Many older people think that their driving is safe...after all; they have been driving for a long time. Just because a person has been driving for 40, 50 or 60 years does not make him or her safe behind the wheel of a car. At the same time, just because someone is 80 or 90 years of age does not mean he or she is unsafe to drive.

Findings from research studies have found that when safety becomes a concern, older people respond in one of three ways. They...

1. voluntarily stop driving,
2. reluctantly stop driving, or
3. continue driving, though considered unsafe.

After a brief review of each of the three profiles, we discuss driving strategies and recommendations to help family address concerns and provide support.

DRIVER PROFILES

1. VOLUNTARILY STOP DRIVING – These are people who proactively make a personal choice to stop driving. They often sense a change in their driving skills and ability, and may be uneasy behind the wheel of a car. People in this category often pick a date to stop driving such as a birthday or the first day of a month. When the date arrives, they may let their driver's license expire and sell their car or turn over the car keys to a family member.

   Reasons people in this category stop driving include:
   - No longer have a need to drive (e.g. suitable transportation alternatives).
   - Concern for their own personal safety and the safety of others.
   - A recent scary or uncomfortable situation, ‘near-miss’ incident, traffic ticket or accident.
   - Not wishing to put family through the frustration they may have personally experienced trying to convince a loved one to stop driving.

2. RELUCTANTLY STOP DRIVING – These are people who over time come to accept the reality that their driving skills are not as sharp as they once were. Family members and friends often play an important role by convincing a rationale person of safety concerns.

The National Institute on Aging estimates that over a half million people age 70 and older give up their keys each year. While many people voluntarily give up their keys, others may continue to drive, as they do not recognize or admit a change in skills that may impair their ability to drive safely.
Advisors (e.g., health care professional, insurance agent) may also influence a person’s decision to stop driving. People in this category often need encouragement and prodding when deciding it is time to hang up the car keys. Reasons people in this category stop driving include:

- Deteriorating health may force a person to hang up the keys
- Failure to meet the requirements (e.g., passing the vision test) to renew a driver’s license may lead a person to stop driving when his or her license expires
- Agreeing with safety concerns or the insistence by family that a person stop driving
- Operating (e.g., gas, insurance) and maintaining the car may be too costly for a person to continue driving, especially for someone on a fixed income

3. CONTINUE DRIVING, THOUGH CONSIDERED UNSAFE – People in this category often have unrealistic confidence in their driving skills and abilities. They often express a need to drive as they feel there are no suitable and satisfactory transportation options to get from place to place – and that may be true. When family or friends express concern, a common response is often “you just don’t understand.” These people have often been self-sufficient all their lives and may have a difficult time depending on, or asking, others for a ride. People in this category usually continue to drive until one of the following occurs:

- They are unable to pass the vision test required to renew their driver’s license
- A person’s license is revoked
- They are denied, or do not qualify for, auto insurance
- Injury, illness or deteriorating health makes it unrealistic for a person to drive
- A vehicle is no longer operational (e.g., due to an accident or neglect of maintenance)

**NOTE:** Lack of a valid driver’s license and automobile insurance does not necessarily mean a person has stopped driving.

**DRIVING STRATEGIES**

While there are many factors that contribute to a person’s decision to continue driving or stop driving, be careful not to underestimate a person’s perceived need to drive (even if he or she doesn’t drive very often). Think about it, if someone were to take away your license, you no longer have the freedom and flexibility to go where you want, when you want. Reluctance to ask family and friends for a ride and a perceived lack of transportation alternatives – whether real or imagined – are real concerns.

- Older people who voluntarily stop driving tend to have a plan for ‘life after driving.’ They have usually considered other forms of transportation or know, and are comfortable relying on, family and friends who can drive. People who are uncomfortable relying on family and friends may hire a driver (e.g., taxi, caregiver, or private car) or utilize public transportation. People who live in a retirement community may find it easier to stop driving as transportation is often available for health care appointments, social and recreational outings.

- People who reluctantly stop driving often need encouragement and support to reach the decision to stop. Before they stop driving, they may restrict their driving to the daytime and familiar roads; avoid rush hour traffic, busy roads and highways; and limit driving when the weather and road conditions are favorable.
One of the biggest challenges for many families is when a loved one makes use of unsafe driving strategies and continues to drive, despite hearing the concerns of family and friends. According to findings from the NHTSA Model Driver Screening and Evaluation Program (2003), drivers with undiagnosed health problems often lack awareness of potential limitations. As a result, they tend to overestimate their capabilities, especially when they feel they must drive in order to get to a doctor’s appointment or somewhere else they consider vital. These drivers may drive using adaptive strategies, such as those listed here, even though unsafe.

