Driving Miss Daisy
in Country NSW

Extending the transport options of older people living in rural NSW

October 2000

NSW Committee on Ageing
The NSW Committee on Ageing advises the Premier, through the Minister for Ageing, on matters affecting the needs, interests and well-being of older people in NSW. The 14 members of the Committee come from diverse backgrounds and have skills and interests in many different areas of public policy.

This report was guided by a Project Sub Committee of the Committee on Ageing. Its members were Eric Bedford (Chair), Gerlinde McQueen and Margaret Smith. The Committee would also like to thank the many others who provided input into the preparing of the report.

Written by Sarah Fogg, Senior Project Officer, NSW Committee on Ageing

Design: Wendy Farley, anthouse@acay.com.au
Cartoons: Greg Gaul

ISBN  0 7313 9828 9

© NSW Committee on Ageing
October 2000

Please feel free to reproduce any part of this work with appropriate acknowledgment.

To comment on this report or to contact the NSW Committee on Ageing, contact:

NSW Committee on Ageing
Level 13, 83 Clarence St, Sydney  NSW  2000
Ph: (02) 9367 6860 Fax : (02) 9367 6890
Email: ccoa_info@add.nsw.gov.au
Website: http://www.coa.nsw.gov.au

Disclaimer

While every care has been taken in the preparation of this publication and the information it contains is believed to be accurate, this document contains guidelines only in relation to its subject matter. The NSW Committee on Ageing cannot be liable for any error or omission in this document or for damages arising from the supply, performance or use of the publication and makes no warranty of any kind, either express or implied in relation to this material.
Foreword

It is hard to overestimate the impact that transport has on the lives of older people in rural New South Wales. More than any other issue, older people in rural areas consulted by the Committee on Ageing consistently identify access to transport as having critical importance on their day-to-day quality of life.

Good access to transport makes the difference between being an independent active member of the community, or living a restricted and dependent life in which ordinary activities such as shopping, visiting or being visited by friends and getting to health appointments become very difficult or even impossible. Social isolation and depression then become a real risk, especially for people who live alone.

Australians are very dependent on private cars for transport and nowhere more so than in rural NSW. So what happens to older Australians when they can no longer drive? And what happens to the other older people who used to rely on them to get around as well?

In this discussion paper, the NSW Committee on Ageing aims to highlight the difficulties that older people living in rural NSW face, if they are getting to the stage when driving is difficult or unwise or if they do not drive or have access to a car. Older people do not want to become more dependent than necessary on other people or on community and health services. Yet this will happen unless they can keep reasonably mobile – with good access to private, public or community transport.

As a community we face a real challenge to find ways of enabling older people to keep mobile and independent, including older people who live in rural areas.

In this discussion paper, the Committee suggests some ways of widening the transport options of rural older people. But the solutions are likely to have to come from many directions. We urge readers to give us feedback on the issues raised in this paper and the solutions suggested. Contact details for the Committee are on the opposite page.

We look forward to hearing from you.

John Mountford
Chairperson, NSW Committee on Ageing

Driving Miss Daisy in Country NSW
Driving Miss Daisy in Country NSW
Isolation and depression..................................................................................................32
Unmet need ......................................................................................................................33

The alternatives.............................................................................................................35
Family and friends........................................................................................................36
Public transport ...........................................................................................................37
Community and health related transport.................................................................40
Taxis ..............................................................................................................................42

Options for extending the safe mobility of older people in rural areas............43
Proposal for pilot to trial a new car sharing scheme.................................44
Improving public and community transport......................................................45
Promoting safe driving by older people...............................................................47
Decisions about retirement housing.................................................................48
Executive Summary

This report highlights the transport situation of older people living in rural NSW in the context of the demographic, economic and social changes occurring in rural NSW. It focuses on older people’s access to, and dependence on, the private car and reviews the alternatives available when they become unable to drive or lose their access to a car.

The number of older people living in rural NSW and facing potential transport difficulties is set to increase, especially on parts of the north and south coasts. Many inland areas also have high concentrations of older people as a result of younger people moving away.

As in other countries, older people depend heavily on the private car for their mobility. Around four out of five people in their 60s hold a drivers licence. In the 75 years and older age group, reliance on cars is still high but people tend to be passengers rather than drivers. Older women, older people of non-English speaking backgrounds and older Aboriginal people are less likely to drive than the average.

Older people’s mobility is strongly related to whether or not they drive. On average, non-drivers make fewer trips than drivers. Non-drivers do not simply travel by a different means of transport.

In rural areas, the car offers convenience and independence far and above that offered by any other means of transport and most older people regard the car as essential to their quality of life. Eventually, however, physiological changes that accompany ageing affect everybody’s ability to drive safely. The rate of change varies greatly from person to person and may not be noticeable to the individual until age 75-80 years. Health conditions and medications can also affect driving ability.

Road safety has been thought of as a problem of young and inexperienced drivers but there is growing concern about older drivers’ accident rates, especially when the fact that older people drive less is taken into account.

Many older people consciously modify their driving as they notice their abilities changing, but there is some debate whether those who need to modify or stop driving, actually do so of their own accord or do so adequately. On the other hand, many older people are willing to acknowledge that there is room for improvement in their driving and are open to receiving information and advice, so long as it is provided in an appropriate, non-discriminatory manner. However, older people in rural areas generally do not have easy access to support and advice about monitoring, regulating and, if necessary, stopping driving. A number of
programs exist but the proportion of older drivers that undertake them is low.

Aspects of the traffic environment, such as roads, traffic signs and signals, were not designed to suit the abilities of older drivers. Older people in rural NSW also report that the poor condition of many local roads is a problem.

Stopping driving has major emotional and practical consequences for older people, threatens their ability to carry out their normal activities and threatens their social networks. Many older drivers are also relied upon by spouses, other older family members and friends.

Older people’s decisions to stop driving are largely influenced by the availability of alternatives – family and friends, public transport, community transport and taxis. In practice, non-drivers depend heavily on their family members and friends for transport. However, this option is somewhat under threat in rural areas because of the migration of younger people away from rural areas, particularly inland rural areas. Older people who move to the NSW north and south coast on retirement also tend to be out of reach of family members for help with transport.

Towns and centres with a population of more than 7500 generally have some form of public transport service although it may not be geared to the needs of the older population. Accessibility and other problems may also prevent older people from being able to use existing public transport services.

A wide range of different forms of community transport exist in NSW providing assistance to frail older people and isolated and disadvantaged older people. Currently however, community transport services cannot meet the demand from older people. The centralisation of health services in regional centres also means that community transport services are under increasing pressure to provide health-related transport between rural towns and regional centres.

Another possible option for older people may be to move to an area where services and public transport is better or relatives are closer. However, there are many practical, financial and emotional barriers to moving, including the low value of houses in most rural areas.

There is, therefore, a significant challenge to ensure the safe mobility of the growing older population of rural NSW, including those who do not drive or have access to a private car. A multi-pronged strategy will be required, tailored to the needs of the local population.

The Committee on Ageing believes there is scope for the trialing of a new form of car sharing that would match older people who own cars which they longer drive with younger volunteer drivers. It is not uncommon for older people gradually to reduce the amount of driving they do, to the point that they drive only rarely or not at all. Another common scenario is for a widow to be left with a car
in the garage that she does not drive, when her husband dies. Many people provide similar assistance to older family members and friends on a purely informal basis. However, the Committee on Ageing believes there is scope to extend informal car sharing arrangements on a more organised basis.

The Committee on Ageing recommends that:

1) the Government fund the development and piloting, in rural NSW, of a new car sharing scheme that would match older car owners needing drivers, with younger volunteer drivers.

