

# Safety and the OLDER DRIVER

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ALZHEIMER'S DISEASE RESEARCH  
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## Introduction

An aging person may someday have to quit driving due to safety concerns. Being advanced in years in no way means a person is automatically an unsafe driver. Still, driving may become especially difficult for an older person if the normal aging process is exacerbated by accompanying diseases.

In the interest of safety, aging drivers and their families need to carefully evaluate the issues involved with automobile use.

This brochure examines the key concerns of the aging driver and offers information on:

1. The special illnesses and conditions of aging that may affect driving.
2. Safe driving tips and strategies for the older driver.
3. A test aging adults may use to evaluate their ability to safely operate a vehicle.
4. An evaluation guide for family members to use when assessing an aging person's safety skills.
5. Recommendations on who to consult about whether an aging person should continue driving.
6. The best way to deal with a parent or loved one who, despite evidence to the contrary, continues to insist he or she is a safe driver.
7. Ways to stay mobile after giving up driving.
8. Professionals to call for help and assistance.

## 1. Medical Conditions that Affect Driving

The natural process of aging makes it difficult for some elderly people to continue driving in a safe manner. Often, accompanying medical problems make the situation worse.

Some medical conditions that affect driving include:

- Alzheimer's disease
- Vision disorders such as age-related macular degeneration (AMD) and glaucoma
- Medication use

Vision problems, such as age-related macular degeneration (AMD) or glaucoma, are likely to affect older drivers.

Over time, people with Alzheimer's will likely begin to lose faculties vital for driving, including reflexes, coordination, reaction time, eyesight, hearing, and the ability to orient themselves.

## Vision Problems

AMD is a common eye disease that causes deterioration of the macula, the tissue located in the central part of the retina.

This is where light-sensitive cells help to process fine detail and color vision. AMD causes blurriness and blind spots in the middle of a person's field of vision. This results in dependence on peripheral vision, things seen out of the corner of the eye while looking straight ahead. Peripheral vision often lacks sharpness and clarity.

In contrast to AMD, the various forms of glaucoma are more likely to initially cause problems with peripheral vision. Drivers with peripheral vision loss may have trouble noticing traffic signs on the side of the road or seeing cars and pedestrians about to cross their path. As glaucoma progresses, central vision also becomes impaired.

## Medications

Medications may affect driving performance among the elderly. Many drugs have adverse side effects, such as drowsiness, dizziness, hazy vision, unsteadiness, fainting, and slowed reaction time. Common medications that may cause side effects include sleep aids, antidepressants, antihistamines for allergies and colds, and strong painkillers. Also, taking several different drugs together can create serious side effects.

Many commonly prescribed drugs to treat Alzheimer's disease also have side effects. Consult with a physician before beginning any drug treatment regimen to determine how it may affect your driving.

## 2. Safe Driving Tips and Strategies

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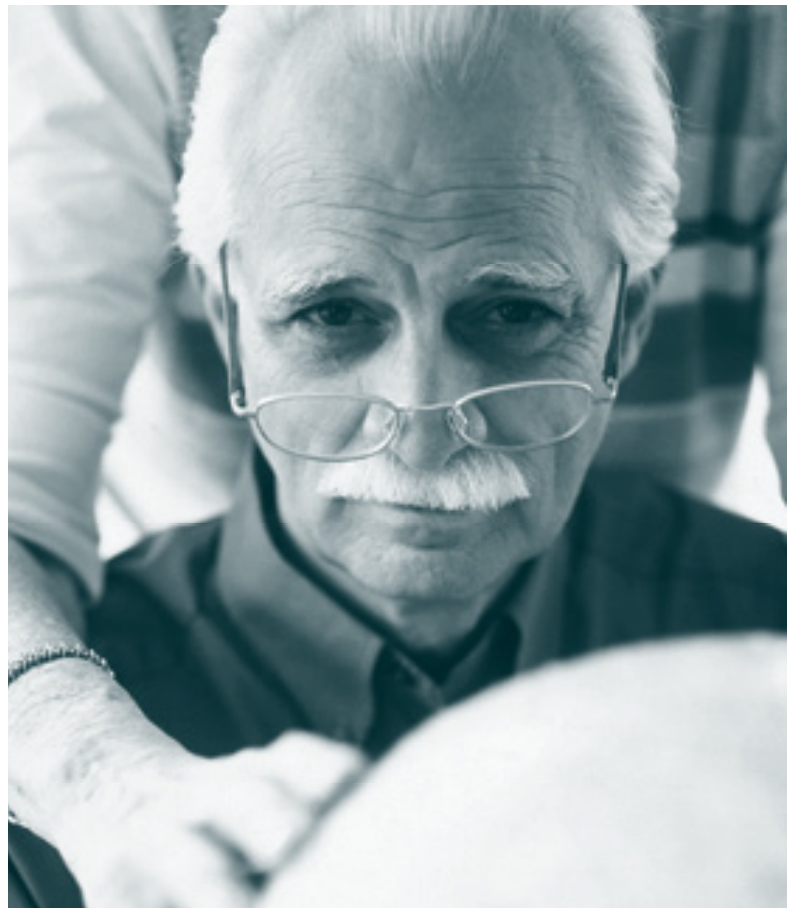
Elderly drivers, along with their family members and friends, should be aware of the potential challenges of driving and should design a strategy accordingly.

