

OLDER DRIVER SAFETY AND TRANSITION

FOR THE MATURE DRIVER



Are you 60 years of age or older and a driver?

Are you comfortable in all traffic situations as you were 10 or 20 years ago?

How comfortable in traffic do you expect to be in the next 10 or 20 years?

If you are completely comfortable in all driving situations, that is good news. However, you might know older drivers who are too hesitant, slow or just unable to continue driving. It can happen and, no doubt, you want to be sure this does not happen to you.

It is critically important that older drivers are as safe as they can possibly be because they will be driving on the nation's roads in increasing numbers. As the number of older adults in the United States increases dramatically in the coming decades, so too will the number of older drivers on the roads. In fact, the 29 million older drivers now will almost double, reaching 57 million in about 20 years.

Certain changes related to the aging process may make the highly complex skill of driving a car increasingly difficult. These include changes in vision, hearing, flexibility and strength. However, these changes are not consistent from one individual to another, and they do not happen at the same age in each person.

What Can You Do?

There are steps you can take to assure your ongoing safety as a driver. These include:

- Doing a self-assessment of your driving
- Taking a driver-refresher course
- Making adjustments in your automobile
- Changing your driving habits
- Getting an objective driving evaluation
- Consulting with a Driver Rehabilitation Specialist

Self-Assessment

It goes without saying—we should all monitor physical changes as we age. Regular eye exams, hearing exams and physical check-ups are advisable for everyone—as are remedial actions to respond to any problems identified. How are these changes affecting your driving? A candid self-assessment is appropriate to identify immediate adjustments that you can make.

Vision is particularly important because it is the primary sense used in driving. About 90 percent of the information required for safe driving relates to vision. Cognition and physical ability are other key factors in driving.

(DriveWell curriculum, chapter 2)

Medical conditions can affect driving.

First, talk with your doctor. Perhaps a simple medication change can positively affect your driving. The National Highway Traffic Safety Administration (NHTSA) has a series of publications that address “Driving When You Have...”

The “haves” include arthritis, cataracts, diabetes, macular degeneration and many other conditions. To obtain a copy of any of these booklets, go to:

www.nhtsa.dot.gov, click on “Senior Driving,” then go to the right-hand column, “Additional Resources.” Click on “Driving when you suffer from...”

This gives you a list of conditions, each linking to the appropriate brochure.

Are you saying, “But I want to stay on the road. Who can help with that?”

Driver Refresher Course

At this point, you might decide to enroll in a driver-refresher course, such as the one offered by AARP, the **Driver Safety Program**. Learn more about the course at **www.aarp.org/home-garden/transportation/driver_safety**. This information is

available for all drivers 50 years of age or older, either in a classroom setting or online. Your local Area Agency on Aging (AAA) may be able to suggest other resources in your community, such as the local Auto Club (the other AAA).

Driving has changed a lot since you first learned. This is a chance to catch up with new laws and strategies, as well as changing conditions: bigger roads, increased traffic congestion, changes in vehicle and road design. Participation in a driver refresher course could have other positive benefits, such as reduced automobile insurance premiums.

Your Car and You

You can make adjustments for your own driving safety. A program called **CarFit**—offered through the local Auto Club, the American Occupational Therapy Association and AARP—offers an evaluation of the “fit” between you and your car. Something as simple as a cushion on the driver’s seat could make a big difference in your safety. To learn about safe driving programs scheduled near you, visit www.car-fit.org or contact your local Area Agency on Aging or Auto Club.

If you decide that there is no adjustment that will make you feel safe in your car, consider purchasing a new car. Information from the AAA (www.AAA.com) can help you to compare important safety features of various makes and models, including navigation systems, parking-assist systems and traction control.



Changing Your Habits

Meanwhile, there are simple driving adjustments that you can make on your own. You might have already heard about the relative ease of making three right hand turns, rather than a risky left-hand turn, in the face of oncoming traffic. This is an especially useful tactic, since a large number of traffic accidents involve left-hand turns at intersections.

There are other adjustments, as well. For example, consider the following:

- Drive in daylight, but not at night
- Drive during off-peak traffic hours
- Drive on familiar roads
- Drive on lower-speed roads
- Take shorter trips

There might well be additional adjustments that make you more comfortable behind the wheel. Give them a try! That is better than the alternative many individuals choose - to stop driving altogether, rather than take a chance on a test or an interaction with someone who might judge their abilities.

If you are sure that stopping driving is best for you, do so. 600,000 individuals age 70+ stop driving each year. But, if you are considering giving up driving only because you are afraid of hearing bad news, know that the news might actually be good—there might be changes that can help you drive safely longer.

Mobility Planning

If you have decided you want to stop driving or realize that you may need to stop driving in the coming years, then it is also time to start thinking about your **mobility plan** for the future.

First, consider the alternatives to driving. Walking, for example, has multiple health benefits in addition to being less expensive than using your car for short trips. Walking, bicycling, even riding with friends offer benefits to the environment and reduce the hassle of operating and parking your car.