Older people’s decisions to stop driving are heavily influenced by the availability of alternatives. Improving public and community transport will help reduce the number of unsafe older drivers on the road. The Committee on Ageing recommends that:

2) additional transport planning and/or development worker positions be established in regional NSW with the lead agency being the Department of Transport and joint funding from agencies involved in transport, planning and rural development;

3) the Draft Accessible Transport Standards should be required under the Passenger Transport Act through the Performance Assessment Regime, and implemented by private bus service operators in regional NSW without delay;

4) private bus service operators in rural areas ensure that information about their services (such as timetables and details of fares and concessions) is easily available to the older public through multiple outlets and channels and meets best practice standards of information presentation as described in the Ageing and Disability Department’s ‘Practical Guide to Public Transport Information’;

5) private bus service operators improve the marketing of their services to better attract and meet the needs of the seniors’ market;

6) private bus service operators further examine other ways of making their services more ‘older person friendly’;

7) the Pensioner Excursion Ticket concession be extended to private buses and Countrylink trains in rural areas;

8) rural bus services are maintained in the light of the predicted drop in school bus subsidies, and hence longer term decline in available cross-subsidy to operators, as the school age population declines in rural areas;
9) the kilometre limit on Countrylink Excursion Tickets should be extended to enable users to reach regional hubs, with the Ticket also to be useable on local private bus services in the region of the destination;

10) taxi operators be encouraged to offer discount fares to older people and to improve the responsiveness of their services to the needs of the seniors’ market;

11) local councils and state roads authorities implement standards relating to the placement and design of kerbs, guttering and seating at bus stops so that getting on and off buses is made easier for older people, as per the recommendations of Austroads ‘Accessible Transport on Low Traffic Bus Routes (AP 138)’ report;

12) the recommendations of the Sinclair and Menadue Reports about health related transport are implemented;

13) public and private health services and providers give greater attention to considering how older people will access their services and on training key staff (such as hospital admittance and discharge staff and doctors’ receptionists) to be sensitive to older people’s needs in this respect;

14) the Departments responsible for community transport and community transport service providers ensure that:
   • the reimbursement of volunteer drivers’ car running costs is at the Australian Taxation Office rate, and on a par with the payment made to paid drivers using their own vehicles
   • arrangements are in place so that volunteer drivers are adequately covered by insurance
   • volunteer drivers are not placed unreasonably in situations of being expected to deal with medical emergencies while driving older people to or from health appointments;

15) community transport in rural areas be adequately funded to enable it to meet the needs of older people in rural areas;

16) licensed clubs be encouraged to become more pro-active in arranging and offering transport to club-based activities for older people living in outlying areas, as part of their contribution to the local community.

The number of drivers over the age of 65 is predicted to increase sixfold over the next 15 years. The Committee makes a number of recommendations designed to enable older drivers to keep driving, safely. The Committee on Ageing recommends that:
17) In the light of the projected major increase in the numbers of older drivers, the Government examine ways to improve the design of roads and intersections, signage and other aspects of the traffic environment so that they are more sensitive to the needs of older people and can assist older people to remain safe drivers;

18) The Government and insurers investigate ways to ensure that older drivers in rural areas have access to driving safety awareness programs and to free or low cost driver education and refresher courses (especially those with a practical driving component);

19) Local councils in rural areas be encouraged to employ road safety officers with a brief to enable local older people to gain awareness of road safety risks and safe driving practices;

20) The NRMA be encouraged to continue the expansion of its *Years Ahead – Road Safety for Seniors Program* into regional and rural parts of NSW;

21) In order to make driving easier for rural older people, the Government examine ways of upgrading the condition of local roads in rural areas, drawing on NSW Government and Commonwealth Government funding.

Accessibility to services, social and other destinations is determined not only by the availability of transport, but also by the location of these destinations relative to where older people live. The Committee on Ageing recommends that:

22) The need for older people to be in close proximity to facilities and services remains a key consideration under the State Environmental Planning Policy No.5, currently under review;

23) The issues raised in this report be considered by the Department of Urban Affairs and Planning in any current or future reviews of State Environmental Planning Policy No.5 and related planning instruments;

24) The NSW Government and local government re-examine the incentives and disincentives that influence older people's decisions about housing choices in retirement, with a view to:

- facilitating rural older people who wish to move to areas with better access to services and transport, to do so

- encouraging older people to consider the location of services and availability of transport when making decisions about their housing options in retirement.
Introduction

The NSW Committee on Ageing was asked in 1999 to report to the Minister for Ageing on issues affecting older people living in rural and remote areas. In doing so, the Committee drew on recent consultations it had conducted in rural areas.

In its report\(^1\), access to transport was identified as a critical issue for rural older people. Concerns include issues of accessibility, affordability, limited public transport and community transport options, lack of access to public transport concessions, the impact of having to stop driving on older drivers and their older passengers, and the condition of rural roads as a problem for older drivers.

Access to health services is also an issue of transport and location, as the Sinclair Committee into Health Services in Smaller Towns\(^2\) recently reported. It noted that one of the five most significant obstacles to providing effective health and related services in small rural communities is the complete absence of public transport and limited community transport. It also noted the increased centralisation of services generally in rural areas and a move to regional centres due to increased personal mobility and car utilisation.

However, lack of access to transport has an impact on older people that is much greater than merely making it difficult to get to health appointments. It affects virtually all aspects of their lives. Physical mobility and the ability to take part in activities outside the home is a vital contributor to the social integration and quality of life of older people. It is vital to healthy ageing.

The ageing of the population taking place across NSW, but particularly in rural areas, thus poses several questions. To what extent can rural older people meet their own transport needs? How will their transport needs be met when they can no longer drive or no longer have access to a car? Given the limited alternative options provided by public and community transport and taxis, what other strategies are needed to facilitate the continued mobility and independence of older people?

The focus of this report

The purpose of this report is to try and answer some of these questions. It aims to highlight the transport situation of older people living in rural NSW, in the context of the overwhelming dependence on the private car – by the community as a whole and by older people – and the demographic, economic and social changes occurring in regional and rural NSW.

\(^1\) Driving Miss Daisy in Country NSW
It examines older people’s access to and dependence on the private car and the alternatives available to them if they do not drive or have access to a car. And finally, the report makes recommendations for strategies to improve rural older people’s access to transport, including the trialing of a new type of car sharing scheme.

In doing the background research for this report, it became clear that there is a paucity of data and research on the transport circumstances of older people in Australia and even less on older people who live outside metropolitan areas. However, the problems people face in rural NSW are not wholly unique and, in the absence of much rural Australian data, the Committee has drawn on information about older people living in metropolitan areas and in other countries with a similar geography and dependence on the private car.

In recognition of the heavy dependence on the private car and the fact that there have been a number of reports that focus on community transport, this paper deliberately concentrates on car transport.

The numbers of older people living in regional and rural NSW

Forty-two percent of the NSW older population lives outside the Sydney metropolitan area, that is, in the four Ageing and Disability Department regions, Hunter, Western, Northern and Southern.3

Figure 1: Numbers of older people living in regional and rural NSW, 1998

Source : ABS Estimated Resident Population, Data Unit, Strategic Policy and Planning Unit, ADD

Driving Miss Daisy in Country NSW
Of the around 340,000 people aged over 65 who live outside Sydney, just under 111,000 are aged between 75 and 84 and just under 31,000 are 85 or over.4

The number of people aged over 70 is projected to grow by 2.04% per year between 1996 and 2006 for the state as a whole. This is greater than the projected growth for the population as a whole.5 However, in most non-metropolitan parts of NSW, the projected growth among the over 70s is higher still. For example, it is projected to be an average rate of 3.26% per year on the mid-north coast and 3.49% per year on the south coast. These are areas which have already experienced a substantial rate growth in their older populations. The number of older people in the Richmond-Tweed area, for example, increased by 29% in the 5 years to 1991.

Some inland parts of the state also have high concentrations of older people, but rather as a result of younger people moving away.

The number of older people living in rural NSW and facing potential transport difficulties is thus set to increase.
Dependence on the private car for mobility

In developed countries across the world, the number and proportion of older people who are dependent on the private car for their mobility is high and increasing still further.

The proportion of older people who hold a current drivers’ licence, and/or who own a car, gives some indication of the level of dependence on the private car for mobility.

The picture is not altogether clear, however, as not everyone who has a current drivers’ licence actually drives or has access to a car. Similarly, the number of cars owned by older people does not take into account the number of drivers, usually women, who have access to a car registered in their spouse’s name. Older women, especially, may be passengers in, rather than drivers of, a private car. Conversely, car ownership statistics do not throw any light on the number of older people who still own a car but in practice no longer drive it, or drive it very little.

Older people with drivers’ licences

In all developed countries, including Australia, there is a trend for an increasing proportion of older people to hold drivers’ licences.

At one extreme, in 1996, 74% of all Americans aged 65 and over were licensed drivers, almost 90% of men and 55% of women. In New Zealand over 80% of men over 65 and almost 50% of women were licensed drivers in 1989/90.

In Australia and in NSW the picture is similar, although not as high as in the US or New Zealand. In NSW, 78% of people in their 60s are licensed, dropping to around 65% of people in their 70s. A much smaller 27% of people aged over 80 hold licences.

