



## Driving: When Aging and Illness Make it Difficult

by [Sandra Ray](#)

Many individuals believe getting their first driver's license is a rite of passage – a testament that adulthood and freedom have arrived. Considering increased scrutiny and legislation concerning older drivers, caregivers and aging patients are both starting to wonder when to continue driving, when to slow down, and when to stop driving altogether. Physicians have joined the ranks of those who are questioning the safety of older adults behind the wheel of a car.

There are valid reasons for concern. The Federal Highway Administration (FHWA) states that drivers over age 75 have the highest motor vehicle fatality rate than any other driving group except drivers under 25. In addition, this same driving group has more motor vehicle accidents per miles driven than any driving group except teenagers.

Some studies have suggested that changes in the vision field can increase the number of older drivers involved in accidents. Both visual acuity and visual depth perception are affected, resulting in lowering the overall field of view for the aging driver. Reaction time or the ability to adapt to changing driving conditions also changes with age, although some studies are unclear as to the complete effect this changing condition has on the ability of an older adult to drive safely.

Prescription medications can also affect someone's ability to drive. Seniors take more prescriptions daily than other groups, with studies estimating this number between two and seven. Some drugs interfere with hearing and someone's ability to react to driving conditions timely enough to avoid an accident.

### Family/Caregiver Responsibility

Many family members or caregivers are understandably hesitant to tell their loved one that it's time to cut back on driving or stop driving altogether. Staying independent in the home as long as possible can keep spirits high and decrease someone's susceptibility to depression. Still, there are some circumstances that warrant a caregiver taking steps to ensure their loved one's safety.

One of the best ways to determine if an older driver is having problems driving is to be in the car as a passenger to observe what happens during



real driving conditions. It may take several trials to get the full scope of what could happen. Driving ability could vary by the time of day, how soon a person drives after taking medication, or at night.

There are several questions caregivers can ask when looking at whether it's time to limit or stop driving:

- When exiting a highway or interstate, does the driver seem confused?
- Does the driver seem nervous or agitated?
- Do they fail to stop at red lights or stop signs?
- Are they confused about the gas or brake pedal?
- Are there unexplained dents in the paint of the car, mailbox, garage, or other objects/vehicles at the home?
- Can they read and understand traffic signs?
- Does the driver stop for no apparent reason?
- How do other drivers react to the driver on the road?
- Are turns, especially left ones, difficult to navigate?
- Is he/she aware of potentially dangerous situations or activity on the side of the roadway?

While these are not the only areas to consider, they will provide the caregiver with a method to begin evaluating how well the older driver is navigating on the roadway on their own. An objective evaluation is necessary to keep loved ones safe while on the road.

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## Driving: When Aging and Illness Make it Difficult *(continued from page 1)*

Some older drivers start to ask for help or naturally slowdown in their driving innately as they become more uncomfortable. For instance, some will stop driving at night if they have difficulty seeing. Others may only drive during early morning hours when they feel like their faculties are sharper. Still others may ask for a co-pilot when they make regular trips to the doctor or grocery store as a way of “checking themselves.”

### Next Steps

After the caregiver or family has decided that the driver should limit or stop driving, begin to have honest conversations with them about their ability to drive. Defensiveness about driving ability is common and older drivers often feel as if their independence and livelihood are threatened by handing over the keys.

Another way to approach the situation could be through the driver’s physician. The physician can evaluate specific medical conditions that are hindering a person’s ability to drive. For example, a person with cataracts may be able to have surgical intervention that could increase their field of vision and improve their driving skills. After a thorough exam, a physician may also decide that a person is no longer able to drive. Hearing the news from a doctor could be easier to accept than when a loved one provides the same message.

Laws vary from state to state regarding continued licensing of older drivers and a quick call to the state’s transportation or public safety office could give more in-depth information. For example, some states require drivers to retest after they reach a certain age or have more frequent eye examinations. Others may require a physician’s letter stating they are physically fit. For the same reason, other states are silent on the issue, leaving it up to individual responsibility to decide if they are fit to continue driving. The doctor may also provide a statement for the family that can be attached to the person’s driving record, noting restrictions too.

