p.m.
- Male drivers, motorcycle operators, and drivers aged 25 to 44 were most likely to be impaired in collisions.
- Impaired drivers were less likely than unimpaired drivers to wear a seatbelt or use a helmet.

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IMPAIRED-DRIVING COLLISIONS

In 2025, 438 impaired-driving collisions resulted in a fatality or suspected-serious injury.[5] Of these severe collisions, 235 involved one or more alcohol-impaired drivers, 166 involved one or more drug-positive drivers, and 37 involved Drivers who tested positive for drugs, therefore, were involved in 46.3% of impaired-driving collisions resulting in a fatality or suspected-serious injury, compared with 9.7% of impaired-driving collisions overall.

Severe impaired-driving collisions occurred throughout Indiana, but concentrations were evident in urban areas in northeast and central Indiana and several southern counties (Map 2). Twenty counties reported no impaired-driving collisions resulting in a fatality or suspected-serious injury in 2025.

In 2025, impaired-driving collisions accounted for 1.8% of all Indiana collisions

Indiana recorded 177 fatal impaired-driving collisions in 2025. From 2024 to 2025, fatal impaired-driving collisions declined by 22.4%, and from 2021 to 2025, they declined by an average of 10.3% annually (Table 1). Although impaired-driving collisions represented a small share of Indiana crashes (1.8%), they accounted for nearly one-quarter (23.7%) of all traffic fatalities statewide in 2025.

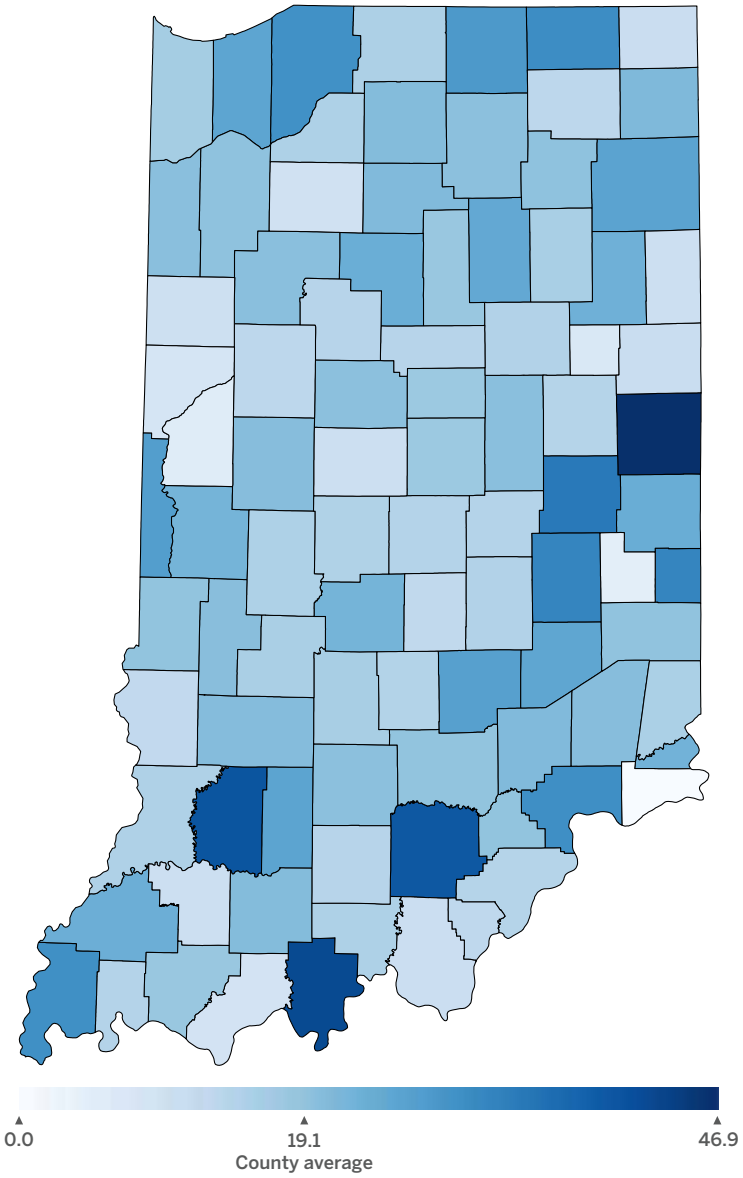
Table 1. Impaired collisions and injuries in Indiana, 2021–25

