

# Committee on the Safe Mobility of Older Persons

Transportation Research Board  
National Research Council  
2101 Constitution Avenue NW  
Washington, DC 20418

Committee A3B13  
November 1996

## From the Chair

### Committee Supports Updating 1988 Report *Transportation in an Aging Society*

At the mid-year meeting of the Committee on the Safe Mobility of Older Persons members unanimously supported the motion to update and expand Special Report 218, *Transportation in an Aging Society: Improving Mobility and Safety for Older Persons*. The two-volume report, originally completed in 1988 by an expert committee appointed by the National Research Council, focuses on the transportation needs and requirements of older adults in the U.S. Volume 1 presents an overview of key issues relating to the mobility and safety of older persons — drivers, passengers and pedestrians—and recommendations for needed improvements. Volume 2 contains technical papers that were commissioned from 12 experts in the field.

Since the completion of the TRB report, numerous activities on older driver safety and the mobility of older adults have been undertaken by the U.S. Department of Transportation (notably including Secretary Pena's recent initiative on "Improving Transportation in a Maturing Society"), other government agencies, the private sector and other nations. Furthermore, the entire industrialized world is aging,

with many countries doing so at a faster rate than the U.S. These demographic trends make the safe mobility of older persons a worldwide concern, yet no worldwide effort has been initiated to address the issue.

Solutions to the transportation needs of older adults could be improved by programs developed cooperatively with other countries. Committee A3B13 is exploring ways to spearhead an update and expansion of the 1988 report to take into account activities and achievements that have since occurred and to include an international perspective. I will keep you informed of our progress in developing a coordinated strategic plan that includes public and private sector involvement.

— John Eberhard

P.S.: The U.S. Department of Transportation is currently completing a report on Secretary Pena's initiative on "Improving Transportation in a Maturing Society." A draft is currently under internal review. Included are recommendations for timely improvements in transportation options for an aging society.

### Special Notice:

*This newsletter will soon be available on the World Wide Web at <http://www.nhtsa.dot.gov/people/outreach/>. Watch for it!*

## From the Editor

TRB's 76th Annual Meeting is fast approaching. For those of you who plan to attend, this issue provides a comprehensive preview of scheduled events relating to the safety and mobility of older persons. We also report on important meetings of selected A3B13 Subcommittees. And, of course, there's a listing of upcoming conferences through 1997.

By the way ... ever wonder what the designation "A3B13" stands for? See page 6 for a peek backstage at TRB.

Thanks to those of you who've submitted materials and have taken time to answer our questions. We hope to hear from more of you in coming months.

— Rhonda Aizenberg

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## TRB Annual Meeting

The 76th Annual Meeting of the Transportation Research Board (TRB) will be held January 12-16, 1997 in Washington, DC. Scheduled activities relating to the safety and mobility of older persons include two human factors workshops, a human factors anniversary luncheon panel session, two conference sessions, two paper sessions and a series of Committee and Subcommittee meetings.

Details follow.

## Workshop on Human Factors in Transportation (Separate Registration)

Date: Sunday, January 12  
Place: Sheraton Hotel

### Session 14 Engineering Solutions to Improve Older Driver and Pedestrian Mobility and Safety

9:00 am - 4:30 pm

Leader: David Harkey, University of North Carolina, Chapel Hill

This session reviews the problems of older road users and critiques and expands upon the engineering solutions developed for them. Countermeasures are considered for existing highways, where right-of-way restrictions are an impeding factor, as well as newly constructed highways, where right of way is a less restrictive concern.

Engineering countermeasures are discussed for intersections, urban arterials and freeway ramp designs. They include geometric design changes, signing and marking enhancements, and improvements in traffic signal controls and other electronic devices.

The session format is very interactive to encourage discussion and the formulation of applicable engineering solutions.

### Anniversary Luncheon Thirty Years of Human Factors Research in Transportation: How Far Have We Come, and Where Must We Go?

Noon - 2:00 pm

Moderator: P. Robert Knaff, KB&A, Inc.

Panelists: John Eberhard, National Highway Traffic Safety Administration; Leonard Evans, General Motors; Hal Lunenfeld, Federal Highway Administration; Richard

Michaels, Northwestern University; Tom Rockwell, R&R Research, Inc.; Patricia Waller, University of Michigan

### Session 30 Changing Directions: Strategies for Assisting With the Decision to Limit or Stop Driving

1:30 pm - 4:30 pm

Leaders: Richard Marottoli, Yale University; Leo Tasca, Ontario Ministry of Transportation

Workshop participants examine and discuss different perspectives on the changing older driver, including views held by older drivers themselves, family, friends, physicians and other health professionals, and licensing agency staff. Issues addressed include: self-administered diagnostic instruments; performance monitoring that relies on family, friends and the community; role of physicians and other health care professionals; and amount of regulation needed to identify high-risk older drivers.

## TRB SESSIONS

Date: Monday, January 13  
Place: Sheraton Hotel

### Paper Session 7 Older Drivers and Highway Characteristics

8:00 am - 10:15 am

Sponsors: TRB Committees on the Safe Mobility of Older Persons (A3B13) and Vehicle User Characteristics (A3B02)

Presider: Cynthia Owsley, University of Alabama, Birmingham

Participants:  
*Highway Sign Minimum Luminance Requirements for Older Drivers* — Johnny Graham and L. Ellis King, University of North Carolina, Charlotte; Anwar Fazal, North Carolina Department of Transportation

*Aging Drivers and Construction Zone Traffic Sign Sheeting: A Review of Literature* — Solomon Younes, Arizona Department of Transportation; Judson Matthias and Dennis Young, Arizona State University

*Elderly Drivers' Gap Acceptance on Rural Highways - Field Investigations* — Ping Yi,

James Bickerstaff and Sam Boyd, University of Akron

*Intersection Design Decision/Reaction Time for Older Drivers* — David Naylor, City of High Point Department of Transportation; Johnny Graham, University of North Carolina, Charlotte

### Paper Session 37 Older Drivers: Medical Conditions and Mobility Patterns

10:15 am - Noon

Sponsor: TRB Committee on the Safe Mobility of Older Persons (A3B13)

Presider: Richard Marottoli, Yale University

Participants:  
*Driving Following Stroke: A Survey* — Gary Fisk and Cynthia Owsley, University of Alabama, Birmingham

*Older Drivers and Cataracts: Driving Habits and Self-Regulation* — Cynthia Owsley and Beth Stalvey, University of Alabama, Birmingham

*The Relationship of Age-Related Visual Limitation to Lane Keeping Performance* — A Scott McKnight, A. James McKnight and A. Scott Tippetts, National Public Services Research Institute

### Conference Session 64 Measures for Extending Safety and Maintaining Mobility of Older Americans

1:30 pm - 3:15 pm

Sponsor: TRB Committee on the Safe Mobility of Older Persons (A3B13)

Presider: Edward Crow, Pennsylvania State University

Presenters:  
*Safety, Mobility, Accessibility in Later Life* — Max Vercruyssen, University of Minnesota

*Driver Performance and Collision Avoidance* — Peter Hancock, University of Minnesota

*Examination of Cognitive Training Possibilities* — Sherry Willis, Pennsylvania State University

*Planning for Retirement from Driving* — Daniel Lago, Pennsylvania State University

*Non-Driving Mobility Alternatives* — James Miller, Pennsylvania State University

# Highlights of Upcoming TRB Meeting

Attending the TRB Annual Meeting? Mark your calendar for the following scheduled events on the safety and mobility of older adults.

