Can we just keep rolling, without our cars?

By Fran Carlin-Rogers

When was the last time you thought about your first car? Remember how wonderful it felt to get up and go, maybe inviting friends along? As Americans, we were highly reliant on the independence our wheels provided back then—and we still are. Mobility is critical to our happiness, an essential part of remaining connected to our community, and most of us have few transportation options beyond driving.

According to the AARP Public Policy Institute’s 2009 National Household Travel Survey, the total number of trips (any modes) made by adults ages 65 and older increased by 10% between 2001 and 2009, and the number of drivers older than 65 has reached 15%. This number is predicted to grow to 20% by 2025.

Car and Road Improvements

Many of us are driving substantially different vehicles, too. We now have seatbelts, airbags and brighter headlights. Crash avoidance systems and interior protections will continue to improve in substantial ways.

In 1989, the Transportation Research board issued Special Report 218, Transportation in an Aging Society: Improving Mobility and Safety for Older Drivers. The report summarized the research related to older users of the roads, and set the stage for recommendations and guidelines for highway designs that would benefit elders and others.

The driving environment has evolved, partly due to such findings; roadway design has improved, signage is better, traffic-control devices are more visible, and intersection improvements such as protected left turn lanes and pedestrian enhancements have become standard practice.

Roundabouts, or circular intersections, have a dramatic effect in reducing crash frequency and severity. They eliminate the need for the typical left turn maneuver that the National Highway Traffic Safety Administration has shown to be more dangerous for older drivers, risky for others and dicey for pedestrians, too.

How Drivers Evolve

As drivers we have changed: vision, information-processing speed and reaction time all decline as we age. The onset of chronic or acute medical conditions in middle age may impact our ability to operate a vehicle safely. And cognitive changes can pose particular challenges.
When I think about transportation issues for elders, I always visualize a continuum of interrelated sections such as driving wellness; driver skill assessment; remediation; transition from driving; and transportation alternatives. There is good news in all of these areas, plus some big challenges.

Because of the American reliance on car use as a preferred mode of travel, continuing to drive safely for as long as possible is a major emphasis of public policy and personal priority. The Department of Transportation's “Safe Mobility for Life” policy contains guidelines to which we should aspire.

Most older drivers do an effective job of changing travel behavior—perhaps by staying off of crowded highways or curtailing night driving—when they become aware of increased risks. Many take driver retraining programs to brush up on safety skills. CarFit, created by ASA in conjunction with AARP, AAA and the American Occupational Therapy Association, is a community education program that analyzes vehicle comfort and safety issues, such as ensuring proper sight lines to avoid blind spots and seating to maximize reaction time. Trained technicians then recommend adaptive measures for elders (www.car-fit.org).

As we live and drive longer, we will need to know how changes in our driving skills impact safety. Many communities now offer such driver-skill assessments.

And thanks to the American Occupational Therapy Association, more occupational therapy practitioners are performing driver evaluations, remediation and becoming involved in mobilizing the community. If a problem exists, the first action is to see what can be done to correct for it, such as hand controls to ameliorate problems with feet.

**Solutions to Driving Issues**

Physicians, too, are encouraged to talk with their patients about driving. Older drivers are advised to develop a plan in case they need to stop driving. Family members play an important role in realizing the significance driving has on one's sense of well-being and independence, and in helping to find viable transportation options. Simply talking about the issue can help ease the transition from driving, but elders need to proactively explore alternate ways to get around.

Drivers with dementia face the certainty that they will eventually have to stop driving. The Beverly Foundation, the Florida Department of Elder Affairs and others have developed the concept of “dementia friendly transportation,” which takes into consideration the needs of clients with dementia—from not having to handle money to drivers walking riders through the door of their destination. The Department also has encouraged community transportation programs to provide services for special needs clients.

Many communities are beginning to address the pressing need to develop more transportation options for elders. In an era of budget reductions and reduced services, this is a daunting task. New community transportation models such as the Independent Transportation Network and supplemental transportation programs, often sponsored by faith-based organizations, are essential parts of the solution. Volunteer driver programs have become key community assets. They augment public transit and help to decant the demand for expensive paratransit services.

The years to come will show ever-increasing numbers of older adults using the roadways—a circumstance that will require new partnerships between the public and private sector, coordination of services and a focus on the connection between coordinating services and efficient use of assets.

It is essential to advocate with elected officials so they understand the cost benefits of supporting elder transportation. The collective voice of older adults who use our nation’s roads needs to be heard as we create strategic plans that prioritize funding decisions.

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