These figures are averages. There are some groups within the older population who are less likely than the average to have ever held a drivers’ licence. These are reported to include older women (especially those living in rural areas), older people of non-English-speaking backgrounds and older Aboriginal people.
Table 1: Numbers of older people holding drivers licences in regional and rural NSW, June 1998 (all NSW outside RTA Sydney region)

<table>
<thead>
<tr>
<th></th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>60-69</td>
<td>92,166</td>
<td>111,392</td>
<td>204,017</td>
</tr>
<tr>
<td>70-79</td>
<td>58,216</td>
<td>79,212</td>
<td>137,447</td>
</tr>
<tr>
<td>80+</td>
<td>9,485</td>
<td>17,257</td>
<td>26,748</td>
</tr>
<tr>
<td>Total</td>
<td>159,867</td>
<td>207,861</td>
<td>368,212</td>
</tr>
</tbody>
</table>

Source: RTA

Looking ahead

Licensing rates among middle aged people are higher than in the current generations of older people and are growing, indicating that the proportion of older people with licences who primarily depend on the car for their mobility will probably also grow.

The majority of people reaching retirement in the future will have been licensed car drivers for most, if not all, their adult lives. It has been estimated that within 20 years, 90% of people turning 65 in Melbourne will be licensed drivers.9

Fewer women have licences than men. However, the gender gap in licensing rates among younger drivers is much less than it is among older drivers. It can therefore be expected that the current gender gap among older drivers will continue to shrink.

Restricted drivers’ licences

Some drivers have restricted licences which confine them to driving only in certain circumstances. There is a wide range of different types of restrictions and some people may be issued with more than one restriction on their licence.

The table below shows the numbers of people in NSW over the age of 60 who hold licences with selected restrictions. The selected restrictions are:

- restrictions on distances, eg. may only drive within a 10, 20 or 50km radius of place of residence
• driving times restrictions, eg. may only drive between sunrise and sunset
• speed limit restrictions, eg. must not drive in excess of 60, 70, 90 or 100 kph
• other restrictions, such as on the number of passengers, accompanied driving, or for attending medical treatment only, etc.

Table 2: NSW Licensed drivers with selected restrictions, by age group and gender, as at June 1998

<table>
<thead>
<tr>
<th>Age group</th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>60-69</td>
<td>143</td>
<td>725</td>
<td>868</td>
</tr>
<tr>
<td>70-79</td>
<td>256</td>
<td>875</td>
<td>1131</td>
</tr>
<tr>
<td>80+</td>
<td>2316</td>
<td>3475</td>
<td>5791</td>
</tr>
<tr>
<td>Total</td>
<td>2715</td>
<td>5075</td>
<td>7790</td>
</tr>
</tbody>
</table>

Source: RTA

Ownership of, or access to, a car

At the 1991 Census, 13% of households in Australia had no motor vehicle, of which 55% were lone person households, mostly older people.

In NSW there are 562,824 people aged over 60 who are registered operators of private cars — that is, slightly more than half the number of older people in NSW. However, these figures give a very approximate indication only of actual dependence on the private car. They may underestimate the proportion of older people that have access to a car, as many cars are shared by couples. On the other hand, they may overestimate the proportion of older people that actually use a car, to the extent that older people may have a car registered in their name which is actually used by other younger family members.

As one would expect, car registration statistics show that ownership of a car declines with age. It is also higher among older men than women, again in part because of the tendency for a married couple’s car to be registered in the husband’s name and in part because of the higher licensing rate among men.

Car registration statistics therefore tend to underestimate the proportion of older women who do, in practice, have access to a car. However, this is probably less
the case for women in the upper age brackets, as women tend to outlive their husbands. For older women, the death of a husband can mean the loss of their means of transport as well.

Car ownership among Aboriginal communities in rural and remote areas is less than the average.11

**Figure 2: Percentage of people who are registered operators of private vehicles (including pensioner concession) in each age group, NSW 1999**

![Graph showing percentage of people registered to operate private vehicles by age and gender, NSW 1999.](source)

**Figure 3: Numbers of registered operators of private vehicles (including pensioner concession) aged 70+, NSW, RTA regions, June 1999**

![Bar chart showing the number of registered private vehicle operators by age group and region, NSW, June 1999.](source)
Means of transport

Most older Australians have access to a car or to a car driven by someone else and an estimated 69% of trips by older people take place in private cars – probably more in rural areas. Put another way, approximately 60% of older Australians use private motor vehicles as their main form of transport.\textsuperscript{12}

As Table 3 shows, access to a car declines with age and reliance on other people as drivers increases. In the 75 years and older age group, reliance on cars is still high but more are driven rather than driving themselves. The proportion of Australians over 75 who drive at least once a week is estimated at 36%. Another 40% have access to private car transport driven by someone else.\textsuperscript{13}

<table>
<thead>
<tr>
<th></th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drives a car at least once a week</td>
<td>58</td>
<td>36</td>
</tr>
<tr>
<td>Access to a car driven by someone else</td>
<td>21</td>
<td>40</td>
</tr>
<tr>
<td>Neither</td>
<td>21</td>
<td>24</td>
</tr>
</tbody>
</table>


There is a dearth of data on the travel patterns of older people who live in rural parts of Australia or NSW. However, other studies of older people’s travel patterns may give some pointers.

A survey of people over 65 living in Melbourne in 1993/4 reported that 62% of their non-work trips were by car as a driver or passenger, 10% were by public transport and 26% were on foot.\textsuperscript{14} Dependence on the car diminished somewhat with age but even among people aged over 85, over half, 52%, of their trips were by car.

Again, people in the older age groups were more likely to be passengers than to be driving themselves. Seventeen percent of trips by people aged 65-69 were as passengers, compared to 34% of people aged 85+.

Not surprisingly, how older people travel also depends greatly on the distance involved. The Melbourne study found that for trips under half a kilometre, almost 80% were made on foot and 21% by car. But walking drops dramatically once the distance is more than half a kilometre and as trips increase in length, the car...
becomes the overwhelming mode of transport. For example, for trips longer than 2kms over three-quarters were by car.

Where people live makes a difference to how they travel, even in metropolitan areas. Older people living in central Melbourne make about a third of their trips by car, compared to those living in the middle suburbs and outer fringes who make about two-thirds of their trips by car. Use of public transport drops as distance from the centre increases, suggesting that where people have alternatives to the car available they use them. (It could also mean that non-drivers choose to live in higher density areas with reasonable public transport.)

The major mode of transport of older residents of Canberra and Sydney, average age 68 in a 1994 survey, was as a driver, 58%, as a passenger, 14%, on foot, 14% and by public transport, 13%.15

Older men are more likely to drive than older women. For example, among veterans and war widows, 17% of men never drive compared to 41% of women. Even in the upper age groups, 85 years and above, the gender differences persist although only 45% of men and 13% of women still drive.16

In the US – a country with a fairly similar pattern of urban and rural development to Australia – reliance on the private car is extremely high. Americans over 65 make over 90% of their trips by private car, either as a driver or a passenger.17 The older the American the less likely he or she is to travel by car, but dependence on the car is still very high even among older age groups. Among Americans aged over 85, almost 80% of all trips are by car.

Eighty-two percent of American women over the age of 65 report themselves as active car drivers and the drivers outnumber the non-drivers until about age 80. By 85 years of age, about a third of older American women report themselves as currently driving.18

Income may make a difference. A recent survey of people aged over 75 in the US found that those on lower incomes are less likely to drive than their better-off peers.19

How often drivers and non-drivers go out

Older people's level of mobility is strongly related to whether or not they drive. On average, non-drivers make fewer trips in total than drivers. Non-drivers do not simply travel by a different means of transport.

Even in a metropolitan area as relatively well served by public transport as Melbourne, older non-drivers make fewer trips per day than drivers. Older people with drivers' licences make 40-60% more trips than comparable people without licences.20
Contrary to some perceptions, older people (at least those with licences) make almost as many non-work trips as people below the age of 60. Older people aged 65-74 in Melbourne make only 0.4 fewer non-work trips per day than people aged 18-59. The number of trips per day does not drop appreciably until the age of 85.21

Other studies, often using a different definition of ‘trip’, show substantial drops in trip-making from around ages 75 or 80.