## Human Factors in Transportation Workshops (*Separate Registration*)

Date: Sunday, January 12, 1997

Place: Sheraton Hotel

### **Session 14: Engineering Solutions to Improve Older Driver and Pedestrian Mobility and Safety**

Time: 9:00 am - 4:30 pm

### **Anniversary Luncheon: Expert Panel - "Thirty Years of Human Factors Research in Transportation: How Far Have We Come, and Where Must We Go?"**

Time: Noon - 2:00 pm

### **Session 30: Changing Directions: Strategies for Assisting With the Decision to Limit or Stop Driving**

Time: 1:30 pm - 4:30 pm

## TRB Paper Sessions

Date: Monday, January 13, 1997

Place: Sheraton Hotel

### **Session 7: Older Drivers and Highway Characteristics**

Time: 8:00 am - 10:15 am

### **Session 37: Older Drivers: Medical Conditions and Mobility Patterns**

Time: 10:15 am - Noon

## TRB Conference Sessions

Date: Monday, January 13, 1997

Place: Sheraton Hotel

### **Session 64: Measures for Extending Safety and Maintaining Mobility of Older Americans**

Time: 1:30 pm - 3:15 pm

### **Session 92: Mobility Consequences of Driving Cessation**

Time: 3:45 pm - 5:30 pm

## Committee A3B13 Annual Business Meeting

Date: Tuesday, January 14, 1997

Place: Sheraton Hotel

Time: 1:30 pm - 4:30 pm

All Committee members and friends are encouraged to attend.

## A3B13 Subcommittee Meetings

Place: Sheraton Hotel

<b>Subcommittee</b>	<b>Chair</b>	<b>Date</b>	<b>Time</b>
Medical Factors	Richard Marottoli	Sunday, January 12	9:00 am - Noon
Vision and Cognition	Gary Mancil, Janet Szlyk	Sunday, January 12	7:30 pm - 9:30 pm
Transportation Alternatives	Katherine Freund	Monday, January 13	5:45 pm - 7:45 pm (Dinner Meeting)
Older Driver Programs	Loren Staplin	Monday, January 13	8:00 pm - 10:00 pm
Vehicle and Environmental Factors	Philip Oxley, Jeffrey Pike	Monday, January 13	8:00 pm - 10:00 pm
Older Driver Policy	Leo Tasca, Joseph Coughlin	Tuesday, January 14	8:00 am - 9:45 am
Older Driver Research	John Eberhard, Jared Jobe	Tuesday, January 14	10:00 am - Noon
Public Information	Kent Milton, Jackie Anapolle	Tuesday, January 14	7:30 pm - 9:30 pm

# TRB NEWS (cont'd)

Discussion Moderator: Allan Tull, Older Driver Subcommittee, Intelligent Transportation Society of America

Discussants: John Eberhard, National Highway Traffic Safety Administration; Rebecca Bickley, Pennsylvania Department of Transportation; David Snyder, American Insurance Association; Richard Marottoli, Yale University; TBD, U.S. Congress, House Committee on Transportation and Infrastructure; TBD, Minnesota Department of Transportation

## Conference Session 92 Mobility Consequences of Driving Cessation

3:45 pm - 5:30 pm

Sponsors: TRB Committees on the Safe Mobility of Older Persons (A3B13) and Accessible Transportation and Mobility (A1E09)

Prsident: John Eberhard, National Highway Traffic Safety Administration

Presenters:

*Mobility Consequences of Driving Cessation* — Jon Burkhardt and Arlene Berger, Ecosometrics, Inc.

*Effect of Driving Restriction and Driving Cessation on the Older Adult* — Sandra Winter, California Department of Motor Vehicles

*Driving and Dementia: Consequences of Evaluation and Delicensing* — Bonnie French and Allen Dobbs, University of Alberta

*The Older Former Driver: Mobility Consequences and Mobility Adaptation* — Mary Ann Thompson, Columbia University

*Problems and Prospects of Older Non-metropolitan Females and Males Driving Behavior* — Nina Glasgow, Cornell University

*Driving Cessation When an Acceptable Alternative Is Available* — Katherine Freund, Katherine Freund and Associates, Inc.

Discussants: Lawrence Harman, TRB Committee on Accessible Transportation and Mobility (A1E09), Bridgewater State College; TBD, Administration on Aging/Human Health Services; Donald Trilling, U.S. Department of Transportation; Audrey Straight, American Association of Retired Persons; Eddie Rivas, American

Association of Homes and Services for the Aging; Robin Barr, National Institute on Aging □

**All members and friends of Committee A3B13 are encouraged to attend the annual Committee business meeting and individual Subcommittee meetings scheduled Sunday, January 12 through Tuesday, January 14. See page 3 for meeting times and locations.**

## Review of A3B13 Direction and Priorities

A midyear meeting of Committee A3B13 was held September 29 at TRB Headquarters in Washington, DC. A key agenda item was a review of research and operational issues needing priority attention by the Committee. A listing of more than 100 issues, generated last January by Committee members and friends, was reviewed and organized into 43 top priorities. These issues will next be reviewed by the Subcommittees of Committee A3B13.

Subcommittee chairs will soon be receiving a packet of materials to distribute to their members, requesting them to review and refine the listing and identify what needs to be done to facilitate progress on the identified priorities.

The final listing will serve as the basis for updating TRB Circular Number 398, "Research and Development Needs for Maintaining the Safety and Mobility of Older Drivers," published in 1992. The Committee will also use the results to re-examine its overall mission and goals, Subcommittee structure and membership qualifications.

Following is the listing of 43 priority issues, organized by current Subcommittee focus:

### I. Medical Factors

A. Develop strategies for counseling older drivers about driving limitation and cessation.

B. Develop multidisciplinary strategies (medical and nonmedical) for evaluating and counseling older drivers.

C. Establish a library or repository of information on older driver issues.

D. Prepare a critical appraisal of the literature on older driver issues.

### II. Transportation Alternatives

A. Understand and secure the public and private resources needed to meet the mobility requirements of the aging population.

B. Develop an information program to increase public awareness of transportation options.

C. Expand public knowledge of the meaning and importance mobility has to older people and the cultural obstacles they encounter in making good mobility choices.

D. Determine how to deal with transportation problems that relate to aging in place, particularly in suburbs.

E. Involve older people in the policy-making process.

F. Identify human, vehicle and highway changes needed to safely extend driving.

G. Develop alternative transportation that meets the mobility needs of older adults.

### III. Older Driver Research

A. Continue epidemiological research to improve the detection of medical conditions and functional disabilities with unacceptable crash risks, and of drivers who correctly or incorrectly regulate driving.

B. Conduct research to establish simple measures (cognitive, visual, physical) that identify risk and can be administered by non-physicians.

C. Establish research standards to ensure comparability of studies.

D. Research the medication, polypharmacy and medical conditions influencing driving abilities.

E. Research the mobility capabilities needed by functionally impaired individuals to use transportation.

The Newsletter for the Committee on the Safe Mobility of Older persons is published by TRB twice each year.

Committee Chair: John Eberhard  
TRB Staff: Rick Pain  
Newsletter Editor: Rhonda Aizenberg  
Sr. Staff Writer: John Luke  
Editorial Office: Beverly Foundation  
44 S. Mentor Ave.  
Pasadena, CA 91106  
Phone: (818) 792-2292  
Fax: (818) 792-6117  
E-mail: bf3@ix.netcom.com

#### IV. Vision and Cognition

A. Study vision, cognition and other forms of assessment and testing and compare their cost-effectiveness with medical costs of crashes and the economic impact of driving restrictions.

B. Determine if new technologies (e.g., vision enhancement) can improve older driver performance.

C. Develop a table that provides a simple gradation of risk factors (visual, cognitive).

D. Determine the effectiveness of cognitive training on maintaining mobility and reducing crash risk.

E. Organize and critique existing research and develop a prioritized research agenda.

#### V. Vehicle and Environmental Factors

A. Explore the advantages and disadvantages of the evolving in-vehicle information technology in assisting older drivers and extending driving life. Assess the possibilities of information overload and system designs inconsistent with older driver capabilities.