Drive primarily on streets that you know.

## The Driver

To compensate for the effects of normal aging on driving ability, older drivers should consider the following:

- Drive primarily on streets that you know.
- Limit your trips to places that are easy to get to and close to home.
- Take routes that avoid risky spots, such as freeway ramps and left turns.
- Don't drive at night or in bad weather.



## Driver Safety Courses

Older people may also consider taking a driver safety class designed to refresh their knowledge of driving and learn how to compensate for aging-related changes.

### 3. A Self-Test for Drivers

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Older drivers should frequently monitor their driving behavior and look for warning signs of problems. To help determine whether you are a safe driver, check each box below if the question applies to you:

Do you:

- Sometimes get lost while driving?
- Have trouble seeing signs in time to respond to them?
- Have trouble pushing down on the gas pedal or brakes?
- Find it hard to look over your shoulders when you back up?
- Get dizzy or drowsy after taking your medications?
- Get nervous driving in traffic or on unfamiliar roads?

If you checked any of the boxes, talk to your physician to determine whether any of your driving problems might be health-related.

If so, a physician might change your medications so that you have fewer or no side effects. If you have a visual disorder, then surgery, new glasses, or a different medication may solve the problem.

### 4. Observing the Elderly Driver

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If you have concerns about the driving ability of an older family member, go for a ride with him and look for the following unsafe practices:

- Does not notice or obey stop signs or traffic lights.
- Fails to yield the right-of-way or yields inappropriately.
- Often gets lost, even on familiar routes.
- Stops at a green light or at the wrong time.
- Does not seem to notice other cars, walkers, or bike riders on the road.
- Does not check the “blind spot” before changing lanes.
- Presses simultaneously on the brake and accelerator or confuses the two pedals.
- Backs up after missing an exit.

## 5. Evaluation and the Final Decision

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### The Physician

If family members believe an aging relative can no longer safely drive, they should immediately contact the person's physician to discuss the matter. The physician can conduct the appropriate examination and make a recommendation about the individual's ability to continue driving.

### The Family

Since family members or close friends spend the most time observing an older person's driving behavior, they theoretically should be in the best position to evaluate it. However, this is not always the case. Family members may sometimes be motivated, consciously or unconsciously, to overlook an older person's driving inadequacies. Reliance on the person for transportation, the wish to avoid conflict over driving, or a desire to deny that the individual's disease is getting worse, may all play a role in distorting a family's evaluation of driving competence.

## 6. Handling the Problem

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Despite all efforts, older drivers may eventually reach the point where they can no longer drive safely, and it is time

for the family to suggest that they stop. How and when the family approaches this subject can make a big difference in the person's reaction. Wait until you have your loved one's full attention in a calm environment to discuss your concerns about her driving.

When you discuss the need to stop driving, try to be gentle and minimize the threat to the person's self-esteem. Understand that the loss of mobility an automobile represents can be a major blow. Not driving a car may be seen as a loss of independence.

This can add to previous losses, such as the loss of a spouse, friends, or health. Driving cessation sometimes triggers depression in elderly people, which, in turn, can cause deterioration in physical health.

When discussing the need to stop driving, try to be gentle and minimize the threat to the person's self-esteem.

### Crafting your Message

Older drivers are more likely to listen to family members who present their concerns in terms of their own feelings and perceptions. To do this, try using "I" messages, rather than "you" messages.