In the American study mentioned above, the difference between the mobility of drivers and non-drivers was more stark.22 Drivers aged over 75 reported a median of 6 trips per week, three times as many as non-drivers who reported a median of only two trips per week. Expressed another way, this means that half the non-drivers were making less than two trips per week.23

Older American male drivers typically made more trips than female drivers. When viewed as a single group (drivers and non-drivers), men made almost twice as many trips per week as women, seven compared to four. Older men and women over 75 living in rural areas reported making fewer trips per week than their urban and small town counterparts.24

The difference in distance travelled by drivers and non-drivers can be considerable. For example, it was reported in 1993 that drivers aged 61-65 in urban America travelled 100 times as far per year as non-drivers of the same age.25

The significance of this difference between the travel patterns of drivers and non-drivers can be debated and it may be that the same health and other factors
that prevent someone from driving may to some extent also reduce their desire
to travel or ability to use community facilities. However, some of the difference
must represent loss of mobility directly related to not having a car.26

A study of older drivers living in the province of Quebec in Canada, of whom
29% lived in rural areas, calculated the average distance per year they travelled.
It found that the distance travelled by older drivers dropped markedly after 78
years of age, that older women drivers travel shorter distances than older men
and that people in better health drive greater distances.27

Seventy percent of older drivers drove their car once a day or more, while 23%
drove three or more times per day. Among those aged 78 or over, 61% of men
and 48% of women drove at least once a day. Rural older drivers were less likely
than urban drivers to drive every day. Forty percent of rural older drivers drove
less than once a day. However, they drove greater distances per year.

Growing mobility and dependence on the car

For most older people, the car brings increased mobility and access and, on
average, older people are making more trips and longer trips than older people a
few decades ago. This reflects the fact that older people today are on average
healthier and more active and have greater access to a car, but it may also
reflect the fact that they can no longer get to important destinations by walking
or by public transport. Clearly, older people living in rural areas are even less
likely to be able to walk to their destinations or to have access to public trans-
port than their peers in the city.

As many commentators have noted, increased mobility and use of cars may
actually be contributing to the centralisation of services and moves to regional
centres.28 Improvements in roads, transport and technological change have
hastened the emergence of regional centres. By travelling to, and shopping in,
regional centres, rural people may paradoxically be driving some of the changes
that they are concerned about.29

So while older people's heavy reliance on the car may provide them with greater
mobility in early old age, it creates substantial problems for them as they age,
become less confident or safe drivers and when they can no longer drive. It
should be noted that the numbers of people facing these problems is increasing
substantially with the current high growth in the numbers of people aged over 75.

Nowhere is the impact of losing access to a car more stark than in rural areas
where dependence on the car has always been high, distances to needed desti-
nations are great and getting to them is unlikely to be possible by other means.
Accessibility to services, social and other destinations is determined by a number of things – the relative location of services with respect to where older people live, the mobility of older people, the need for services of different age groups and the availability of different forms of transport.

Most older people’s decisions about where they live are made at a time when they still drive, or still have easy access to a car driven by a spouse.

While some rural people move from outlying areas to regional centres so that they can be closer to transport and amenities, others choose to move away from well serviced areas to the coast or to quieter areas with poorer transport and amenities.\(^{30}\)

Evidence from the retirement areas of the NSW north and south coasts suggests that decisions to move to one of these areas are typically made when people are in their ‘third age’ or early retirement, without attention to future service and transport needs when they reach their ‘fourth age’. Life in such areas is largely predicated on use of the private car and can be very difficult when people stop driving or lose their access to a car, especially since people who move to the coast on retirement usually do not have family members living close by.\(^{31}\)

**Attitudes towards driving**

“The car is my life line”

*Older woman in country NSW*

In rural Australia, and to a large extent in urban Australia, access to a car as a driver or passenger offers convenience and independence far and above that offered by any other means of transport. Many older people regard the car as critical to their quality of life.

To many older people, the ability to drive is also symbolic of their continuing autonomy and freedom and it is important to their self-esteem. It can be a way to relax, a source of pleasure, and a ‘way to stay young’.\(^{32}\) Acquiring a drivers’ licence was a major rite of passage for most of today’s older Australians, especially older men, and they relinquish their licences only reluctantly.

In a 1994 survey in Canberra and Sydney of older people who classified themselves as ‘mainly pedestrians’, 78% of men said that they still had a drivers’ licence, as did 32% of women.\(^{34}\) The percentages decreased with age. However, even among the men surveyed who were aged 81 and over, around a third of those who classified themselves as ‘mainly pedestrians’ still held a drivers’ licence. One US study reported that 63% of older people who had stopped driving in the previous 5 years still possessed a valid licence.\(^{35}\)
Maintaining a drivers’ licence can also have other practical advantages because of their common use as a form of identification.

The private car also offers greater flexibility and more efficient use of time than any of the alternatives. It has been calculated from older people’s actual travelling times in Melbourne that the time taken to travel by car would at least double if the same trips were made by public transport. For example, a 19 minute trip to a medical appointment taken by car would increase to an average time of 35 minutes by public transport and 139 minutes on foot, the latter obviously out of the question for the vast majority of older people.
Difficulties faced by older drivers

Health problems

The physiological changes that accompany ageing eventually affect everybody’s ability to drive safely. The rate of change varies greatly from person to person, beginning to affect a few people’s driving ability from as low as age 40. More commonly though, effects on driving ability are not noticeable to an individual until they reach 75-80 years.

The age-related factors that may contribute to reduced performance have been extensively documented elsewhere. They include changes in visual acuity, contrast sensitivity, dark adaptation and glare recovery, loss of visual field, attentiveness, reaction and decision-making time, ability to accurately judge speed and distance, and strength and agility.

Diseases more common among older people may also affect driving ability. These include some cardiovascular and cerebrovascular conditions, dementia, diabetes and arthritis. Many prescription and over-the-counter medicines commonly taken by older people can affect driving skills, and drowsiness and dizziness are common side effects of certain prescription medicines. Some combinations of otherwise safe medicines can also be problematic. Similarly, health conditions or problems which separately may not affect driving ability very much, in combination may make driving potentially dangerous.

Of course, none of the conditions mentioned are exclusive to older people, nor do they suddenly arise as people turn a particular age. However, their presence, especially in combination, may indicate an increased risk of having an accident and the need to review whether a person still has the skills to drive without being a danger to themselves or to others.

What older drivers say they find difficult

In a survey of older drivers in Sydney and Canberra, many reported avoiding driving at night. They also found driving at dusk more problematic than younger people. Busy traffic was seen as a problem by older drivers although aggressive traffic and glare from other cars were problems for drivers of all ages. Many older drivers would echo these findings.

It is also not uncommon for older drivers to attribute their driving problems to the aggressive driving behaviour of young people or to changes in road rules and traffic conditions over the years.
In a study of older drivers in rural Victoria, most older drivers felt that they had become more cautious as they had grown older, and some less confident. Many were found not to have a good understanding of blind spots and to not look over their shoulders to check blind spots. As in other studies, many reported avoiding driving at night and almost all avoided long distances at night.42

Up to a third of American drivers over the age of 75 feel uncomfortable with certain design aspects of roads, such as busy streets without traffic lights, multiple lane roads with cars travelling at high speed, intersections without traffic lights and left hand turns (equivalent to right hand turns in Australia).43 One in three reported avoiding certain roads or routes to avoid hazards, such as heavy traffic (mentioned by 34%), an interstate highway (30%), roads in poor condition (12%) and four lane high speed roads (9%). Avoidance of hazards is not always possible though. One in five said that they could not get to a grocery store by driving only on low speed residential streets.

Older people in rural areas in NSW also report that the poor condition of many local roads acts as a disincentive for them to drive. Even if the main roads and the highway are in good condition, the condition of local roads may make them reluctant to drive into the regional centre where many essential services are located.

Older people with disabilities report that parking spots for people with disabilities are frequently taken by other drivers, thus preventing an older person with a disability from being able to park close enough to their destination to be able to get there. A positive development, though, is the recent introduction in some shopping centre car parks of designated parking spots for seniors close to the shopping centre entrance.

Safety and risk

In terms of numbers of crashes, older drivers do not represent a major road safety problem compared to young males. However, older drivers are involved in disproportionately more serious injury and fatal crashes compared to the number of older licence holders. In 1998 for example, people over 70 comprised 13% of driver fatalities, although they comprise only 6% of licence holders. This in part may be because older people tend to be less robust than younger people and so are less likely to survive and recover if they do have a crash.