- Someone may limit driving to roads where he or she knows where the stop signs and traffic lights are located.
- A person who is unable to turn his or her neck easily may drive a route that will enable them to make only right turns in order to get to the destination.
- Someone may avoid unfamiliar roads, intersections without a left turn lane and arrow, and intersections without a four way stop.
- A person may rely on verbal cues from a passenger (known as co-piloting) to assist in driving. Co-pilots often help with parking and backing up by telling the driver when it’s okay and not okay. A co-pilot might alert the driver regarding a pedestrian crossing at an intersection, or of an upcoming stop sign or traffic light.

In an effort to continue driving, a driver who might be considered unsafe may justify his or her driving one of the following ways:

- Indicate that with a valid driver’s license and auto insurance it is his/her right to drive.
- Suggest that driving is necessary, as it is the only way to get to medical appointments or other important activities.
- Compare his/her driving with that of someone else who is considered unsafe and therefore think, “I’m not that bad.”
- Assume safe driving ability if he/she has a clean driving record of no accidents or tickets.
- Believe safe driving ability if no concerns have been expressed by his/her physician.

**RECOMMENDATIONS**

It is difficult to predict how a person is likely to respond when his or her ability to safely operate a motor vehicle comes into question. Based on the three driver profiles outlined above, the following are some recommendations to assist family and friends as they help a loved one with whatever decision is made.

1. If a person voluntarily stops driving, chances are the decision has been well thought through. It is vital to minimize any negative consequences to the socially responsible decision to give up driving. In addition to supporting the decision and affirming the person’s choice, take steps to help avoid a loved one from becoming socially isolated. The socially active older person requires transportation not only to medical appointments and business meetings, but also to restaurants, theaters, retail shops, bridge games, parties, etc.

2. If a person reluctantly stops driving, reinforce the decision whenever possible and appropriate, especially within the first few days and weeks after a person stops driving. In addition, seek support and affirmation from others. For example, a trusted health care professional may congratulate the older person on making this very important and tough decision. When a person stops driving, do not be surprised if there is a desire to keep his or her driver’s license. For many people a driver’s license is a prized possession and a source of
identification. When it is time to stop driving, talk about what to do with the car. If a person’s decision to stop driving is not yet permanent, family might offer to store the car somewhere other than at the former driver’s residence. For some people getting rid of the car can help with making a ‘clean break’ from the unsafe activity. The temptation of a parked car may be too much for a person to resist. Others may want to keep the car and make it available to family and friends for when they assist with driving.

3. If a person continues to drive despite safety concerns talk with your health care professional and request a referral to an occupational therapist for a driver evaluation. Whenever possible, try not to let your concerns about a loved one’s driving negatively affect the overall relationship. Ideally, family members should express their concerns and provide encouragement and help. Family members should be firm about what they believe is safe and unsafe. If you believe your loved one is unsafe, tell him or her why and then let him or her know that you will not be a passenger in his or her car anymore. As appropriate, you might point out concerns such as unexplained scratches or dents on the car. When a person expresses frustration about his or her functional abilities, take the opportunity to restate why you believe a limitation makes driving unsafe. Also, as accidents involving older people are reported by your local media, share the information with your loved one. Let your loved one know you hope that never happens to him or her. (Section 6 covers intervention strategies and offers suggestions to help families take action.)

Whenever possible, provide transportation or make arrangements so that the need for a person to drive is reduced. Whenever a loved one stops driving, it is important to help that person with transportation. Do not overlook or underestimate the need for transportation to social and recreational activities. It is important for people who stop driving to get out of the house and remain as active as possible. Isolation and depression can become a problem for people who do not drive.

The Center for Aging with Dignity offers the Driving Series as a community service. We are devoted to keeping people “SAFE After 60” by advocating for and advancing best-practice programs on the safety and mistreatment of older people. (D2-July ’11) Copyright © 2006-2011 Charles Puchta – University of Cincinnati. DISCLAIMER – This publication is designed to raise health awareness and is not intended to replace the advice of health care professionals.

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