	2021	2022	2023	2024	2025	Annual rate of change	
						2024–25	2021–25
Impaired collisions	**4,288**	**3,744**	**3,784**	**3,856**	**3,649**	**-5.4%**	**-4.0%**
Fatal	273	194	214	228	177	-22.4%	-10.3%
Non-fatal-injury	1,100	1,048	1,082	1,059	1,054	-0.5%	-1.1%
Property-damage-only	2,915	2,502	2,488	2,569	2,418	-5.9%	-4.6%
Individuals in impaired collisions	**6,699**	**6,232**	**6,458**	**6,717**	**6,315**	**-6.0%**	**-1.5%**
Fatalities	295	212	237	246	189	-23.2%	-10.5%
Non-fatal injuries	1,774	1,531	1,665	1,626	1,578	-3.0%	-2.9%
Not injured	4,630	4,489	4,556	4,845	4,548	-6.1%	-0.4%

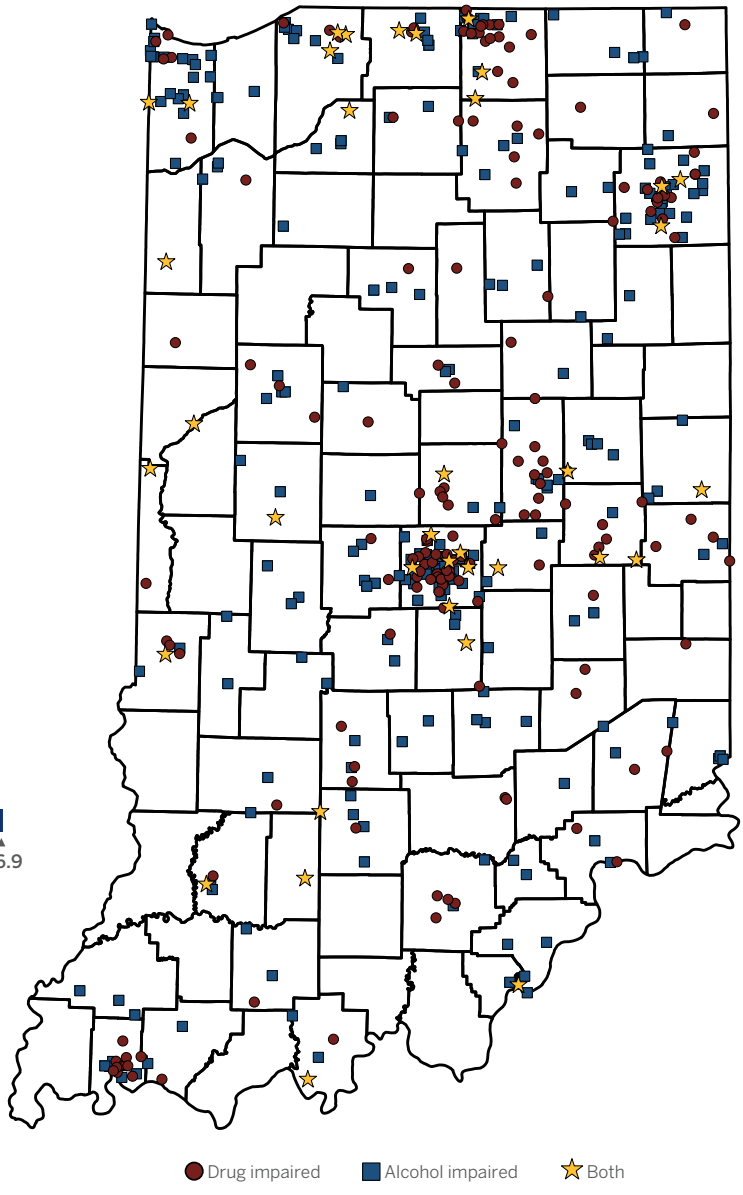
Note: Non-fatal injuries include those defined as suspected-serious, suspected-minor, and possible.