In rural NSW, the number of fatalities involving people over 60 and the number of crashes that involve older drivers seems to be on the increase. The latter increased from 47 in 1996 to 59 in 1998.44

The likelihood of being fatally injured in a crash becomes greater in later old age – people in their 80s are much more likely to be fatally injured than are people in
their 60s. American statistics show that drivers aged 85+ are six times more likely than drivers aged 65-69 to die in a crash.\textsuperscript{45}

The number of crashes that involve older drivers is much lower than the number of crashes involving, say, young males, but the picture looks different when you take into account the fact that older people tend to drive less than younger people. On a per-kilometre-travelled basis, older people, particularly those aged above their mid-70s, have a greater probability than other age groups of crashing.\textsuperscript{46} The accident rate of drivers aged 85 onwards is higher even than that of 17-20 year old males.\textsuperscript{47}

The likelihood of an older driver being the driver at fault in a car crash also increases substantially between the ages of 65 and 80 (taking into account the number of kilometres travelled).\textsuperscript{48}

On the other hand, American statistics show that older women have lower crash rates than men and, even on a distance driven basis, their crash rates remain among the lowest of any demographic group.\textsuperscript{49}

Road safety has primarily been thought of, by older people and government authorities alike, as a problem of young and inexperienced drivers. However, there is growing concern among Australian road safety and accident authorities about increases in accident rates among older drivers.

The types of crashes that older drivers have can be different from those of younger drivers.\textsuperscript{50} They are more likely to crash in daylight, on dry roads, at below average speeds, at intersections and to be performing complex traffic manoeuvres at the time. They are less likely to be over the legal alcohol limit.

The errors most often made by older drivers involved in a crash are failing to yield to right of way or not responding properly to stop signs and traffic lights. By contrast, the errors made most frequently by younger people tend to be related to speed or to following too close.\textsuperscript{51}

**Age and licensing**

In NSW all drivers, whatever their age, must pass a vision test when renewing their licences. Licence holders of any age can also be directed to have regular medical examinations because of a medical condition.

From 80 years of age, drivers in NSW need to have a compulsory medical check-up each year to retain their licence.\textsuperscript{52} After 85 years of age, in addition to the annual medical checkup, drivers need to pass an annual driving test. People can choose to do a test for an unrestricted licence or to test for a licence that will restrict them to within a specified area from their home.
Currently, the ages at which vision, medical and road tests are required (if at all) vary from state to state. However, a move towards uniform national rules has been proposed.\textsuperscript{53}

Older people’s views about the fairness of age specific rules and regulations vary. Many regard them as fair, in recognition of the fact that abilities important for driving do decline and that not everyone is able to tell accurately when they need to modify or stop driving. Others feel that the rules applying after the age of 80 and 85 discriminate unfairly, as they are based on age. Fifty-eight percent of respondents to the COTA (NSW) survey felt that rules applying after the age of 85 were fair and 35% felt they were unfair.

Responsibility for assessing driving ability

While the vast majority of older people regularly visit a doctor and most have what they consider to be a good relationship with their GP, both can be reluctant to raise the issue of driving ability. In a study of rural older people in Victoria, none had raised the issue of their driving abilities with their doctor and almost all said that neither had their doctor or optometrist. Most older people felt that it was up to their GP to raise the issue of their driving if there was any reason to believe there was a problem. They also believed that their doctors knew that they drove.\textsuperscript{54}

There are national guidelines for health professionals to assist them assess the fitness of any patient to drive. The guidelines recognise that circumstances may vary from case to case and health practitioners frequently have to use their own judgement about who should drive and under what circumstances.\textsuperscript{55}

Health professionals are expected to report to the Roads and Traffic Authority Driver Licensing Branch any patient (of any age) whom they consider medically unfit to drive. They are encouraged to recommend restrictions or conditions on licences where practicable, rather than complete cancellation.

It has been reported that GPs tend to be reluctant to assume the responsibility for reporting people as unfit to drive. They are concerned it may result in older patients not reporting important symptoms to their doctor out of fear that doing so may mean they lose their licence.

Uniform national legislation has been proposed that would also require drivers to advise the local driver licensing authority (in NSW, the RTA) of any long term or permanent condition that affects their driving ability.
Limiting one’s own driving

Many older people regulate their own driving and modify how or when they drive, as they notice their abilities changing or if they develop health conditions that affect driving. They may limit or avoid their night time and peak hour driving, limit themselves to roads they know well, avoid busy intersections and drive more slowly.\textsuperscript{56}

About a third of respondents to a recent survey by Council on the Ageing (NSW) thought that their driving had deteriorated with age, recognising that abilities such as reaction times inevitably decline. Over half of all respondents had used strategies to compensate for changes they felt to be associated with ageing.\textsuperscript{57}

Older drivers commonly say that they would notice if their driving ability declined to the point they were unsafe and would stop if that happened or if their family advised them to do so. They would also heed the advice of a health professional if told they were no longer able to drive. On the other hand, some others say that, if told they were unsafe, they would limit and modify their driving and be particularly careful, but the strongest temptation would be to hold on to their licence.\textsuperscript{58}

There is debate as to the extent to which those who need to modify their driving, or to stop altogether, actually do so of their own accord or do so adequately. Drivers of all ages tend to underestimate risk and overestimate their ability to handle a vehicle to avoid accidents and older drivers are often unaware of the difficulties they face.\textsuperscript{59} There is also concern that people with dementia, for example, may lack sufficient insight into their own changing abilities to be able to reliably and appropriately regulate their own driving and to know when to stop.

Nonetheless, the majority of older drivers give up driving voluntarily, if not willingly, rather than have their licence revoked or not renewed by a licensing authority.

Education and information

Older people are more likely to regulate or modify their driving behaviour if they are made aware of the specific problems associated with ageing, provided this is done in a sensitive way.\textsuperscript{60} Many are willing to acknowledge that there is room for improvement in their driving and are eager to receive road safety information and advice, so long as it is provided in an appropriate, non-discriminatory manner.\textsuperscript{61}

However, there are currently no arrangements for ensuring that older people have access to support and advice about monitoring, regulating and, if necessary, stopping driving. While a number of programs exist that aim to do this, the proportion of older drivers that actually take part in them is still low.
One such program is the Steer Clear program run by the Cumberland College of Health Sciences and offered through some local councils – generally those that have road safety officers. The program, unlike many others, includes an on-road driving session at the beginning and at the end of the program, as well as an educational component which includes information about age related changes, up to date road rules, changes people can make to improve their safety etc. The program is free of charge to participants. The practical on-road component of this program has proved to be critical in convincing participants that they do indeed need to modify their driving habits in order to be safe, or perhaps even consider stopping driving.63

Some local council road safety officers offer safety awareness educational programs tailored to the local environment. Some programs may involve occupational therapists who have undertaken training in driving.

Another program is the NRMA Years Ahead – Road Safety for Seniors program offered to groups of older people in NSW. The program is an hour long discussion based presentation conducted free of charge by older people trained by the NRMA as presenters. It covers ways of reducing the risk of being involved in a crash, fitness to drive, self-assessment, safe driving practices and transport options other than driving. In its first 9 months of operation 5000 older people have been exposed to the program, and it is now being offered in Wollongong and Newcastle as well as Sydney.64

The Roads and Traffic Authority produces various free educational leaflets for older drivers, their families and friends. They include the Older Drivers’ Handbook which includes suggestions on how to limit difficulties and a self-assessment questionnaire to help drivers assess their own driving performance.65 Other good examples of guides for older people are the Western Australian Older Road Users Handbook66 and the ACT Older Drivers’ Handbook.67

Interestingly, in the US most states have legislation that requires discounts on insurance premiums or reductions in points lost for infractions, for older people that take an approved driver retraining course.62

The COTA (NSW) survey found a very high level of interest among older people in taking a driver refresher or training course, to upgrade or check their skills. However, most were only interested if it were free of charge or reasonably priced.68 Apart from the Steer Clear program mentioned above, driver refresher courses are generally only available through private driving instructors, for a fee.

