FACT SHEET

Driving Cessation and Health Outcomes for Older Adults:
A LongROAD Study

Background
- The number of older drivers on the road is continuing to increase in the United States.
  - The proportion of the population aged 65 years and older will increase from 13% in 2010 to 20% in 2040.
  - Of the 39.5 million adults aged 65 and older in the U.S., 81% hold a driver’s license.
- Declining health is known to be associated with driving cessation in older adults.
  - This is due to age-related declines in health, physical, and cognitive functions.
- It is less clear what impacts driving cessation may have on subsequent health and well-being in older adults.

Objective
- To better understand the research literature on the consequences of driving cessation in older adults.

Methods
- A systematic literature review, including a narrative and a meta-synthesis was conducted on previously published studies pertinent to the health consequences of driving cessation.
  - Quantitative data for drivers aged 55 and older
  - Cross-sectional, cohort, or case-control designs
  - Had a comparison group of current drivers
- Identified through a comprehensive search of bibliographic databases
- Sixteen studies met the inclusion criteria

Key Findings

Physical Health
- Former drivers had markedly low participation in outside activities and diminished productivity in daily life activities compared to current drivers.

***Continued***
The association between driving cessation and reduced physical functioning was strong in longitudinal studies even after adjusting for socio-demographic factors and baseline health.

**Depressive Symptoms**
- Overall, driving cessation almost doubled the risk of increased depressive symptoms in older adults (OR= 1.91, 95% CI 1.61-2.27).
  - Four of the studies reported significantly greater depressive symptoms in drivers who gave up their keys, after adjustment for potentially confounding factors.

**Social Health**
- Social health refers to the capacity to interact in society, which can be measured by social engagement, social contacts, and satisfaction with social roles and social support.
- One study found that driving cessation was associated with a 51% reduction in the size of social networks of friends and relatives over a 13-year period.

**Cognitive Decline**
- Several studies found that in general, former drivers had accelerated cognitive decline over a 10-year period compared with active drivers even after controlling for baseline cognitive function and general health.

**Entry into Long-Term Care**
- One study found that former drivers were nearly 5 times as likely as current drivers to be admitted to long-term care (LTC) facilities.
  - After adjusting for marriage or co-residence, there was still a strong association.

**Increased Risk of Mortality**
- A number of studies found that driving cessation was a strong predictor of 3-year mortality risk, as non-drivers were four to six times as likely to die as drivers, after adjusting for baseline psychological, general health, sensory, and cognitive abilities.

**Implications**
- Driving cessation in older adults appears to contribute to a variety of health problems, particularly depression.
- To mitigate the potential adverse effects of driving cessation on health and well-being in older adults, intervention programs ensuring safe mobility and social functions may be needed.

For more information on this study and the AAA Foundation’s other traffic safety research and materials, please visit [AAAFoundation.org](http://AAAFoundation.org).

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