5 Suspected-serious injuries are defined as having one of the following injuries—crush injuries, fractures/dislocations, paralysis, severe bleeding, severe burns, internal damage, severed limbs, or loss of consciousness.

Map 1. Impaired collisions per 1,000 collisions by county, 2025



Map 2. Fatal and suspected-serious-injury collisions in Indiana by type of impairment, 2025



INJURIES IN IMPAIRED-DRIVING COLLISIONS

In 2025, impaired-driving collisions resulted in 189 fatalities. Individuals in collisions with an impaired driver were 18 times more likely to be killed and five times more likely to suffer a suspected-serious injury than individuals in collisions without an impaired driver (Table 2). Individuals in collisions with impaired drivers were also more likely to suffer an injury of any severity than those involving only unimpaired drivers.

From 2024 to 2025, fatalities in impaired-driving collisions declined by 23.2%. From 2021 to 2025, fatalities in impaired-driving collisions declined by an average of 10.5% annually (Figure 2 and Table 1).

The consequences of impaired driving extended beyond impaired drivers and their passengers. In 2025, collisions with an impaired driver also involved 2,393 drivers in other vehicles, 270 passengers in other vehicles, and 68 non-motorists, including pedestrians and bicyclists. Among these, 849 non-impaired drivers, passengers who were not traveling with an impaired driver, pedestrians, bicyclists, and other road users were injured or killed (Table 3), accounting for 68.7% of fatalities and nearly half (45.6%) of all injuries in impaired collisions.

Table 2. Injury rates by collision impairment in Indiana, 2025

	Individuals in non-impaired collisions	Individuals in impaired collisions	Comparative likelihood in impaired collisions
Fatal	0.2%	3.0%	18.1 x
Suspected-serious	1.1%	5.8%	5.2 x
Suspected-minor	2.3%	7.4%	3.2 x
Possible	7.9%	11.8%	1.5 x
No Injury	88.5%	72.0%	0.8 x
Total	100.0%	100.0%	