If he/she fears losing the driver’s license as a valid form of identification, all states offer the option to provide a legal ID card that does not include driving privileges. These IDs are provided by the same office where someone would apply for a driver’s license.

### Alternate Transportation

If the decision is made for someone to stop driving, it helps to ease their anxiety that transportation could be readily available. These arrangements could be made within the family or caregiver circle or by researching available transportation in the community.

Some ideas for transportation include:

- Selling the family vehicle and setting aside those funds to pay for public or private transportation.
- Rotating a schedule with family members or friends to provide ongoing transportation.
- Qualifying for special transportation in the community based on medical need, especially for medical appointments. (For starting points on where to find these programs, visit [211.org](http://211.org).)
- If public transportation is available, most communities have options available for those who are unable to walk to community bus stops. Applications need to be signed by a physician or social worker documenting that the person needs door-to-door service.
- Joining an existing neighborhood carpool or vanpool service.
- Senior centers may provide transportation directly to and from programs regularly. Additional trips may be available as needed or as scheduled; some fees could apply.

These are only a few of the many alternate transportation methods that are available. It is important to emphasize that it is still possible for someone to be independent and live on their own in the absence of a car and a driver’s license.

It is natural for someone to be anxious or even depressed about not being able to drive. To address these concerns, caregivers and loved ones need to continue communicating about the need for transportation and how those needs can best be met.



- AWAKENING
- BASKETBALL
- BLOSSOM
- DAFFODIL
- DAYLIGHT SAVING
- EASTER.
- EQUINOX
- FLOWER
- FRESH
- GREEN
- GROWTH
- HOLI
- KITE
- LEPRECHAUN
- LUCK
- MADNESS
- MARCH
- PARADE
- POT OF GOLD
- RAIN
- REBIRTH
- RENEWAL
- SHAMROCK
- SHOWERS
- SPRING
- ST. PATRICK'S DAY
- WINDY



WORD SEARCH DIRECTIONS: Find and circle the vocabulary words in the grid. Look for them in all directions including backwards and diagonally.

Y	T	A	S	D	V	R	I	J	B	Y	L	Z	P	V	B	Y	O	F
M	S	J	C	A	F	E	T	R	H	T	K	O	G	P	N	D	E	V
D	M	H	C	D	Y	T	Y	E	G	I	C	A	A	H	U	N	Q	Z
Z	Y	G	A	K	N	S	Q	N	N	H	U	P	C	Z	A	I	U	B
F	A	X	A	M	I	A	N	E	I	O	L	R	R	W	H	W	I	M
R	D	S	F	A	R	E	Q	W	N	L	A	A	P	Y	C	Q	N	O
E	S	S	L	K	V	O	Q	A	E	M	I	M	F	G	E	N	O	B
S	K	E	G	K	D	B	C	L	K	N	H	T	W	O	R	G	X	D
H	C	N	E	H	Y	E	I	K	A	B	D	G	Q	H	P	F	V	Z
B	I	D	O	B	D	Y	I	Y	W	N	V	A	N	U	E	Y	R	J
M	R	A	L	A	G	N	I	V	A	S	T	H	G	I	L	Y	A	D
E	T	M	R	S	H	N	Y	R	U	A	T	G	H	T	R	A	Q	L
H	A	A	S	K	F	E	M	O	S	S	O	L	B	D	E	P	S	O
X	P	B	E	E	T	E	E	O	T	J	K	I	T	E	W	E	S	G
W	T	V	Y	T	W	R	J	N	Y	M	Z	K	X	Q	O	G	U	F
G	S	F	H	B	A	G	M	S	R	E	W	O	H	S	L	L	H	O
R	P	C	O	A	U	M	L	R	E	B	I	R	T	H	F	H	E	T
B	J	X	L	L	E	D	A	F	F	O	D	I	L	S	O	Z	E	O
J	A	B	I	L	I	V	P	T	K	T	V	U	O	N	G	I	Z	P

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CAREGIVING  
is the most  
SPECIAL GIFT  
we can give  
to ANOTHER  
HUMAN BEING-  
you INSPIRE ME!!