There are also a number of centres in the Sydney area, usually attached to hospitals, through which a person who has developed a medical condition that affects their driving ability, for example, a stroke, can have their driving assessed on a one-to-one basis and be assisted to take up driving again, if appropriate. Some charge, others are government funded and do not.
The driving environment

Neither roads, traffics signs, signals or vehicles were designed to suit the needs and abilities of older drivers. Present standards for traffic signs and assumptions about performance used in the design of intersections and traffic operations do not typically take into account the capabilities of older drivers. For example, signs may be too small, contain too much information and be confusing. Even the spacing of letters may create a reading problem for a person with a mild vision impairment.69

Aspects of the driving environment that older people find difficult are potentially amenable to change, albeit some of them would need to occur over a long time frame. For example, evidence about the types of errors made by older people suggest that altering traffic lights to allow protected right hand turns at intersections would eliminate a lot of older driver accidents.

Similarly, vehicle designers have yet to incorporate into the design of vehicles, an understanding of ageing effects and interactions with systems such as controls and displays, head lighting, mirrors and seating. Modern dashboards and instrument panels may have a confusing amount of information and could be better designed to suit older people's needs. Similarly, older road users could benefit from improved safety belts, side interior padding, improved head restraints, more slowly inflating air bags and other alterations to better protect them in the event of an accident.70

It should be noted that many, if not all, of the changes identified as assisting older drivers would benefit drivers of all ages. There is also growing evidence that measures to adapt the road environment and improve vehicle design have a greater success rate than those aimed at changing behaviour.71

The cost of maintaining a car

The cost of maintaining a car is a major consideration for older people living on low incomes, even with free car registration for pensioners. While a person may be able to maintain a newish car for some years, difficulties may arise as the car ages, repairs and maintenance become expensive and when the car eventually needs to be replaced.

The cost of running a car in rural areas is generally higher still because of higher petrol costs, the longer distances involved and greater wear on the car from country roads.
The impact of stopping driving

Given the high dependence on the car for getting around, going about normal activities and social integration in the community, it is not surprising that many older people consider stopping driving as a frightening prospect that would seriously threaten their independence and precipitate a drastic change in lifestyle.72

Typical comments from rural older drivers include “I would rather be dead”, “my life would be very dull if I could not drive – I would become brain dead” and “I would be housebound.”73

As reported earlier, older drivers use their cars frequently, the great majority driving at least once a day. Driving enables older people to go shopping, to visit friends and family, to undertake errands and other commitments, to go to clubs and other social destinations and to go to health appointments. Many drive not only for their own transport, but are relied upon to transport family and friends as well.

Stopping driving, therefore, has major emotional and practical consequences. Not driving threatens older people’s ability to carry out these activities and threatens their social networks. It may make many normal activities very difficult or impossible and may restrict older people to staying home more than previously and more than they want to. Visits from older friends and family members may also reduce as they too lose their access to private car transport.

When an older driver does stop driving, there is strong chance that several older people’s means of transport will be thrown into disarray, not just those of the older driver — in the case of an older man, typically, the means of transport of his wife and his older neighbours as well.

The nature of the relationship between an older woman and her family may also change subtly if she becomes a widow and, as a result, loses her access to transport. It becomes less easy for her to initiate visits to her family, as she is
now reliant on being collected or visited by them. Friendship networks may also be disrupted by loss of ready access to a car. While she may feel comfortable relying on friends and neighbours for shopping and medical appointments, she may be reluctant to accept transport to social and recreational activities as she can no longer return the favour.\textsuperscript{74}

Older couples who move to the NSW north and south coast on retirement tend to be out of reach of family members for support with transport. So where the driver in a couple dies leaving a non-driving spouse, this has serious consequences for her, or his, social networks.

The impact of stopping driving is not widely appreciated by the community and there is often little sympathy among the community as a whole, health professionals and bodies responsible for road safety, for the plight of older people who lose their ability to drive. Older people see this insensitivity as a manifestation of the pervasive ageism in our society.

Older people who drive slowly are, indeed, the butt of jokes (eg the stereotypical lady bowlers). Driving slowly is sometimes regarded as a treasonable offence and older people who do so should just “get off the road”.

**Isolation and depression**

Older people’s ability to be mobile is strongly correlated with their ability to lead satisfying independent lives. As discussed earlier, former drivers tend to be less mobile than drivers and their social networks suffer, even when they live in areas that are served by public transport.

Older people in rural Victoria who had given up driving were described by their peers as having lost some of their interest in life.\textsuperscript{75}

Older people who live alone spend a high proportion of their time on their own and may be at risk of social isolation and loneliness. Not being able to drive, or not having easy access to a car driven by someone else, must contribute to this. Just under a third of older people live alone, spending an average of 79% of their waking hours alone.\textsuperscript{76}

It has also been found that stopping driving is associated with an increase in depressive symptoms (even when accounting for socio-economic and health factors which may also affect a decision to stop driving). Depression is in turn associated with disability and mortality.\textsuperscript{77}

Older people themselves are acutely conscious of the crucial importance of staying mobile. Poor, or no, access to transport has been raised consistently by older people over the years as having a critical and negative impact on their quality of life.
Unmet need

Figure 5: Older persons in NSW needing assistance with transport by age group, 1998, 000s

According to the ABS Disability, Ageing and Carers Survey 1998, 162,600 older people in NSW identified a need for assistance with transport. Of these, 17% or 27,900 people said that they did not receive any or enough assistance with transport.78

Given that 42% of older people in NSW live outside the Sydney metropolitan area, it can be assumed that at least 11,700 older people living in regional and rural NSW have an unmet need for assistance with transport.

The interpretation of these figures is a matter for debate. Judging by the level of demand for community transport that cannot be met, many consider that the ABS Disability, Ageing and Carers Survey underestimates considerably older people’s need for assistance with transport. The problem may, in part, be due to older people’s self-assessment of need for help with transport. For example, does a person who has to use taxis to get around, but who strictly rations his or her use of them for cost reasons, identify him or herself as needing assistance with transport?

A survey of a random sample of people aged 75 and over living in the community in the inner west of Sydney suggests that, even in the city, the proportion of people with an unmet need for transport assistance may be higher than suggested by the ABS survey. It found that there was a sizeable group of people, 15%, who were ‘transport deprived’ in that they found access to both
public and private transport difficult or impossible and received no assistance from family or friends. In general they tended not to be severely disabled perhaps because, if so, their need for transport assistance would be more obvious or they would have given up living in the community altogether. The survey did not investigate the extent to which this need is being met by formal services, but concluded that it is likely that there is considerable unmet need in the community for transport services for older people.\textsuperscript{79}

The extent to which it is possible from this survey to draw any conclusions about unmet need in rural areas is uncertain. However, if the 15% finding holds for rural areas, it would mean that there are 21,300 transport deprived people over 75 years of age in rural areas.

Another indication of the possible level of unmet need may be the finding referred to earlier that 24% of people aged 75 years and over do not have access to a car as either a driver or a passenger (see Table 3 on page 18). If this holds true for older people living in rural areas without access to public transport services either, then the level of unmet need may indeed be considerably higher than suggested by the ABS survey.
The alternatives

Older people’s decisions to stop driving are largely influenced by the availability of alternatives. The transport alternatives for non-drivers are, in theory at least:

- family and friends
- public transport
- community transport and health related transport
- taxis.

Of course, for a particular individual various factors that will be discussed below may mean that these alternatives are not available to them in practice.

Another option is to move home to another area where distances to services are shorter, public transport is better or relatives are closer. Moving house is not a popular option with older people and many are very reluctant to do so. Surveys have found that only 5% of people aged 65 years and above intend to move and only 10% of veterans and war widows would consider moving from their present home. However, to be closer to services, relatives or friends are common driving forces behind the decisions of those that do decide to move. Two-fifths of movers aged over 75 move to be close to family.

A decision to move is often a difficult one and there are many practical, financial and emotional barriers to moving. For example, the way the income and assets test operates is a deterrent for some people. Any funds left over from the sale of a home may reduce the age pension that a person is entitled to. The same funds, when tied up in the equity of their home, are not subject to the pension assets test.

A particular constraint for rural older people is the low value of houses in many rural areas which may prevent them from being able to sell up and move to better serviced areas. Also older retiring farmers often want to hand the family property intact onto the next generation and so may be very restricted in their accommodation options.

To a limited extent, it may be possible for older people and the services they rely on to make greater use of new communication and information technologies and thus reduce the need for older people to physically travel. However, while there may be good reasons to encourage the development and use of such technologies, for a host of reasons they are unlikely to be able to make much of a dent in older people’s transport needs in the foreseeable future. They also cannot replace personal contact and social interaction with other people.
Some Home and Community Care services provided in a person’s home, such as Meals on Wheels, may to an extent also be able to compensate for an older person’s transport restrictions. However, if the person’s nutrition difficulties are only a matter of lack of accessible transport, simply offering them Meals on Wheels may be restricting their choices and independence unnecessarily and be a poor use of Home and Community Care funds.