B. Examine "low technology" solutions to older driver problems (e.g., making three right turns instead of one left turn).

C. Develop "smart restraints" that provide protection in a variety of environments (e.g., crashes at different speeds) and for different types of drivers (e.g., young, old, frail).

D. Establish a U.S./European database that integrates research and demonstration outcomes.

E. Develop vehicle redesigns for entry, security, steering and other ergonomic concerns (e.g., mirrors, dash controls and displays, seat position).

F. Improve traffic engineering, including intersection controls and parking management.

#### VI. Public Information

A. Develop an information program addressing the question — "Is there a driver in your home who has problems with safety or mobility?" — and provides assistance on what to do about it.

B. Make research findings "user friendly" and understandable to the general population.

C. Develop a list of representatives from public and private agencies with an interest in the safety and mobility of older drivers.

D. Develop an information program for "clinicians" (the entire health care network)

focusing on problems, consequences, policies, answers and strategies.

#### VII. Older Driver Programs

A. Develop and evaluate a practical guide to help clinicians identify and enhance the mobility of patients with physical and functional limitations.

B. Develop a guide for older drivers and their caregivers that provides self-help in determining the need for rehabilitation or for altering or quitting driving.

C. Initiate a more pervasive public awareness program dealing with pertinent older driver issues, concerns and responses.

D. Increase awareness about how to maintain the mobility and safety of the 80+ age driver.

E. Help licensing agencies facilitate the transition from driving to using alternative transportation.

#### VIII. Older Driver Policy

A. Address the continuum of licensing options (limited licenses) based on functional ability and the availability of mobility options.

B. Ensure that licensing tests and other performance assessments minimize the risk of false positives and false negatives.

C. Assess the relative merits of driver license testing for cause vs. age.

D. Assess how well licensing decisions balance personal mobility and well-being vs. risks to personal and public safety.

E. Assess the merits and shortcomings of establishing cut-off test scores and their effect on older drivers.

F. Establish a consensus on using criterion measures of driving competency as a surrogate for collisions.

G. Evaluate the economic constraints and implications of capital investment on operations.

Comments on this listing, and suggestions for additional issues to be considered, are welcome. Send to John Eberhard, Chair A3B13, National Highway Traffic Safety Administration, 400 7th Street SW, Washington, DC 20590; phone (202) 366-5595; fax (202) 366-7096; e-mail jeberhard@nhtsa.dot.gov. □

## Older Driver Programs Subcommittee Holds Midyear Meeting

The Older Driver Programs Subcommittee of Committee A3B13 held a midyear meeting at which 11 presentations were made on "Licensing the Senior Driver: Managing for Functional Deficits." Held September 30 - October 1 at TRB Headquarters in Washington, DC, the meeting was chaired by Anne Long Morris and drew about 40 participants. The presentations, augmented by the results of group discussions, will be documented in a TRB Circular to be distributed in Spring 1997.

Presentations focused on at-risk older driver identification, assessment and assistance:

**Identification** — Presentations addressed the roles and responsibilities of health and social services providers in detecting elderly drivers with questionable ability to safely and effectively operate a vehicle.

*Medical: patients and referrals* — Harvey Sterns, University of Akron

*Enforcement: collisions and violations* — A. James McKnight, National Public Services Research Institute

*Licensing: periodic and referral reexamination* — Sheila Prior, American Association of Motor Vehicle Administrators

*Social agencies and family* — Arlene Berger, Ecosometrics, Inc.

**Assessment** — Presentations addressed the availability, validity and practicality of assessment measures to determine the nature and magnitude of problems leading to unsafe and ineffective driving.

*Medical: including stroke, dementia and arthritis* — Richard Marottoli, Yale University

*Visual: all visual disabilities* — Gary Mancil, Vision Rehabilitation Research Laboratories

*Psychological: attentional, perceptual, cognitive, motor, performance in car* — Allen Dobbs, University of Alberta

**Assistance** — Presentations addressed assistance strategies and consequences.

*Consequences: psychological, social and economic* — Bonnie French, University of Alberta

## TRB NEWS (cont'd)

*Rehabilitation: instruction for functionally limited drivers* — Anne Hegberg, Marionjoy Rehabilitation Hospital

*Training: general driving improvement and remediation* — Jerry Witherall, University of Wisconsin

*Alternatives: transportation and in-home options* — Katherine Freund, Katherine Freund and Associates, Inc.; Audrey Straight, American Association of Retired Persons

For information about the upcoming TRB Circular, contact Rick Pain, TRB, 2101 Constitution Ave. NW, Washington, DC 20418; phone (202) 334-2960; fax (202) 334-2003; e-mail [rpain@nas.edu](mailto:rpain@nas.edu). □

### Older Driver Resource Directory Being Updated

The Public Information Subcommittee is beginning preparations for a new edition of TRB Circular Number 434, "Older Driver Resource Directory." Last updated in December 1994, the Directory provides a listing of members and friends of Committee A3B13. In addition to providing complete addresses for each individual and an index of Internet locations and e-mail addresses, the Directory provides a state-by-state listing indicating each individual's expertise and involvement in research, program and policy areas relating to older persons and traffic safety.

Consideration is being given to refining the Directory to serve as a referral base for anyone — including the general public — needing information, assistance and direct support services relating to the safety and mobility of older persons. Contact listings could be expanded to include, for example, DMV medical review and medical advisory board representatives; occupational therapists and driver rehabilitation programs; geriatric care managers; mature operator program providers; vehicle design enhancement vendors; Area Agencies on Aging; and public and paratransit sources.

The Subcommittee is interested in receiving suggestions for content additions or changes to the organization and form of the Directory that would increase its usefulness. Send comments to Co-chairs Jackie Anapolle, 753 Newton Street, Chestnut Hill, MA 02167; phone (617) 566-8133; fax (617) 232-0332; e-mail [73112.3717@compuserve.com](mailto:73112.3717@compuserve.com); or Kent

Milton, 6936 Toluca Lane, Citrus Heights, CA 95621-4327; phone/fax (916) 726-5489; e-mail [aadu03a@prodigy.com](mailto:aadu03a@prodigy.com). □

### Public Information Subcommittee Works to Improve Communications

Many of us can connect to the Internet but may not realize the wide array of telecommunication services available via World Wide Web sites. The Public Information Subcommittee is developing materials to assist A3B13 members and friends in "surfing the Web." Included are specific guidelines for accessing and even creating a Web page, a listing of Web sites that address issues relating to the safety and mobility of older persons, and provider services and rates. Plans are to distribute the materials at the upcoming TRB Annual Meeting. The information will also be featured in a future issue of this newsletter.

If there is a Web site you would like to see included, contact Jackie Anapolle, 753 Newton Street, Chestnut Hill, MA 01267; phone (617) 566-8133; fax (617) 232-0332; e-mail [73112.3717@compuserve.com](mailto:73112.3717@compuserve.com).

The Public Information Subcommittee is also developing guidelines to help states establish an 800 hotline number the public can use to request information and assistance on safety issues, including concerns relating to the safety and mobility of older persons. Texas created a national 800 hotline called the *Safe Riders Program* in 1984. Its experience is being used as a model. □

### LET US HEAR FROM YOU!

Send information and ideas for newsletter articles to:

Newsletter Editor  
Committee A3B13  
c/o Beverly Foundation  
44 S. Mentor Ave.  
Pasadena, CA 91106  
Phone: (818) 792-2292  
Fax: (818) 792-6117  
E-mail: [bf3@ix.netcom.com](mailto:bf3@ix.netcom.com)

### How Committee A3B13 Got Its Name

The Committee on the Safe Mobility of Older Persons, formally known as Committee A3B13, is one of approximately 180 committees and task forces that carry out technical activities for the Transportation Research Board (TRB).