Figure 2. Fatalities in collisions in Indiana by impairment, 2021–25

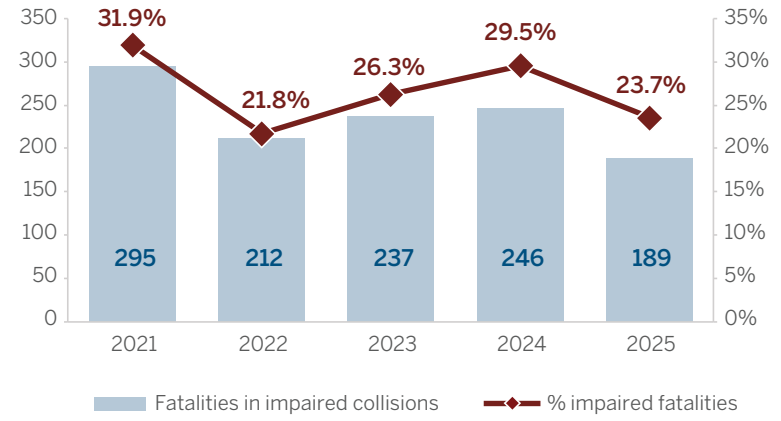


Table 3. Injuries in impaired collisions in Indiana, 2025

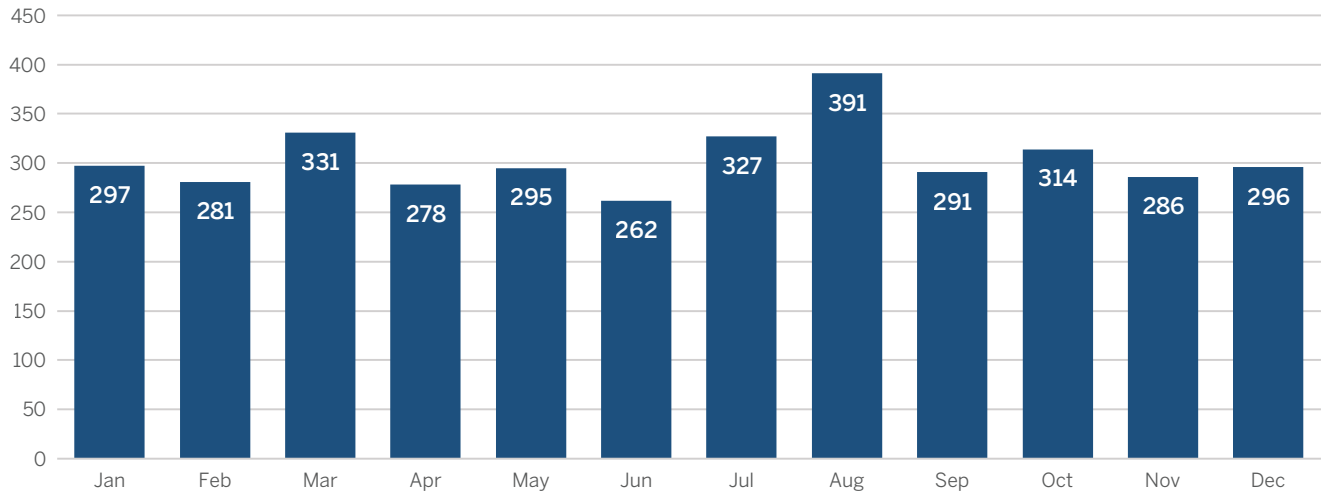
	Fatal	Non-fatal	Not injured	Total
Individuals in vehicles driven by impaired drivers				
Total	59	859	2,666	3,584
Impaired drivers	49	675	2,658	3,382
Passengers in vehicles with impaired drivers	10	184	8	202
Other individuals in the collisions with impaired drivers				
Total	130	719	1,882	2,731
Drivers in other vehicles	73	457	1,863	2,393
Passengers in other vehicles	21	232	17	270
Non-motorists	36	30	2	68

IMPAIRED-DRIVING COLLISIONS BY MONTH, DAY OF THE WEEK, AND TIME OF THE DAY

In 2025, Indiana recorded an average of 304 impaired-driving collisions per month. The greatest number of impaired-driving collisions occurred in August, while the fewest occurred in June (Figure 3).

In 2025, impaired-driving collisions were most common on Fridays and weekends, peaking on Saturdays

Figure 3. Impaired collisions in Indiana by month, 2025



Impaired-driving collisions were most common on Fridays and weekends, peaking on Saturdays. Compared with weekdays, weekends accounted for a disproportionate share of impaired-driving collisions. Mondays through Thursdays had an average of 391 impaired-driving collisions per day across the year, while Fridays though Sundays had an average of 695 impaired-driving collisions.

Across all days of the week, impaired-driving collisions were most common during evening and overnight hours after typical work hours and until typical bar closing hours, from late afternoon through the early morning hours, peaking between 8:00 p.m. and 11:59 p.m. (Table 4). The least common times for impaired collisions were during the morning and early afternoon (between 4:00 a.m. and 2:59 p.m.).