**Family and friends**

Older non-drivers depend heavily on their family members and friends for transport.

Twenty-six percent of older people receiving assistance with transport in NSW receive it from their spouse and 72% from other relatives or friends.82

**Table 3: Sources of transport assistance provided to older people, NSW, 1998**

<table>
<thead>
<tr>
<th>Source of assistance</th>
<th>No. of people (000s)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spouse</td>
<td>38.5</td>
<td>26.2</td>
</tr>
<tr>
<td>Other relative or friend</td>
<td>106.3</td>
<td>72.3</td>
</tr>
<tr>
<td>Formal providers (government, NGO or private)</td>
<td>20.6</td>
<td>14.0</td>
</tr>
<tr>
<td>Total receiving assistance</td>
<td>147.0</td>
<td></td>
</tr>
</tbody>
</table>

Source: ABS Disability, Ageing and Carers NSW 1998

Similarly, in the Canberra/Sydney study, family, friends and spouses were reported as being the most common chauffeurs and approximately one in five of people aged 75 and over living in the inner west of Sydney reported receiving transport assistance from relatives and friends.83 Americans over 75 who do not drive also depend heavily on family and friends, relying on them for rides for 67% of their trips.84

While the importance of family and friends as a provider of transport to older people is likely to continue, this option is declining in rural areas because of the migration of younger people away from rural areas, particularly inland rural areas. In addition, as mentioned earlier, older people who move to the NSW north and
south coast on retirement tend to be out of reach of family members for support with transport when the time comes that they can no longer drive.

Many of the family and friends who act as drivers for older people are older people themselves and, while happy to drive short distances, may be reluctant to drive the long distances that may be needed for specialist medical appointments.

Public transport

In rural and regional NSW there are scheduled public passenger services in most towns and centres with a population size of more than 7500. In towns and centres of this size, the Department of Transport enters into commercial contracts with providers who are granted exclusive rights to operate regular passenger services in that area to at least a minimum service level. However, there is no specific requirement on providers to ensure that they provide services suitable to the needs of older people.

Towns and centres with populations of less than 7500 do not generally have a scheduled public transport service, although some may do so, and many have a school bus service on which other people can travel (but only during school terms).

Seniors Card holders and age and veterans pensioners, who between them comprise virtually all of the older population, are entitled to travel on a half fare transport concession on privately-run public transport services. Operators receive a subsidy for the difference between the concession and full fare. Through the School Student Transport Scheme, the Department of Transport also provides funding to operators to transport children to and from school free of charge. There is concern, however, that the projected decline in the numbers of school age children in many rural areas will mean a reduction in an important subsidy to transport in those areas and a decline in rural bus services.
Limited areas of the state are served by Countrylink rail services. Concession fares (Countrylink Excursion Tickets) are available to pensioners for journeys of a maximum of 129 kms outside the CityRail network areas. Half-fare concessions do not generally apply on long distance bus services.

The existence of a public transport service does not however necessarily mean that it will successfully meet the needs of the older population of an area. While initiatives such as the Ageing and Disability Department’s Transport Demonstration Projects\textsuperscript{85} have stimulated improvements in mainstream commercial transport services to make them more responsive to older people’s needs, public transport services (usually buses) generally only partially meet the needs of the non-driving older population.

Quite aside from the question as to whether public transport is available locally, accessibility problems or health conditions may mean that older people are not actually able to use the services that do exist. One survey found that a third of people over 75 years of age had difficulty in using public transport. (Most could not use private car transport either as they had no car in the household.)\textsuperscript{86} Table 4 shows the reasons older people who have public transport in their area give for not using it.

\begin{table}[h]
\centering
\begin{tabular}{|l|c|}
\hline
Problems with & Percentage of age group \\
\hline
Getting to stops & 20.9 \\
Sight problems & 7.2 \\
Steps to get into vehicles/carriages & 35.4 \\
Doors & 8.9 \\
Other problems getting on or off & 2.4 \\
Crowds/poor ventilation & 3.0 \\
Lack of seating and standing & 14.3 \\
Other & 8.0 \\
\hline
\end{tabular}
\caption{Reasons for non-use of public transport, for people with public transport in their area, aged 75 years plus, Australia, 1993\textsuperscript{87}}
\end{table}

Source: ABS Ageing, Disability and Carers 1993
Another common concern about public transport expressed by rural older people in consultations with the NSW Committee on Ageing and the Ageing and Disability Department, is that the timetabling of public transport services often does not suit older people’s needs being primarily geared towards the needs of commuters and school runs. For example, an older person may be able to travel by public transport to a centre at 8am but then may have to wait until 4pm for the return journey, effectively ruling it out for, say, a 75 year woman with limited stamina and mobility.

Visits to regional centres for appointments often cannot be done by public transport without an overnight stay and the rail network is primarily focused on travel to and from Sydney. As mentioned earlier, the time involved in using public transport is usually considerably more than for the same trip by car. The sheer time involved in using public transport may rule it out altogether as a viable alternative for older people in poorer health, with disabilities or simply with limited stamina.

The peculiarities of the system of concessions means that the cost of travel by public transport can be an issue for older people on very low incomes. It is more expensive for older people to travel on privately-owned bus services than on government-owned bus services – which exist only in parts of Sydney, Newcastle and Wollongong.

Other deterrents to using public transport include poor access to information — for example timetables that are not easily available and/or which are difficult to read or understand, poor signage and the attitudes of some drivers. Older women, in particular, complain about some drivers’ insensitivity to their needs — for example not waiting for them to sit, impatience with their questions and not stopping close enough to the kerb.

In summary, the characteristics of a public transport service that influence its use by older people include:

- proximity of the service to home or point of origin
- proximity to preferred destinations
- operation times
- affordability
- kerbside infrastructure (eg location and design of bus stops, distance between kerb and bus doors)
- vehicle design
- information (eg clear timetables)
• safety (eg on the bus and at bus stops)
• comfort
• frequency of the service
• flexibility (eg offering flexible pick up arrangements, or off peak cross regional services).88

Community and health related transport

A wide range of different forms of ‘community transport’ exist in NSW providing transport assistance to isolated and disadvantaged older people, frail older people, people with disabilities and their carers.89

Community transport is mostly run through not-for-profit community organisations, churches and local councils. Community transport may take many forms including:

• group transport by minibus, driven by volunteers or paid drivers

• individual transport, using volunteer or paid drivers driving their own cars or scheme cars.

Some schemes also focus on improving coordination and use of existing vehicles and services and working with commercial providers so that their services better meet the needs of the transport disadvantaged.

Common reasons for trips include to and from health appointments or other health related purposes, social outings, shopping, visiting family and friends, religious purposes, to a cemetery or to a centre where another support service is being provided.

There are some 130 community transport projects in NSW receiving funding from one or more government programs; the HACC Program Community Transport Sub-Program, the NSW Community Transport Program (CTP), Area Assistance Schemes and the Health Related Transport Scheme. The HACC Program supports around 85% of funded community transport.

HACC-funded Neighbour Aid services may provide transport for frail older people – primarily in the form of volunteer drivers taking frail older people in their own cars to health related appointments, but also for social and recreational purposes. Respite, day centre and other centre based services may provide transport to enable clients to get to the centres. Some licensed clubs offer transport to enable older people to attend their activities.
In addition, some government funded services can purchase commercial services (eg taxis) to transport an older person. Funding through the Commonwealth’s Community Aged Care Packages or the Department of Veterans’ Affairs, for example, can be used this way.

Community transport funded through HACC is only available to frail older people and people with disabilities at risk of institutionalisation. It cannot be used, therefore, by fit and well older people whose problem is that they live in an area without public transport and do not drive. The Department of Transport-funded Community Transport Program is specifically aimed at redressing transport disadvantage incurred through lack of public transport services. However, it is a very small scale program receiving only around $2M per annum.

The myriad of different funding programs and organisations involved, and the lack of coordination and consultation in planning, means that there are restrictive eligibility criteria, inefficiencies in the ways existing resources (eg vehicles) are used and gaps in services.