Some 3,000 of the nation's top administrators, engineers, social scientists, attorneys, educators and others concerned with transportation volunteer to serve on these committees and task forces to advance knowledge of the nature and performance of transportation systems and their components.

As the chart on page 7 shows, TRB committees are numbered according to their location in the organization's hierarchy. Committee A3B13's designation corresponds to:

- A** Division A, Technical Activities
- 3** Group 3, Operations, Safety and Maintenance of Transportation Facilities
- B** Section B, Users and Vehicles
- 13** 13th Committee under Section B

In addition to being responsible for TRB's committee and task force activities, Division A organizes (and publishes proceedings for) TRB's annual meetings and other conferences, workshops and seminars held during the year; publishes Transportation Research Records, Circulars, and state-of-the-art reports; and oversees the Field Visit Program.

For more information on Division A and its components — including Committee A3B13 and its Subcommittees — contact Rick Pain, TRB, 2101 Constitution Ave. NW, Washington, DC 20418; phone (202) 334-2960; fax (202) 334-2003; e-mail [rpain@nas.edu](mailto:rpain@nas.edu).

Visit the TRB World Wide Web site at <http://www.nas.edu/trb/about/activities.html>. □

# Transportation Research Board

**Divisions:**

<b>A TECHNICAL ACTIVITIES</b>	B STUDIES AND INFORMATION SERVICES	C COOPERATIVE RESEARCH PROGRAMS	D SPECIAL PROGRAMS	E ADMINISTRATION AND FINANCE
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**Groups:**

1 Transportation Systems Planning and Administration	2 Design and Con- struction of Transpor- tation Facilities	<b>3 Operation, Safety and Maintenance of Transportation Facilities</b>	4 Legal Resources	5 Intergroup Resources and Issues
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**Sections:**

A Facilities and Operation	<b>B Users and Vehicles</b>	C Maintenance
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**Committees:**

**A3B01** Transportation Safety Management  
(Michael Finkelstein)

**A3B02** Vehicle User Characteristics  
(Tom Ranney)

**A3B03** Operator Education and Regulation  
(A. James McKnight)

**A3B04** Pedestrians (Michael Cynecki)

**A3B05** (vacant)

**A3B06** Simulation and Measurement of  
Vehicle and Operator Performance  
(R. Wade Allen)

**A3B07** Bicycling (Andrew Clarke)

**A3B08** User Information Systems  
(Arthur Roberts III)

**A3B09** Traffic Law Enforcement  
(John Compston)

**A3B10** Alcohol, Other Drugs, and  
Transportation (Barry Sweedler)

**A3B11** Traffic Records and Accident  
Analysis (Paul Jovanis)

**A3B12** Motor Vehicle Technology (vacant)

**A3B14** Motorcycles and Mopeds  
(John Billheymer)

**A3B13**

**Safe Mobility of Older Persons**  
(John Eberhard)

**Subcommittees:**

**(1) Medical Factors** (Richard Marottoli)

**(2) Transportation Alternatives**  
(Katherine Freund)

**(3) Older Driver Research**  
(John Eberhard, Jared Jobe)

**(4) Vision and Cognition**  
(Gary Mancil, Janet Szlyk)

**(5) Vehicle and Environmental Factors** (Philip Oxley, Jeffrey Pike)

**(6) Public Information**  
(Kent Milton, Jackie Anapolle)

**(7) Older Driver Programs** (Loren Staplin)

**(8) Older Driver Policy**  
(Leo Tasca, Joseph Coughlin)

# FEATURES AND ANNOUNCEMENTS

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## Geriatric Care Managers Add Driving and Transportation to Roster of Issues

A specialized group of professionals is increasingly being called upon by families and family advisors seeking assistance in caring for frail older relatives. Called geriatric care managers, these practitioners specialize in assisting older people and their families with long-term care and service arrangements. Health care is usually the primary concern, but other problems, including driving and transportation, are often involved -- and, in some cases, even trigger the call for intervention.

According to Elizabeth Bodie Gross, president of the National Association of Professional Geriatric Care Managers (GCM), care management is distinguished from case management primarily by its focus on a broader range of problems and the longer time duration of its service commitment. Care management addresses an individual's health and long-term care needs over a protracted period of time. Case management, on the other hand, is based on a medical model and is designed to meet an individual's health care needs during a particular episode of illness or incapacity.

Services provided by professional geriatric care managers may include:

- Identifying problems and assessing eligibility for assistance;
- Reviewing financial, legal or medical issues and offering referrals to geriatric specialists;

- Offering and assisting with referrals for such services as driver rehabilitation or licensing review;
- Screening, arranging, and monitoring services, either locally or at a distance.

The geriatric care management process generally begins either with a referral from a physician, attorney or financial counselor or a direct inquiry by a family member. The care manager then conducts an assessment of the client's situation, needs and resources. A care plan is designed and implemented, and the care manager monitors results to ensure the plan meets the client's needs, services are delivered, and modifications are made as the client's status changes. The care manager may provide services directly or refer the client to other service providers.

Gross says that as the number of older drivers increases, geriatric care managers are placing greater importance on driving and transportation concerns.

"We all recognize that driving, like the telephone, is a lifeline for older people," she says. "It's important that someone who is dependent on the automobile be able to continue to drive safely as long as possible. When driving has to stop, the person's support environment has to be reconfigured. Access to family, friends, and physicians and other health care and service providers needs to be maintained through other means. This is something that care managers are increasingly being asked to help with."

Gross says that emerging liability concerns provide an additional incentive to address the driving issue and to raise its importance for geriatric care professionals.

"If an impaired driver injures or kills someone, there's the possibility that those who knew of the driver's impairment -- family members, physicians, care managers -- may be found liable if they did not take preventive action, like notifying the motor vehicle department. This is an issue our insurance underwriters have raised with us, and one that I, as the president of GCM, will be looking at carefully over the next year or two."

## Growing Professionalism

In an effort to ensure the highest professional standards, GCM has joined with the National Academy of Certified Care Managers and the Case Management Institute to establish a credentialing program in geriatric care management. The first credentialing exam was held December 1995.

GCM now has 12 chapters and about 1,000 members nationwide. For more information on geriatric care management, professional referrals and GCM, contact the National Association of Professional Geriatric Care Managers, 1604 N. Country Club Road, Tucson, Arizona 85716; phone (520) 881-8008, ext. 107; fax (520) 325-7925. □

*EDITOR'S NOTE: This is the second in a planned series of articles on organizations that provide professional referral services that may be of use to older drivers and their families. If you know of or belong to such an organization and would like to see it featured, please contact the newsletter editor.*

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## One Professional's Experience

Elizabeth Bodie Gross, president of the National Association of Professional Geriatric Care Managers and of Elder Link, a Chicago-area health care consulting company, sees driving and transportation as issues of emerging concern for professionals assisting older adults and their families with day-to-day care and support.

Three of Gross's most recent cases involved older clients who were still driving despite being diagnosed with dementia. All three eventually stopped driving--one after breaking a hip in a collision, another after Gross alerted local law enforcement authorities that the person's license and insurance had been revoked, and the third after watching a videotape of her own erratic driving performance during an assessment arranged by Gross at the Rehabilitation Institute of Chicago.

Gross says most families come to her for assistance when a situation has reached the crisis stage. If an older person's driving is involved, the person's driving skills are usually so deeply impaired that driving cessation is the only realistic option. "Even then, however, there are barriers to be overcome," she says. "Spouses are apprehensive about intervening, and if adult children live nearby, they're often apprehensive about taking on the responsibility of doing the driving."