Table 4. Impaired collisions in Indiana by day of the week and hour of the day, 2025

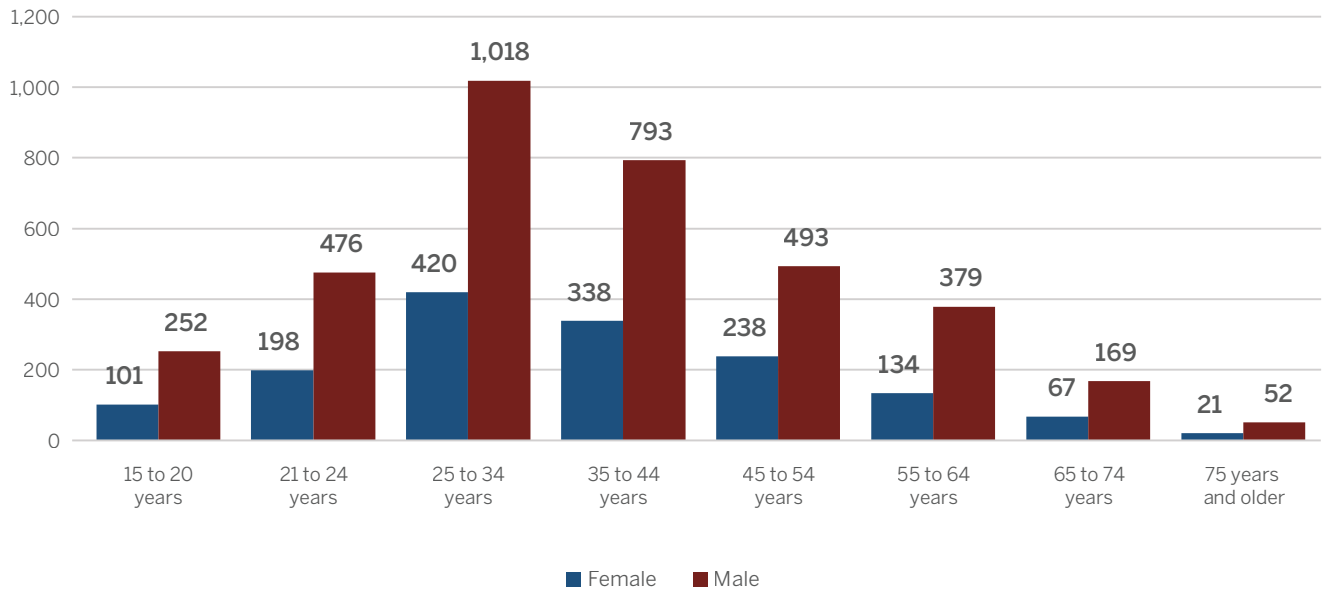
Hour of day	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	Total
Midnight–12:59 a.m.	56	17	16	24	22	30	47	212
1:00–1:59 a.m.	68	20	11	15	30	25	75	244
2:00–2:59 a.m.	50	19	13	18	13	26	62	201
3:00–3:59 a.m.	73	12	16	22	15	22	53	213
4:00–4:59 a.m.	47	8	5	10	15	11	26	122
5:00–5:59 a.m.	21	9	3	9	7	3	22	74
6:00–6:59 a.m.	19	7	4	6	3	5	9	53
7:00–7:59 a.m.	16	4	6	6	4	8	8	52
8:00–8:59 a.m.	7	8	4	7	3	4	5	38
9:00–9:59 a.m.	9	7	5	10	6	3	8	48
10:00–10:59 a.m.	3	6	5	2	11	8	10	45
11:00–11:59 a.m.	7	6	5	5	8	13	18	62
Noon–12:59 p.m.	10	11	7	14	4	14	19	79
1:00–1:59 p.m.	7	12	7	5	5	9	9	54
2:00–2:59 p.m.	15	10	11	22	13	15	13	99
3:00–3:59 p.m.	14	14	13	19	20	20	33	133
4:00–4:59 p.m.	18	16	22	23	24	28	26	157
5:00–5:59 p.m.	38	20	25	36	27	36	34	216
6:00–6:59 p.m.	34	21	25	29	35	37	34	215
7:00–7:59 p.m.	42	28	22	35	37	35	47	246
8:00–8:59 p.m.	27	29	43	35	36	43	49	262
9:00–9:59 p.m.	44	24	29	33	34	50	62	276
10:00–10:59 p.m.	46	15	22	25	32	54	71	265
11:00–11:59 p.m.	32	26	21	32	29	59	84	283
All hours	703	349	340	442	433	558	824	3,649