SENIOR SHOWER PROJECT

**Save The Date**  
Saturday, May 3, 2025



**CERA Sports & Recreation Park**

Beginner (2.0-2.4); Recreational (2.5-2.9); Intermediate (3.0-3.4);  
Competitive (3.5-3.9); and, Advanced (4.0+) Levels

**DETAILS TO COME!!**

Do you have an email address? Want to receive your newsletters electronically? Please submit your email address to [jferril@thrive-alliance.org](mailto:jferril@thrive-alliance.org) for future correspondence! If you desire a listing of caregiver support groups whether live or virtual please e-mail or call me at 812-399-5854. We also have a Thrive Alliance Caregiver Resources Facebook group. Please e-mail or call if you would like to be a part of the group. If you want removed from the mailings, please let me know as well.

## Blackberry Lemon Drop Cupcakes

The sweetness from the stevia perfectly balances the tartness of the fresh blackberries. Lemon brightens all the flavors in these baked delights.



*American Heart Association recipes are developed or reviewed by nutrition experts and meet specific, science-based dietary guidelines and recipe criteria for a healthy dietary pattern.*

### Ingredients

- Cooking spray
- 12 blackberries, thawed if frozen, patted dry with paper towels, optional

### Cupcake Ingredients

- |                                  |  |   |
|----------------------------------|--|---|
| • 1 1/4 cups all-purpose flour   | • 2 large eggs                                   | • 1/8 teaspoon salt                           |
| • 1/4 cup almond flour           | • 1 tablespoon olive oil                         | • 1 cup frozen blackberries, each cut in half |
| • 1 teaspoon baking powder       | • 2 teaspoons grated lemon zest                  | • 3 tablespoons stevia sugar blend            |
| • 1/2 cup unsweetened applesauce | • 1 tablespoon fresh lemon juice                 |   |
| • 1/2 cup fat-free milk          | • 5 drops lemon-flavored liquid stevia sweetener |   |

### Frosting Ingredients

- |                                  |  |  |
|----------------------------------|--|--|
| • 2 ounces low-fat cream cheese  | <b>OR</b>  |  |
| • 2 ounces fat-free cream cheese | • 2 stevia sweetener packets                             | • 1 teaspoon grated lemon zest         |
| • 1 teaspoon stevia sweetener    | • 8 drops lemon-flavored liquid stevia sweetener         | • 1/2 cup fat-free, plain Greek yogurt |
|                                  | • 8 drops vanilla crème-flavored liquid stevia sweetener |  |

### Directions

Preheat the oven to 350°F. Lightly spray a 12-cup muffin pan with cooking spray.

In a large bowl, stir together both the flours, stevia sugar blend, and baking powder.

Make a well in the center of the flour mixture. Add the applesauce, milk, eggs, oil, 2 teaspoons lemon zest, lemon juice, 5 drops lemon-flavored liquid stevia sweetener, and salt, stirring just until moistened but no flour is visible. Gently fold in the 1 cup frozen blackberries. Spoon the mixture into the muffin cups.

Bake for 22 to 24 minutes, or until a wooden toothpick inserted into the center comes out clean. Transfer to a cooling rack. Let cool for 30 minutes before frosting.

Meanwhile, in a medium bowl, using an electric mixer on medium-high speed, beat the frosting ingredients except the yogurt, for 1 to 1½ minutes, or until smooth, scraping the sides of the bowl as needed. Add the yogurt and beat on medium-high speed for 20 to 30 seconds, or until smooth and creamy. Spread 2 tablespoons of the frosting on top of each cupcake. Garnish each with a blackberry.

# Sandi's Closet Singers



Sandi's Closet Singers is a choir specifically designed for individuals living with dementia and their caregivers. We provide a supportive, engaging environment where participants can enjoy singing, boost their memory, and connect with others through music, enhancing their emotional well-being and cognitive function.

NO auditions, all are welcome!  
Snacks, drinks and socialization  
breaks will be provided!  
\$20.00 registration fee, payable by  
cash or check to:

Sandi's Closet, Inc  
2715 Franklin Dr  
Columbus, IN 47201

**Rehearsal days and times**  
Every Tuesday  
from March 11 to June 10  
10am-12pm

**Rehearsal location**  
Memorial Baptist church  
2370 7th st

Caregiver must be present during rehearsal times  
for more info, contact Jill Tasker  
sandisclosetinc@gmail.com | (812) 341-1478



*Heritage Fund*