Gross says that in the case of older persons with dementia, "we may be able to resolve the issue with them if they have lucid periods. If not, then we may have to work with the family, the motor vehicle department, and law enforcement to do what we can to keep the person from driving. □

## Health Care Professionals and the Older Driver

### Pennsylvania's Experience with Physician Reporting

According to a 1994 report by the National Institute on Aging, the average older adult has as many as eight physician visits per year. From a practical perspective, this puts physicians in a favorable position to detect existing or emerging functional impairments that could compromise driving performance.

Although many states accept reports of potentially impaired drivers from physicians (and others, including the general public), only seven states require physicians to report. Overall, there is scant data on the frequency or consequences of physician reporting on which to assess its traffic safety impact.

One of the states that has a physician reporting requirement is Pennsylvania. There, the state's Department of Transportation, which handles the reporting program, has a favorable assessment of its value.

Pennsylvania requires that physicians report to the transportation department all patients over age 15 diagnosed as having any condition that could impair driving ability.

Before 1990, the department received about 10,000 reports a year from physicians. In 1990 and 1991, the department mailed reporting information packets to every physician in the state and in bordering communities. Since then, reports have quadrupled, averaging more than 40,000 per year. About half the reports submitted are for patients over age 45.

According to a department fact sheet, approximately 72% of reported persons have medical impairments significant enough to warrant medical recall of their licenses. Seizure disorders and other neurological disorders account for 67% of the license recalls. A recall remains in effect until the person demonstrates competency to resume driving. An additional 9% of physician reports result in driving restrictions, most of which involve vehicle modifications.

#### Looking for assessment tools

Guidelines to help physicians judge a patient's ability to drive safely have been de-

veloped by the American and Canadian medical associations. The AMA's policy directs that a physician who is "uncertain about a patient's ability to drive [should] consider recommending that the state licensing agency arrange a driving test" for the patient.

In the research community, the Andrus Foundation is sponsoring two projects aimed at enhancing clinical assessments of potential driving problems. At Yale University, Richard Marottoli (phone 203-785-3334) is developing a screening instrument for identifying at-risk older drivers. The instrument incorporates previous work on cognition, vision and psychomotor function.

At Johns Hopkins University, Penny Keyl (phone 410-955-3479) and George Rebok are identifying simple assessment tools that could be used in a physician's office to evaluate driving-related skills of older, functionally impaired individuals.

#### Broadening Practitioner Involvement

There now is increasing interest in the roles other health care professionals could take in identifying and assisting problem older drivers. Among these other professionals are occupational therapists, physician assistants, nurse practitioners, podiatrists, psychologists, chiropractors and optometrists.

NHTSA is currently evaluating proposals for a project to identify which health care professionals are most likely to be involved with functionally impaired older drivers and how they could be equipped to effectively intervene. Work on the project is slated to begin Spring 1997. □

#### Vision Tests Available from NHTSA

Two prototype devices for measuring eye movements and pupillary response to light and dark are available from NHTSA for use in current or planned research projects. The devices, FIT-1000 and EM-2, have been used in the past to measure the effects of alcohol and other drugs on ocular behavior. They are now being offered for use in other research programs that support NHTSA's broader interests.

FIT-1000 is a fully automated, self-contained device that includes a computer and a fully enclosed projection box with a

stimulus light. The device, about as big as two personal computers, administers, records and calculates results of several independent tests that together can yield over 100 measures of performance. The tests and measures include:

1. Saccadic eye movements in response to a light source that jumps back and forth. Measures include saccadic speed, accuracy, latency, length and number of saccades per target.

2. Smooth pursuit movement response to a light source that moves varying distances back and forth or up and down at varying speeds. Measures include response lag, deviations from smooth pursuit, number of saccades, and time from start of movement until compression.

3. Saccadic movements in response to a target moving in 5-degree steps to the right, left or up. Measures include average gaze deviation from the target and variability of gaze angle at every step.

4. Convergence of the two eyes in response to a target moving toward the subject's nose. The dependent measure is the time from the start of the target movement until either eye deviates from the target.

5. Pupil response to different illumination levels. Measures include pupil diameter with three light levels plus total darkness, pupil rate and magnitude of response to a flash, and dilation rate and magnitude when a bright light is turned off.

The EM-2 is also a self-contained device, about the size of one personal computer, but is less automatic and has fewer performance measures. It records the actual image of the eye on a video in response to a moving target and changes in illumination levels. The video has to be viewed by a trained observer who manually records measures.

Those interested in using the device(s) in research, send a one-page proposal to Jonathan Walker, National Highway Traffic Safety Administration, 400 7th Street SW, Washington, DC 20590; fax (202) 366-7096; e-mail JWalker@nhtsa.dot.gov. □

## FEATURES AND ANNOUNCEMENTS (cont'd)

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### Employee Workshop Increases Awareness of Aging and Driving

The Texas Department of Health, in partnership with the City of Corpus Christi Risk Management Department and United Parcel Service Safety Department, developed a "Train the Trainer" workshop on Aging and Driving. The 8-hour workshop is designed to raise employee awareness of aging and driving and prepare participants to return to their work sites to educate fellow employees.

Aging and driving is an increasing concern for two groups of employees: those aged 40 and above who are themselves experiencing health and functional changes that impact driving, and employees who must deal with reduced driving skills of older relatives or friends.

The "Train the Trainer" workshop primarily targets safety directors and coordinators. Two training sessions conducted in September were attended by 75 employees from as many different organizations. Leading state experts on aging and driving shared the latest information on demographic and traffic crash trends; physical changes that affect driving performance; insurance and legal issues; techniques to enhance older driver safety; and available resources, including educational and behind-the-wheel driving programs, and alternative transportation.

At the conclusion of the training, participants receive a set of slides, a video and a resource listing of available free supplementary materials to use in their own presentations. During the next year, each participant will present two 30-45 minute workshops with fellow employees. Upon completing these workshops, they each receive a recognition plaque.

To learn more about the program or to obtain a sample program package to help

coordinate a similar program in your community, contact Carla Baker, Texas Department of Transportation, Division of Epidemiology, Injury Prevention and Control Program, 1100 W. 49th Street, Austin, TX 78756; phone (800) 252-8255; fax (512) 458-7689. □

### Lauer Safety Award Goes to David Shinar

In honor of outstanding contributions in furthering the understanding of the human factors of highway safety, David Shinar was presented with *The 1996 A. R. Lauer Safety Award*. Established in 1969, the award recognizes outstanding contributions to the understanding of driver behavior. The award was presented at a ceremony held at the annual meeting of the Human Factors and Ergonomics Society in Philadelphia in September.

In addition to ongoing involvements and leadership in advancing the technical literature, Dr. Shinar was recognized for his successes as an educator, administrator and advisor. Included among Shinar's technical contributions are the seminal project "Tri-Level Study of Causes of Traffic Accidents" and a book, *Psychology on the Road: The Human Factor in Traffic Safety*.

Shinar is professor in the Department of Industrial Engineering and Management at Ben Gurion University of the Negev, Beer Sheva, Israel, and is a consultant to the U.S. Department of Transportation. □

### ITS Older Driver Subcommittee Holds First Meeting

The first meeting of the Older Driver Subcommittee of the Safety and Human Factors (S&HF) Committee of the Intelligent Transportation Society of America (ITS)

was held October 1, 1996 in Orlando, Florida, in conjunction with the 3rd Annual World Congress in Intelligent Transportation Systems. The meeting was attended by a diverse group of representatives from the public and private sectors.