IMPAIRED DRIVING COLLISIONS BY AGE AND GENDER

In 2025, thre were 2.4 times more impaired male drivers in collisions than impaired female drivers across all age groups (Figure 4). Among impaired male drivers, approximately 28.0% were ages 25 to 34 and 21.8% were ages 35 to 44. Among impaired female drivers, approximately 27.7% were ages 25 to 34 and 22.2% were ages 35 to 44. Together, these drivers aged 25–34 and 35–44 accounted for about half of all impaired drivers for both genders.

In 2025, there were 2.4 times more impaired male drivers were in collisions than impaired female drivers

Figure 4. Impaired drivers by age and gender, 2025

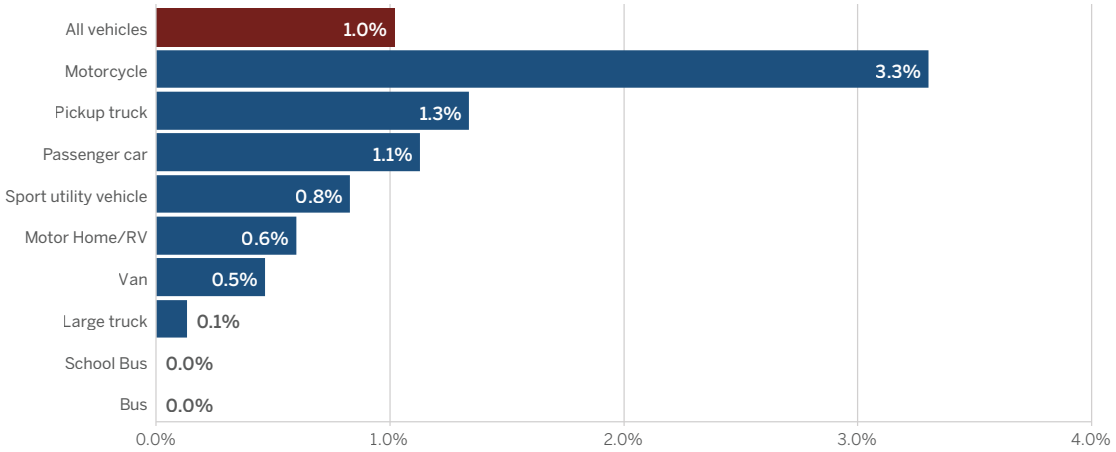


IMPAIRED DRIVING-COLLISIONS BY VEHICLE TYPE AND SAFETY EQUIPMENT USE

About 1% of drivers in collisions in 2025 were impaired. However, motorcycle operators were over 3 times as likely to be impaired in collisions than drivers of other vehicle types (Figure 5). Drivers of sport utility vehicles (0.8%), motorhomes (0.6%), vans (0.5%), large trucks (0.1%), buses (0.0%), and school buses (0.0%) in collisions were less likely to be impaired on average.