For example, saying, "You're no longer a safe driver, and you should not be driving," may seem threatening. However, saying, "I am concerned about

your safety when you are driving,” is more difficult to deny. The subject becomes your concern, not his or her poor driving.

“You” messages come across as accusatory and dictatorial, as if the speaker knows what is best and has already made the decision for the person. “I” messages are more likely to be perceived as caring and to allow the person to participate in reaching a decision.

Cite specific examples of unsafe driving rather than making blanket statements about the person’s driving ability. For example, saying, “I became particularly concerned when you didn’t seem to notice oncoming cars while turning left,” will likely have more effect than saying, “You are a very poor driver.”

## Special Measures for Dementia and Alzheimer’s Patients

In some cases, older people may refuse to give up driving, despite having lost their driver’s license. Those with dementia may simply forget that they are no longer allowed to drive. When all else fails, caregivers can:

- Show the person a prescription from the doctor that says “No Driving.” Many people will follow the advice of a physician, even though they may not accept the same advice from the family.
- Ask a friendly police officer to remind

the person that he or she is no longer allowed to drive.

- Hide the car keys.
- Replace the keys with a set that will not start the car.
- Disable the car or install a kill wire that prevents the car from starting unless a switch is thrown.
- Distract the person, which may allow time to forget the desire to drive.
- Park the car in a place where it cannot be seen; the person may eventually forget that it exists.
- Sell the car.

## 7. Staying Mobile

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The older person should still be able to visit friends, engage in social activities, and shop. Family members can help in facilitating the person’s independence by exploring options in the community.

- Call the local community center or regional transit authority to find out if they offer door-to-door shuttle service for older passengers.
- Free or low-cost transportation to doctors’ offices and other appointments may be available. Ask

your local Area Agency on Aging if your community offers these services.

- Ask your community center, church, or synagogue if they provide volunteer driver programs.
- Hire a driver to provide transportation in your car or his own.

It's important for elderly people to be able to socialize.

- Contact taxi companies to learn if they offer reduced taxi fares or special services for older people or individuals with low vision.

## Get it Delivered

Instead of driving to get items, it may be more convenient to have them delivered:

- Many grocery stores deliver for free or for a reasonable fee.

- Medicines can be ordered by mail or online from known and trusted pharmacies.
- Many restaurants will deliver meals for free or for a low fee. In addition, you may be eligible for Meals on Wheels or other senior meal programs that deliver hot meals for a low price. For more information about these programs, call your local Area Agency on Aging or check online at [www.mealcall.org](http://www.mealcall.org).

## 8. Seeking Outside Assistance

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There are several types of elder care professionals who can help aging people adjust to life after driving and provide needed services. Two of the most helpful are geriatric care managers and social workers.

### The Geriatric Care Manager

A geriatric care manager is a professional—usually a social worker, counselor, or nurse—who develops and implements plans to assist elders and their families with all aspects of long-term care.

Geriatric care managers can help with two specific driving problems. First, in situations where the family has reached a stalemate, they may be able to convince the older person that it is time to stop driving. Second, a geriatric care



manager can make arrangements for alternative forms of transportation and the delivery of goods and services to an older person who is unable to drive.

This may be especially useful to families who live far from their elderly loved one. They want to make sure their relative is safe, but cannot be there on a daily basis.

A geriatric care manager can also identify resources in the community to help the older person maintain independence.

A geriatric care manager is a professional who develops and implements plans to assist elders.

For a referral to a geriatric care manager, contact the National Association of Professional Geriatric Care Managers (see Helpful Information at the back of this brochure).

## Help from Social Workers

Social workers can also be helpful to elderly people who have had to give up driving. Social workers can assist in locating and coordinating transportation and community services as well as assessing social and emotional needs. For those families dealing with Alzheimer's disease, there is the added challenge of arranging for increased care as the disease progresses.

To find a qualified clinical social worker in your area, contact the National Association of Social Workers (see Helpful Information), your local hospital, or Area Agency on Aging.

## Get Around

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Remember, people don't have to drive to live an active life. Most communities are filled with resources to help non-drivers get out and about. The Helpful Information section is a great starting point for finding out more.

## Helpful Information

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### Driver Safety Classes

**AARP**  
**Driver Safety Program**  
**1-888-687-2277**  
**[www.aarp.org/home-garden/transportation/driver\\_safety](http://www.aarp.org/home-garden/transportation/driver_safety)**  
Website includes directory of AARP Driver Safety education classes and other information.