The Subcommittee is chaired by Allan Tull, Member of the Board of Directors of the American Association of Retired Persons. Its mission is fourfold: (1) identify and discuss technological opportunities to improve older driver vehicle operations performance; (2) identify and evaluate ITS opportunities to improve accessibility and mobility of older drivers and non-drivers; (3) review concepts presented for new ITS applications (e.g., collision avoidance systems and advanced traveler information systems); and (4) provide the ITS community with information on transportation needs and requirements of older drivers, including alternatives to automobile travel.

The initial focus of the Subcommittee is on safety and accessibility issues associated with older drivers, ground transportation and ITS. It is reviewing and developing a list of problems associated with older drivers that can be used as a basis for future ITS-based countermeasures. Several potential professional outreach activities are being considered for 1997, including a publication in *ITS Quarterly*, a slide presentation for use with outside groups, a panel discussion at the 7th Annual Meeting of ITS America and the development of a reference document summarizing ITS older driver research.

For additional information, contact Eddy Llaneras, ITS America, 400 Virginia Ave. SW, Suite 800, Washington, DC 20024; phone (202) 484-4547; fax (202) 484-3483; e-mail ellaneras@itsa.org. □

## UPCOMING EVENTS

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**January 12-16, 1997**

**76th Annual Meeting of the Transportation Research Board**

**January 12, 1997**

**30th Annual Workshop on Human Factors in Transportation  
Washington, DC**

Scheduled events dealing with the safety and mobility of older adults include two conference sessions, two paper sessions, two human factors workshops, a human factors anniversary luncheon panel, and Committee and Subcommittee meetings. One confer-

ence session focuses on measures for extending the safety and mobility of older persons; the second, cosponsored with the Committee on Accessible Transportation and Mobility (A1E09), deals with the mobility consequences of driving cessation. One of the paper sessions, cosponsored with the Committee on Vehicle User Characteristics (A3B02), deals with highway characteristics and the older driver; the second emphasizes medical conditions and mobility patterns of older drivers. The two human factors sessions address (1) engineering solutions to improve older driver

and pedestrian mobility and safety and (2) strategies for assisting in the decision to limit or stop driving. The human factors anniversary luncheon includes an expert panel emphasizing different perspectives on "Thirty Years of Human Factors Research in Transportation: How Far Have We Come, and Where Must We Go?" Contact: Rick Pain, TRB, 2101 Constitution Ave. NW, Washington, DC 20418; phone (202) 334-2960; fax (202) 334-2003; e-mail [rpain@nas.edu](mailto:rpain@nas.edu). For program and registration information: <http://www.nas.edu/trb/>.

**March 23-26, 1997**

**43rd Annual Meeting of the American Society on Aging (ASA)  
Nashville, Tennessee**

The theme for the meeting is "The Heart of the Country: Affirming the Contract Between Generations." Contact: ASA, 833 Market Street, Suite 511, San Francisco, CA 94103; phone (415) 974-9600; fax (415) 974-0300; e-mail [patriciam@asa.asaging.org](mailto:patriciam@asa.asaging.org).

**April 11-15, 1997**

**American Occupational Therapy Association (AOTA)  
Annual Conference and Exposition  
Orlando, Florida**

Contact: AOTA, 4720 Montgomery Lane, Bethesda, MD 20824; phone (301) 652-2682; fax (301) 652-7711.

**May 18-21, 1997**

**3D in Transportation - '97 Symposium and Workshop  
Minneapolis, Minnesota**

Sponsored by TRB and the Minnesota Department of Transportation, this meeting is intended to improve understanding of the relation of visualization technology and interactive simulation to human factors and transportation design. The following areas regarding 3D/4D computer and related technologies as they apply to transportation are addressed: design, research, remote sensing, safety, standards, litigation, virtual reality, GIS/GPS, public involvement, construction, maintenance, operations, systems integration, vehicle performance and interactive simulation. The deadline for abstracts or for applications to conduct an exhibit or demonstration/workshop is December 2, 1996. Contact: Rick Pain, TRB, 2101 Constitution Ave. NW, Washington, DC 20418; phone (202) 334-2960; fax (202) 334-2003; e-mail [rpain@nas.edu](mailto:rpain@nas.edu). Call for papers: <http://hopi.dot.state.mn.us/3d/>.

**May 22-25, 1997**

**6th International Conference on Systems Sciences in Health-  
Social Services for the Elderly and the Disabled (SYSTED)  
Chicago, Illinois**

This conference responds to the growing need for an international, interdisciplinary forum that mixes research, policy planning and applied program implementation in addressing the needs of the elderly and disabled. SYSTED conferences feature refereed papers, and published proceedings and sessions in both English and French. The deadline for paper abstracts has been extended to December 1996. There is a strong interest in receiving proposals in the area of older driver safety and transportation. Contact: Leonard Heumann, Program Chair, Department of Urban and

Regional Planning, 111 Temple Hoyne Buell Hall, 611 East Lo-rado Taft Drive, Champaign, IL 61820; phone (217) 244-5373; fax (217) 244-1717; e-mail [lheumann@uiuc.edu](mailto:lheumann@uiuc.edu).

**June 8-11, 1997**

**National Conference on Highway Safety Priorities,  
Lifesavers 15  
Orlando, Florida**

Contact: Mary Magnini, 5302 Harbor Court Drive, Alexandria, VA 22310; phone (703) 922-7944; fax (703) 922-7780.

**August 23-26, 1997**

**21st Annual Conference of the Association of  
Driver Educators for the Disabled  
Crystal City, Virginia**

Proposals are being accepted for pre-conference workshops, seminars and conference sessions. To be considered, submit a proposal cover sheet, 100-150 word abstract, 3-5 learning objectives, abbreviated resume for each presenter, and speaker introductions for use by session moderators. Deadline for submissions is November 30, 1996. Contact: Susan Henderson, 63558 Peppermint Rd., North Liberty, IN 46554; phone (219) 284-7134; fax (219) 284-3259. A certification exam for driver rehabilitation specialists will be offered during the conference. Information packets and application forms will be available in February 1997. The deadline to apply for the exam is July 15, 1997. Contact: Ricardo Cerno, ADED Secretariat, P.O. Box 40, Edgerton, WI 53534; phone (608) 884-8833.

**September 22-26, 1997**

**41st Annual Meeting of the Human Factors and Ergonomics  
Society  
Albuquerque, New Mexico**

Proposals are being accepted for lectures, symposia, panels and debates, workshops, poster sessions, demonstrations, on-site experiments, competitive product designs, new methodologies and case studies. Deadline for submission is early 1997. For specific dates and information, contact: Human Factors and Ergonomics Society, P.O. Box 1369, Santa Monica, CA 90406; phone (310) 394-1811; fax (310) 394-2410; e-mail [72133.1474@compuserve.com](mailto:72133.1474@compuserve.com).

**November 9-12, 1997**

**41st Association for the Advancement of Automotive  
Medicine (AAAM) Annual Conference  
Orlando, Florida**

The deadline for abstracts is December 20, 1996. Papers on traffic injury control, biomechanics and highway safety are invited for consideration. Included among the topics of interest are vehicle crashworthiness; highway design; driver standards, licensing and education; pedestrians and cyclists; commercial vehicle safety; and off-road vehicle safety. Contact: AAAM, 2340 Des Plaines Avenue, Suite 106, Des Plaines, IL 60016; phone (847) 390-8927; fax (847) 390-9962. □

# RECENT PUBLICATIONS

## New Educational Video Available for Older Drivers

A new video, *The Older and Wiser Driver*, is available from the AAA Foundation for Traffic Safety. Using testimonials and on-road driving footage, the 22-minute video is intended for in-home viewing by older drivers and their families or may be incorporated into the curriculum of mature driver improvement programs.

The video focuses on how age-related changes in vision, cognition, fitness and the use of medications impact driving. Compensatory measures to help prolong safety behind the wheel are described, including behavioral changes and vehicle maintenance and design enhancements. Currently under development are a companion consumer brochure and a series of public service announcements that reinforce key messages from the video.

