

To Drive or Not to Drive: Answers to Important Questions about the Safety of an Older Loved One Who is Driving

Headline: “Two Killed When Car Careens Out of Control.” Our first thought is a drunk driver probably caused the accident; but as we read more, we discover that the driver was not drunk, but 86 years of age. As our society careens wildly toward the “graying of America,” so we are facing the challenge of a growing population of licensed drivers over the age of 65. This number will reach more than 40 million by the year 2020. We all hope to drive as long as we live. Driving contributes to a sense of independence and being in control. Remember the significance of first receiving your driver’s license? Imagine how threatening it must feel to have someone ask you to relinquish it.

Why are seniors at risk?

As we age, our bodies and minds change. Vision and hearing become less acute, bones and muscles become weaker, and mental and neurological changes can affect our memory and response time. Our ability to react quickly and “multitask” may diminish.

In addition, mature drivers are more likely to drive while taking several medications. These medications typically affect us differently at 60 than at age 20. Taking medications does not mean you cannot drive but does mean there needs to be more planning involved. First, check with your pharmacist or health professional about how a medication may affect driving. There are some medications that impair a person’s ability to drive. If you don’t know how it will affect you, avoid driving. Second, take only the prescribed dose and frequency. Third, if you experience side effects from a drug that could impair your ability to drive, plan driving when the side effects are less likely to occur. Finally, never combine medications and alcohol.

When do seniors have the most difficulty?

Though senior fatality rates have remained stable, their crash rates have increased. Older drivers have a more traffic violations, collisions, and deaths per mile than younger drivers. Plus, they are more seriously injured when an accident occurs. Particular problem areas are intersections (left-hand turns), driving at night and heavy traffic. Because of changes that affect response time, it is harder to judge distance and navigate through those traffic conditions that require a fast reaction time or splitting one’s attention.

What can be done?

Approach the situation from a problem solving approach. Gather information that identifies whether there is a problem and if so how can it be resolved.

1. Evaluate driving ability. Testing can be completed through a computerized test or an organization that offers road tests for seniors. The AAA also offers a “Roadwise Review” that is available on a CD-ROM. It tests basic driving ability in the privacy of the individual’s own home.
2. Arrange for a medical evaluation. Let the clinic staff know about the concern. If the doctor is concerned about driving, ask him or her for a letter to take to the Department of Motor Vehicles.
3. If the concern is immediate, arrange for alternative transportation. Isolation and the inability to reach out into a community will only compound the loss of driving.
4. Hang up the keys. If the medical &/or driving test indicates there is a safety problem, the driver or a family member need to make the decision. According to a study by Dr. Dianne Persson of the Oklahoma State University College of Osteopathic Medicine, older drivers want to make the decision to quit by themselves. The decision is usually a careful process in which seniors gradually reduce their driving. However, as a family member, you may need to take away keys, put a notch on the key so it won’t work or place a club on the steering wheel.
5. Sell the car. If needed, assist the older adult to sell the vehicle, thereby saving the cost of insurance and maintenance.

What safeguards are in place?

All states have procedures in place for licensed drivers of any age who no longer meet the standards for driving because of physical or mental illness. States may require a physical or mental examination or a retake of the driving test. Based on the results and the person’s fitness to drive, the licensing agency may allow the person to keep the license; refuse to renew it; or suspend, revoke or restrict it. Typically, restrictions include prohibiting nighttime driving, requiring the vehicle to have additional mirrors, restricting driving to a specified places or a limited radius from the driver’s home and/or shortening the renewal cycle.

Fourteen states have stricter license renewal provisions for older drivers. Examples include more frequent license renewal cycles for drivers over 65 or 70, in person license renewal rather than electronically or by mail, and additional testing (for example, vision and road tests). Florida was the first state to open Senior Safety Resource Centers. Seniors can take tests to assess mental or physical challenges that may affect their driving. DriveABLE is a computerized test that can predict with 95% accuracy who is safe to drive and who is not.

What more could be done?

Ideas to improve safety for older drivers include:

- Improving the design of roadways
(well lit crosswalks, larger and more legible signs)
- Add left-turn-only lanes at intersections
- Design instrument panels for easier reading
- Modify the vehicles for easier access
- Provide convenient transportation options

What are some common signals of unsafe driving?

Watch for the following signals:

- Stopping at a green light
- Stopping when there is no stop sign
- Stopping in the middle of intersections
- Mistaking the gas pedal for the brake pedal
- Finding traffic signs and signals confusing
- Running stop signs or red lights
- Getting lost in familiar places
- Changing lanes without looking
- Hitting or nearly hitting cars, people, or objects

There are additional organizations that evaluate driving skills. Check the web for those near you or contact RISE For Seniors, PA for more information.