**American Automobile Association (AAA)**  
**[www.aaa.com](http://www.aaa.com)**  
Contact your local AAA club to find a class near you.

**Driving School Association of the Americas, Inc.**  
**1-800-270-DSAA (3722)**  
**[www.thedsaa.org](http://www.thedsaa.org)**  
Website includes a directory of driving schools by state and locality.

## For More Help

Contact the following organizations to help assess your loved one's driving safety, create a transportation plan, or find other services for older people.

**American Health Assistance Foundation (AHAF)**  
1-800-437-2423  
[www.ahaf.org](http://www.ahaf.org)  
[info.ahaf.org](mailto:info.ahaf.org)

Up-to-date, helpful information for those affected by Alzheimer's disease, age-related macular degeneration, or glaucoma. Read and download information from the website and order free publications online, by phone, mail, or email.

**American Automobile Association (AAA) Foundation for Traffic Safety**  
(202) 638-5944  
[www.aaafoundation.org](http://www.aaafoundation.org)  
[www.seniordrivers.org](http://www.seniordrivers.org)

Call or visit the websites for information and free booklets for older drivers and their families.

**Association for Driver Rehabilitation Specialists (ADED)**  
(828) 855-1623  
1-866-672-9466  
[www.driver-ed.org](http://www.driver-ed.org)

Search for certified driver rehabilitation specialists (who are members) by state through CDRS Directory on website.

**Eldercare Locator**  
1-800-677-1116  
[www.eldercare.gov](http://www.eldercare.gov)

Website of the U.S. Department of Health and Human Services provides resources for

older adults in U.S. communities; referrals to state and local Area Agencies on Aging and community-based organizations that serve many elder care needs; English- and Spanish-speaking information specialists.

**National Association of Professional Geriatric Care Managers (NAPGCM)**  
(520) 881-8008  
[www.caremanager.org](http://www.caremanager.org)

Health and human services specialists who help families care for older relatives while encouraging independence. Use the website database to find a geriatric care manager.

**National Association of Social Workers (NASW)**  
(202) 408-8600  
[www.naswdc.org](http://www.naswdc.org)

A social worker can counsel your loved one, assess social and emotional needs, and assist in locating and coordinating transportation and community services. Find a licensed social worker through a website search.

**National Center on Senior Transportation (NCST)**  
1-866-528-NCST (6278)  
[www.seniortransportation.easterseals.com](http://www.seniortransportation.easterseals.com)

Website includes information on senior transportation services and providers.

**National Institute on Aging (NIA), National Institutes of Health**  
[www.nia.nih.gov/HealthInformation/ResourceDirectory.htm](http://www.nia.nih.gov/HealthInformation/ResourceDirectory.htm)

Website has searchable database with information on more than 300 national organizations that help older people.

U.S. Department of Transportation  
Federal Highway Administration  
(FHWA Safety/Older Drivers)  
(202) 366-2176  
<http://safety.fhwa.dot.gov/older-users>

Offers informative guides and handbooks on older driver safety.

Some of the information in this brochure was obtained from materials published by the American Medical Association, National Highway Traffic Safety Administration, National Institute on Aging, and the American Academy of Ophthalmology.

## AHAF Publications

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All AHAF publications are free and can be ordered via phone, email, online, or U.S. mail.

### American Health Assistance Foundation

22512 Gateway Center Dr.  
Clarksburg, MD 20871  
1-800-437-2423  
[www.ahaf.org](http://www.ahaf.org)  
[info@ahaf.org](mailto:info@ahaf.org)

### Alzheimer's Disease

- Alzheimer's Disease Research Review
- Care for the Caregiver: Managing Stress\*
- Living with Alzheimer's Disease\*
- Staying Safe: Wandering & the Alzheimer's Patient\*

- Understanding Alzheimer's Disease: It's Not Just Forgetfulness\*
- Alzheimer's Disease Research Fact Sheets

### Macular Degeneration

- Living with Macular Degeneration\*
- Low Vision Resource List
- Macular Degeneration Research News
- Macular Degeneration: The Essential Facts\*
- Amsler grid eye test\*
- Macular Degeneration Research Facts Sheets

### Glaucoma

- Living with Glaucoma\*
- Low Vision Resource List \*
- National Glaucoma Research Report
- The Essential Facts on Glaucoma\*
- National Glaucoma Research Facts Sheets

\* These titles and Safety and the Older Driver are available in English and Spanish.



## American Health Assistance Foundation



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