The video costs \$24.95 (including shipping and handling) and can be ordered from your local AAA-affiliated auto club or the AAA Foundation for Traffic Safety, 1440 New York Ave. NW, Suite 201, Washington, DC 20005; phone (202) 638-5944; fax (202) 638-5943; e-mail [aaainfo@aaafoundation.org](mailto:aaainfo@aaafoundation.org). □

## Older Drivers Over-Involved in Fatal Truck Collisions

Though less likely to travel in the presence of large trucks, drivers aged 65 and above are 3.2 times more likely per mile driven than drivers age 16-64 to die in a heavy truck crash, according to a recently completed study by Roger Mingo, Eric Martinussen and Leimin Zhuang. Prepared for the Association of American Railroads, the study examines 1988-1993 data from the U.S. Department of Transportation "Fatal Accident Reporting System" (FARS) and shows that during this time period as many as 18% of fatalities to (light vehicle) drivers age 65 and over involved heavy trucks as compared to 12% of fatalities to younger drivers.

The analysis notes that the overrepresentation of older persons in heavy truck fatal crashes "appears to be a result of direct conflicts between their own general driving behavior--their disproportionate tendency to observe posted speed limits, for example--and the typical operating characteristics of heavy trucks" (e.g., significant speed variation in rolling terrain,

moving slowly on upgrades and rapidly on downgrades). The speed differential makes older drivers especially vulnerable to rear impact collisions. In fact, drivers age 65 and over are more than six times as likely than younger drivers to be hit from behind by a heavy truck.

Single copies of the report, entitled *The Safety Record of Heavy Trucks and Older Drivers: An Analysis of Five Years of Large-Scale Accident Data*, are available from R.D. Mingo and Associates, 2141 Wisconsin Ave. NW, Suite G-4, Washington, DC 20007; phone (202) 333-1133; fax (202) 333-1756. □

## Crash Costs Study Continues Focus on Policy Issues

In a paper presented at the 40th annual conference of the Association for the Advancement of Automotive Medicine (AAAM), Ted Miller and associates at the National Public Services Research Institute extended a multiyear examination of U.S. highway crash costs in which costs were disaggregated into policy-relevant crash types and outcomes.

In a series of papers beginning in 1991, these analyses have looked at costs by body region of maximum injury, vehicle type, roadway class, rural-urban location, alcohol involvement, threat-to-life severity, level of medical treatment, harm (defined in terms of direct expenses plus lost years of life and functioning), costs to people uninjured in a crash, and costs to employers.

The most recent paper presents cost breakdowns by driver age and blood alcohol level, victim age, and restraint use.

Using 1993 data, the paper indicates that youthful drivers face excessive crash risk per mile driven, as measured by costs (1995 dollars). Costs per mile driven are as follows:

Driver Age	Cost Per Mile Driven
Under 18	\$1.58
18 - 24	\$0.43
25 - 64	\$0.11
65 and above	\$0.21
All drivers	\$0.17

According to the authors, the higher-than-average cost for elderly drivers "may reflect the greater propensity of brittle bones and frail bodies to serious injury and difficult recovery rather than reflecting un-

safe driving." For adults aged 65 and above, crash injuries in 1993 accounted for 8.6% of medical spending for injuries due to all causes.

Noting that the medical spending estimates in the paper derive from 1979-1988 data and are dated, the authors write that "since that time, managed care and medical innovations have changed probabilities of hospital admission and may have shifted the pattern of spending per injury victim by level of treatment. Updated medical spending estimates are a pressing research priority."

To obtain a copy of the paper, contact Ted Miller, National Public Services Research Institute, 8201 Corporate Drive, Suite 220, Landover, MD 20785; phone (301) 731-9891; fax (301) 731-6649. □

## Talking Roads Speaks About Older Drivers

*Talking Roads* newsletter is a new "news vehicle" for professionals and the public on developments affecting older drivers. The newsletter is sponsored by Stimsonite Corporation, which manufactures Life-Lites (raised reflective pavement markers) and other reflective highway safety products.

The first edition of the newsletter, expected to be released in November, includes an interview with John Eberhard and highlights the efforts of Committee A3B13.

A *Talking Roads* World Wide Web site will include the newsletter and also provide a forum for individuals, organizations and government agencies to showcase their activities, achievements and concerns relating to older drivers. Plans are to include research and pilot project summaries and to have the site linked to TRB's home page and other technical information sources. The site is under construction at <http://www.talkingroads.org>.

The first issue of the newsletter is available at no cost, although future print editions may carry a fee to cover production and distribution costs.

To be included on the mailing list or to make suggestions for the newsletter or home page, contact Amy Munice, Editor, *Talking Roads*, 1454 West Glenlake, Chicago, IL 60660; fax (773) 973-2047. □

## Hopkins Center Debuts Newsletter on Aging

The Hopkins Center on the Demography of Aging (HCDA) at Johns Hopkins University is one of nine Exploratory Centers on Aging formed in 1994 under grants from the National Institute on Aging. The HCDA has begun publishing a newsletter that may be of interest to A3B13 members and friends.

Entitled *NOAH: News on Aging at Hopkins*, it includes listings of databases on aging-related issues, funding opportunities, new publications and bibliographical citations, and upcoming conferences and meetings.

To obtain a copy or add your name to the mailing list, contact Penny Welbourne, Editor, HCDA, 4028E SHPH, 615 North Wolfe Street, Baltimore, MD 21205; phone (410) 955-1186; fax (410) 955-0792; e-mail [pwelbour@phnet.sph.jhu.edu](mailto:pwelbour@phnet.sph.jhu.edu). □

### Starting a Driving Rehabilitation Program

The last issue of this newsletter included a feature article on how to establish a driving rehabilitation program and what's involved in a driver rehabilitation assessment. Those seeking additional information on these topics are referred to the October 1996 issue of *OT Practice*. Included is an article by Susan Pierce, entitled *A Roadmap for Driver Rehabilitation* (pp. 30-38), which identifies important factors to consider in starting a driving program. A companion article, *The Role of the COTA in Adaptive Driving Programs* (pp. 32-33) by Penni Lavoot and MaryFrances Gross, addresses how the skills and expertise of the COTA (certified occupational therapy assistant) are used to enhance driver rehabilitation programs. *OT Practice* is available from the American Occupational Therapy Association, Inc., 4720 Montgomery Lane, Bethesda, MD 20824; phone (301) 652-2682; fax (301) 652-7711. □

## Eight States To Double Their Older Populations by Year 2020

A recent report by the U.S. Census Bureau indicates that by the year 2020, eight states will double the size of their populations aged 65 and above. Included, in descending order of percent change, are: Nevada, Arizona, Colorado, Georgia, Washington, Alaska, Utah and California. Also by the year 2020, as many as 19 states are projected to have more than 1 million elderly residents (up from the current number of 9 states).

The 200-page report, *65+ in the United States*, profiles the social, economic and health characteristics of the elderly.

Authored by Frank Hobbs and Bonnie Damon, the report (Current Population Reports, Special Studies, P23-190, stock number 803-005-10043-0) is available for \$16 from the U.S. Government Printing Office. □

## Driving and Alzheimer's Disease Featured in Special Journal Issue

Proceedings of the International Symposium on Alzheimer's Disease and Driving, held May 17-18, 1996 at the Washington University School of Medicine, are being published in a supplement of the journal, *Alzheimer's Disease and Associated Disorders*. John Morris, Associate Professor of Neurology at the School of Medicine, Washington University in St. Louis and a program director of the symposium, is guest editor of the supplement.