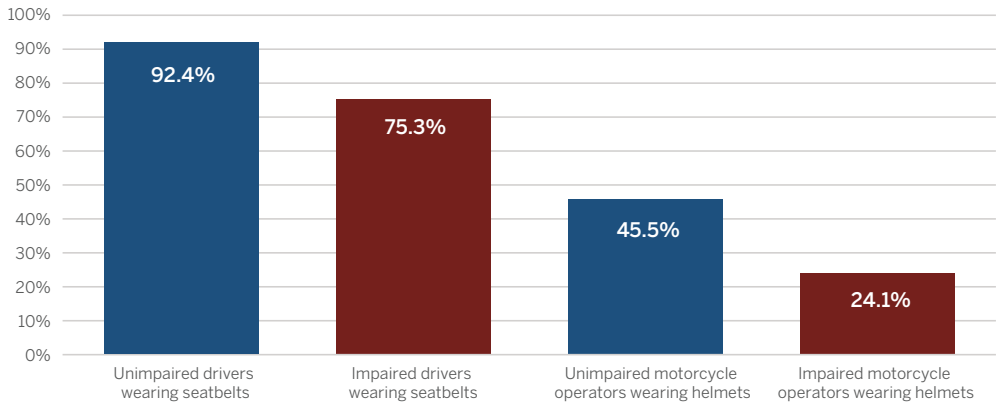
Driving while impaired is an inherently risky activity, and the impairment can often lead to engaging in other risky behaviors.[2] For example, while 92.4% of unimpaired drivers wore seatbelts and 45.5% of unimpaired motorcycle operators wore helmets at the time of the collision, only 74.9% of impaired drivers and 24.1% of impaired motorcycle operators used this safety equipment (Figure 6).

Figure 5. Percent of impaired drivers in collisions by vehicle type, 2025



Notes:
1) Motorcycles include vehicles classified as motorcycles, motor-driven cycles Class A and Class B, mopeds, and motorized bikes.
2) For this analysis, buses are large motor vehicles with drivers that seat nine or more persons. School buses are considered separately.
3) Large trucks are trucks with over 10,000-pound gross vehicle weight rating, including single unit trucks and truck tractors. Large pickup trucks are excluded to avoid double counting.
4) Excludes animal-drawn vehicles (non-motorized vehicles), farm vehicles, combination vehicles, off-road vehicles, golf carts, snowmobiles, pedestrians, bicycles, and unknown vehicles.
5) No collisions in 2025 involved impaired drivers of buses or school buses, and only one impaired driver was in a motorhome/recreational vehicle.

Figure 6. Driver safety equipment usage by impairment status, 2025



Notes:
1) Utilization of safety equipment is calculated for drivers of passenger-vehicles and motorcycles with known restraint status or helmet usage.
2) A motorcycle operator is a driver of vehicles classified as motorcycles, motor-driven cycles–Class A and Class B, mopeds, and motorized bikes.
3) For the purposes of this chart, drivers are operators of passenger vehicles, including cars, pickup trucks, sports utility vehicles, and vans.

Indiana Traffic Safety Facts

Designing and implementing effective traffic safety policies requires data-driven analyses of traffic collisions and their causes. To assist in the policy-making process, the Indiana University Public Policy Institute (PPI) collaborates with the Indiana Criminal Justice Institute (ICJI) to analyze annual crash data from the Automated Reporting Information Exchange System (ARIES) maintained by the Indiana State Police. These statistics are used to inform the public, practitioners, as well as state and national policymakers on matters of road safety. They also serve as the analytical foundation of traffic safety program planning and design in Indiana.

This publication—Impaired Driving, 2025—is one in a series of Indiana Traffic Safety Facts publications. The series also includes Indiana Crash Facts 2025, Indiana County Profiles 2025 and two additional topical issue briefs. Funding for these publications is provided by ICJI and the National Highway Traffic Safety Administration (NHTSA).

The Indiana Criminial Justice Institute

The Indiana Criminal Justice Institute (ICJI) serves as Indiana's central hub for public safety funding and research, managing more than $300 million in state and federal funds and administering grants to public and nonprofit partners engaged in the criminal and juvenile justice systems, traffic safety, and victim services.

The ICJI Traffic Safety Division leads statewide efforts to reduce injuries and fatalities on Indiana's roadways. The division oversees state and federal funds awarded to Indiana by the National Highway Traffic Safety Administration (NHTSA), the U.S. Department of Transportation, the Federal Highway Administration, and the Federal Motor Carrier Safety Administration. In this role, ICJI manages grants, coordinates targeted enforcement with state and local law enforcement agencies, develops and distributes educational materials, and executes campaigns aimed at improving public awareness and promoting safer driving behaviors.

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