Next, identify alternative means of transportation that are available in your community. You might try riding the bus or taking advantage of other transportation alternatives, to get a feel for them and decide how best to use them.

Get a list of local transportation resources—a community guidebook, newspaper insert or brochure. Contact your local Area Agency on Aging (AAA)—the central point of contact for information for those 60 and older in your city, county, or region. The Area Agency on Aging may have a guide to transportation options or refer you to an organization that has one.

To identify your local Area Agency on Aging, call the Eldercare Locator at 800.677.1116.

It might be necessary to create your own directory of transportation options. In addition to contacting your local Area Agency on Aging for information, contact the Public Transit Agency, local taxi companies, your church and civic organizations or clubs. Some organizations offer volunteer driver programs that provide individual or group trips.

A **mobility plan** is an assessment of what you will need to maintain connection to your community (including shopping and social activities) and a specific, defined path that will lead you to it. The plan should include all of the places you need and want to go, and how you can get there without driving. Your mobility options might include walking, cycling, using public transportation, as well as individuals or groups that offer rides.

Additional Considerations

At some point it most likely will become necessary to give up the keys. Most women outlive their ability to drive by 10 years, men by about seven years. Consider these actions:

- Develop a mobility plan that includes a list of available transportation options that might meet your needs. Planning now will result in safety, savings and peace of mind in the future.
- Try out some of the options – such as riding the bus or using a taxi - now. You might find that you enjoy letting someone else do the driving.
- Invest time and money in resources such as one of the programs described above. A Driver Rehabilitation Specialist may hone your driving skills and keep you safely on the road longer.

Evaluation

A first level evaluation is an honest look at a checklist of **potential warning signs** that driving might not be as safe as you want it to be:

- Vehicle crashes
- New dents or dings in the car
- Observations by neighbors or friends about unsafe driving
- Two or more traffic tickets, warnings, collisions or near misses in the last two years
- Getting lost on familiar streets.

Next, consider getting an **objective evaluation** of your driving. Take a family member or friend out for a spin. Demonstrate your skills and ask for feedback. Then decide if a more in-depth assessment is warranted.

If you want to see the results of an objective evaluation of your driving skills, consider a self-assessment resource—a DVD, **“Roadwise Review,”** available through the AAA Foundation for Traffic Safety. Use it at home, for free, accessing it on your own computer, to get a quick idea of any potential problems. Or order a copy of the “Roadwise Review” DVD at **www.seniordrivers.org/home/toppage.cfm**.

Either the results of “Roadwise Review” or your own analysis of your driving challenges may convince you to go a step further. **“DriveSharp”** is a new product from the AAA Foundation for Traffic Safety. This is an interactive program that retrains the brain to take in more essential information.

You can get a taste for it— and get a sense of your own crash risk — at **<http://drivesharp.positscience.com/about-drivesharp.php>**. The program is available for \$99 plus shipping and taxes.

**If you’ve reached this step and are thinking
that you might have identified some problem areas,
there is still more help at hand.**

Consult a Driver Rehabilitation Specialist

If further analysis of your driving skills is called for, try working with a **Driver Rehabilitation Specialist**. These professionals are usually Occupational Therapists who have received special training on assessing and finding ways to improve driving skills. The Driver Rehabilitation Specialist can suggest some changes in your car or in the way you drive—all geared to keeping you on the road longer—safely.

You can locate a Driver Rehabilitation Specialist by contacting the American Occupational Therapy Association at **www.aota.org/olderdriver**, or the Association for Driver Rehabilitation Specialists at **<http://aded.net>** or toll-free phone at 866.672.9466.

The services of the Driver Rehabilitation Specialist are not covered by insurance and might cost a couple of hundred dollars. However, consider this an investment in safety, just as you would repair or replace brakes to ensure that your car is safe on the road.

Take charge now to assure continued safety and active mobility in the years ahead!

Resources

Transportation Options: Eldercare Locator, to link to local AAA and Title VI programs, **1-800-677-1116**

Refresher: www.aarp.org/home-garden/transportation/driver_safety.

Evaluation: www.seniordrivers.org/home/toppage.cfm

Reaction: drivesharp.positscience.com/about-drivesharp.php

Assessment: www.aota.org/olderdriver or <http://aded.net>

You and your car: www.car-fit.org

New car: www.AAA.com

Medical conditions: www.nhtsa.dot.gov

Choices for Mobility Independence—

Transportation Options for Older Adults: available from the National Center on Senior Transportation, NCST, www.seniortransportation.net



NCST

*National Center on
Senior Transportation*



Advocacy. Action. Answers on Aging.



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Based in Washington, D.C., the National Center on Senior Transportation is administered by Easter Seals, Inc. in partnership with the National Association of Area Agencies on Aging through a cooperative agreement with the U.S. Department of Transportation, Federal Transit Administration, and with guidance from the U.S. Department of Health and Human Services, Administration on Aging. The contents of this publication are solely the responsibility of the authors and do not necessarily represent the official views of the Federal Transit Administration.