The symposium featured a lecture series and group discussion led by an expert panel of representatives from the medical and health care professions, legal community, social services, insurance arena, and local and national interest groups.

The proceedings address research, clinical and public policy issues and include the following papers:

*Attentional Problems and Older Drivers* — Karlene Ball

*Simulators for Assessing Driving Skills in Demented Patients* — Frederick Bylsma

*Motor Vehicle Crashes and Drivers with Dementia of the Alzheimer Type* — David Carr

*Evaluating the Driving Competence of Dementia Patients* — Allen Dobbs

*The Role of Selective Attention in Driving and Dementia of the Alzheimer Type* — Janet Duchek, Linda Hunt, Karlene Ball, Virginia Buckles, John Morris

*The Demented Driver: The Doctor's Dilemma* — L. Jaime Fitten

*Strategies for Driving Cessation in Alzheimer's Disease* — Robert Friedland

*A Road Test for Drivers with Dementia of the Alzheimer Type and How Visual Environmental Cueing May Affect Performance* — Linda Hunt, Chris Murphy, David Carr, Janet Duchek, Virginia Buckles, John Morris

*The '94 International Consensus Conference on Dementia and Driving: A Brief Report* — Kurt Johansson, Catarina Lundberg

*Crashes: Outcome of Choice in Assessing Driver Safety* — Richard Marottoli

*Predicting and Coping with the Consequences of Stopping Driving* — Desmond O'Neill

*Clinical and Research Issues: Future Directions* — Cynthia Owsley

*Concerned Americans for Responsible Driving* — Sheldon Suroff

*Automobile Insurance and the Impaired Driver* — Edna Ray

*Driving with Alzheimer's Disease: The Anatomy of a Crash* — Stephen Reinach, Matthew Rizzo, Daniel McGehee

*Cognitive Change, Medical Illness and Crash Risk Among Older Drivers: An Epidemiologic Consideration* — Robert Wallace

The proceedings will be available in mid-1997 from Lippincott-Raven Publishers at (800) 638-3030. □

## Special Issue of IATSS Research Focuses on Older Drivers

In May 1996 the International Association of Traffic and Safety Sciences Research released a special journal issue entitled *Traffic Safety for Elderly Drivers* (Volume 20, No. 1, 1996). The issue reports on state-of-the-art research by traffic psychologists worldwide and offers recommendations for improving older driver safety. Included are the following 13 articles:

*Older Drivers' Safety in Age-Heterogeneous Driving Contexts* — Hiro Ota, Shigeru Hagiwara

*Study on Traffic Safety Measures for Elderly Pedestrians and Cyclists: The Difference in Having a Driver's License or Not* — Yasuhisa Nagayama, Taiji Yasuda

*Improving Road Environments for the Aging Society* — Takuya Seo, Susumu Takamiya

*Safe Mobility for Senior Citizens* — John Eberhard

*Cognitive Capacity and Concurrent Driving Performance in Older Drivers* — Laura Cushman

*A Profile of Occupational Therapists as Driving Instructors and Evaluators for Elderly Drivers* — Linda Hunt

## RECENT PUBLICATIONS (cont'd)

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*Assessing Senior Drivers' Performances with Critical Driving Incidents* — William Schiff

*Selective Visual Degradation and the Older Driver* — D. Alfred Owens, Jeffrey Andre

*Safety Measures for Elderly Drivers: The Situation in Germany* — Manfred Weinand

*Transportation for the Elderly: Towards a User-Friendly Combination of Private and Public Transport* — Bernhard Schlag, Ursula Schwenkhagen, Ulrich Trankle

*Development and Evaluation of Measures to Reduce the Accident Risk of Elderly Road Users* — Christa Michalik

*Research on Older Drivers: A Review* — Liisa Hakamies-Blomqvist

*Elderly Drivers and Safety When Using IT Systems* — Philip Oxley

To obtain the journal, contact Hideo Kunieda, Publisher, International Association of Traffic and Safety Sciences, 6-20, 2-chrome, Yaesu, Chuo-ku, Tokyo 104, Japan; phone +81-3-3273-7884; fax +81-3-3272-7054; e-mail nad02356@niftyserve.or.jp. □

### **Marketing Traffic Safety Study Cites Promise of Social Marketing, Urges More Widespread Use**

Social marketing, an approach to designing health- and safety-oriented public campaigns that focus on changing behaviors among specific target groups, should be employed more widely in traffic safety than it has been to date, according to the authors of a report by the Organization for

Economic Cooperation and Development (OECD).

Theorists and practitioners of social marketing distinguish it from purely educational campaigns. They emphasize that social marketing identifies and attempts to “sell” beneficial alternatives to undesirable behaviors, rather than simply trying to discourage the undesirable behaviors.

The report, *Marketing of Traffic Safety*, was prepared by a scientific expert group as part of the OECD's Road Transport Research Program. The group developed a “social marketing framework for road safety” that outlines a set of steps for developing an approach to behavioral change among road users.

The framework consists of four major elements:

- (1) *situation analysis*, including an objective assessment of the problem; an analysis of the political, cultural, economic and technological influences on the behavioral choices of target groups; and an investigation of how the costs and benefits of alternative behaviors are perceived by the target groups;
- (2) *strategy formulation*, including definition and testing of marketing instruments and the marketing mix of incentives and messages;
- (3) *campaign implementation*; and
- (4) *evaluation* and, when necessary, modification of the campaign.

An examination of 78 road safety publicity campaigns in 14 OECD countries found that although two-thirds of respondents said they applied some or all of these elements to their campaigns, few had more

than a “hazy and patchy notion of marketing.”

The report suggests traffic safety authorities and road users could be viewed as participants in a shared market if safety initiatives were drawn in such a way that the two groups had mutual confidence in each other's motives and in the efficacy of a particular initiative. In considering the balance between regulation and individual responsibility, the report cites evidence that the existence of a “market for regulation” among authorities and a “market for freedom” (or individual responsibility) among road users could provide a basis on which to fashion safety initiatives that satisfy both groups.

Those developing information campaigns on the safety and mobility of older persons may find the report useful. For information on obtaining a copy, contact Head of Publications Service, OECD, 2 rue André-Pascal, 75775 PARIS CEDEX 16, France. □

### **Other Recent Papers**

S. Rosenbloom (1996) *Travel Patterns of Older Women: Implications for the Future*. Presented at the 2nd National Conference on Women's Travel Issues, Baltimore, MD (October 23-25).

S.A. Burton (1996) *Transportation Needs of the Black Female Aged in Baltimore County*. Presented at the 2nd National Conference on Women's Travel Issues, Baltimore, MD (October 23-25). □

- ✓ **Concerned about an older person's**
  - **driving safety?**
  - **mobility ... or lack of it?**
- ✓ **Have questions about dementia and driving?**
- ✓ **Looking for medical, psychological or physical/occupational therapy professionals knowledgeable about driving assessment and safety issues?**

The Committee on the Safe Mobility of Older Persons includes the world's most knowledgeable and experienced practitioners and researchers in transportation, human factors and traffic safety.

If a referral to a Committee member is needed, send your name and contact information, and a brief statement of your concern, to the newsletter editor's office. We'll forward it to an appropriate Committee member with a request to contact you.

✂-----

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

E-mail \_\_\_\_\_

Nature of problem or type of assistance you're seeking:

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Send to:     Newsletter Editor  
               Committee on the Safe Mobility of Older Persons  
               c/o Beverly Foundation  
               44 S. Mentor Ave.  
               Pasadena, CA 91106  
               Fax (818) 792-6117  
               E-mail bf3@ix.netcom.com

***TRB Annual Meeting, January 12-16, 1997***

***Washington, DC***

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***Details Inside***

**Have a Safe Holiday!**

**Beverly Foundation  
44 South Mentor Avenue  
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