Community transport cannot meet the demand from older people and it is limited in what it can offer those living in rural and remote areas. The centralisation of health services in regional centres means that community transport services are under increasing pressure to provide health related transport between rural towns and regional centres.

Driving Miss Daisy in Country NSW
Community transport depends heavily on volunteer drivers using their own cars to provide individual transport but does not reimburse them for the full costs of doing so. Community transport schemes report that, as a result, some potential volunteers cannot afford to volunteer and the schemes face a shortage of volunteers. Another difficulty in rural areas is expecting volunteer drivers, who are often retired people themselves, to drive the very long distances that may be needed to get a frail older person to and from a health appointment. There is also concern that the exodus of younger and middle-aged people from some rural areas will cause critical shortages of volunteer drivers.

Schemes report that when an older person stops driving this often precipitates requests for community transport assistance from not just one, but several, older people.

Another scheme, the Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS), can provide financial assistance to people (of any age) in rural and remote areas to attend specialist medical treatment. Concern has been expressed, however, about the inflexibility of the eligibility criteria and the fact that patient need far exceeds the funds available.

The Sinclair Report recently made a number of recommendations in acknowledgment of the difficulties rural people have accessing health services. In response, the NSW Health Minister has said that the Government will improve rural health transport by providing a central point of coordination. It will also increase funding to the IPTAAS scheme and will ease its eligibility criteria.

Taxis

For older people who do not drive, taxis may be an option for some, if not all, of their transport needs. There are around 900 taxis operating in rural and regional NSW but they do not service all parts of the state. Remote centres and areas typically do not have a local taxi service.

Taxis offer some of the flexibility and convenience of a private car. However, the cost of using taxis, other than occasionally, can be a major deterrent for older people on low incomes. In reality the cost of taking taxis compares favourably with the cost of running and maintaining a car, but it is common for people to underestimate the true cost of running a car.

The Taxi Transport Subsidy Scheme provides half-fare taxi travel but eligibility is restricted to people with certain severe and permanent disabilities, and again obviously only in areas which have a taxi service. Older people living near the NSW/Victorian border report that the eligibility criteria for the equivalent Victorian scheme are much less strict.
Options for extending the safe mobility of older people in rural areas

The private car is likely to remain the predominant form of transport for most older people who live in rural areas of NSW. However, this heavy reliance on the private car means increasing difficulties for those older people who do not drive and/or have access to a car.

To compound the problem, older people who do not drive, and who therefore have the greatest difficulty in reaching health services, tend to have greater dependency on, and need for, those services. However, the health conditions and other problems that tend to afflict older people, and which may result in them giving up driving, do not mean that they stop wanting and needing to get out and about.

At the same time, demographic and economic changes occurring in rural areas mean that older people’s access to support with transport from family members is declining.

The trend towards centralisation of services in regional centres assumes that people will be able to travel to those centres or access the services by other means. For most rural dwellers this may be true, if not always convenient. For older non-drivers, it creates enormous difficulties.

There is, therefore, a significant challenge to ensure the safe mobility of the rural older population of NSW, including those who do not drive or have access to a private car. A multi-pronged strategy will be required, tailored to the geography of local areas and to the needs of the local population.

The imperatives for doing so are many, not least the benefits to be gained from enabling rural older people to remain active participating members of the community, able to go about their business and to maintain their social networks. The benefits in terms of improved health and well-being and reduced use of expensive health services means that money spent on enabling older people to keep mobile is money very well spent.
Proposal to trial a new car sharing scheme

In Australia and overseas there are a wide range of social car schemes, car pooling and car sharing schemes. They are usually intended to have one or more of the following purposes. To:

- encourage more efficient use of existing cars
- reduce pollution and traffic congestion
- assist people without access to a car to get to work, get to services or to improve their quality of life.

As mentioned earlier, in Australia a common form of community transport involves volunteer drivers using their own cars recruited by a community transport scheme to take older people to and from preferred destinations.

In rural areas the temptation for older people to keep driving beyond the point at which it is safe to do so, or beyond the point at which people feel confident doing so, may be considerable because there are so few alternatives. It is not uncommon for older people gradually to reduce the amount of driving they do, to the point where they drive only rarely. They keep their car at least until it needs major repairs or replacement. Another scenario is for a widow to be left with a car in the garage that she does not drive when her husband dies.

The Committee on Ageing believes there is scope for exploration and trialing of a new form of car sharing that would take advantage of the under-used cars owned by older people who can no longer drive or who are close to stopping driving, matching them with volunteer drivers that do not own a car (or who would prefer not to use their own car). This type of scheme may be particularly valuable in rural areas of the state that are unlikely ever to be able to sustain a comprehensive public transport service and in which other forms of community transport are also likely to remain limited.

By negotiation between the older person and driver (perhaps mediated by the scheme coordinators) the driver would drive the older person to their preferred destinations at agreed times. In return the driver could have access to use of the car for their own purposes for the same amount of time or kilometres driven.

Ground rules would need to be developed for such a scheme covering, for example, the expectations and responsibilities of both parties, the use of the car by the volunteer driver, petrol and other running costs, insurance issues and where the car is garaged when not in use.

Comprehensive insurance policies require that any regular volunteer drivers would need to be indicated on the owner’s policy, but there would be no extra
cost involved, so long as the volunteer drivers were experienced drivers and over the age of 25. Such a scheme should not affect the car owner’s entitlement to registration at the pensioner concession rate.

While such a scheme would clearly not appeal to all older people, there is some evidence of interest in such a scheme from older people. Of course, many people provide similar assistance to older family members and older friends on a purely informal basis. However, the Committee on Ageing believes there is scope to extend such informal car sharing arrangements on a more organised basis.

The outcomes of such a scheme would be consistent with the Government’s priorities identified in the NSW Healthy Ageing Framework and its objective of providing ‘accessible and supportive living environments which make it possible for older people to live as independently as possible’. Outcomes could include prolonged independence and community involvement for older people who can no longer drive, greater community involvement by the drivers, and reduced incidence of major injury to older drivers (and other road users).

The Committee on Ageing recommends that:

1) the Government fund the development and piloting, in rural NSW, of a new car sharing scheme that would match older car owners needing drivers with younger volunteer drivers.

**Improving public and community transport**

While this report has focussed on older people and private car transport, the Committee on Ageing believes that keeping older people mobile, and therefore independent, needs to be tackled on many fronts. Improving the alternative forms of transport such as public and community transport will help reduce the number of unsafe older drivers on the road, as older people’s decisions to stop driving are heavily influenced by the availability of alternatives.

The Transport Demonstration Projects and Transport Development Workers in the Northern Rivers and Western Sydney have demonstrated that there is considerable scope to support and work with existing private and public service operators to improve transport services and make them more responsive to the needs of the older population.

There is also a range of other improvements to public transport that could be made, some quite minor and inexpensive, that would make it a much more viable and useful option for older people in rural areas.

The Committee on Ageing recommends that:
2) additional transport planning and/or development worker positions be established in regional NSW with the lead agency being the Department of Transport and joint funding from agencies involved in transport, planning and rural development;

3) the Draft Accessible Transport Standards should be required under the Passenger Transport Act through the Performance Assessment Regime, and implemented by private bus service operators in regional NSW without delay;

4) private bus service operators in rural areas ensure that information about their services (such as timetables and details of fares and concessions) is easily available to the older public through multiple outlets and channels and meets best practice standards of information presentation as described in the Ageing and Disability Department’s ‘Practical Guide to Public Transport Information’;

5) private bus service operators improve the marketing of their services to better attract and meet the needs of the seniors market;

6) private bus service operators further examine other ways of making their services more ‘older person friendly’;

7) the Pensioner Excursion Ticket concession be extended to private buses and Countrylink trains in rural areas;

8) rural bus services are maintained in the light of the predicted drop in school bus subsidies, and hence longer term decline in available cross-subsidy to operators, as the school age population declines in rural areas;

9) the kilometre limit on Countrylink Excursion Tickets should be extended to enable users to reach regional hubs, with the Ticket also to be useable on local private bus services in the region of the destination;

10) taxi operators be encouraged to offer discounted fares to older people and to improve the responsiveness of their services to the needs of the seniors’ market;

11) local councils and state roads authorities implement standards relating to the placement and design of kerbs, guttering and seating at bus stops so that getting on and off buses is made easier for older people as per the recommendations of Austroads ‘Accessible Transport on Low Traffic Bus Routes (AP 138)’ report;

12) the recommendations of the Sinclair and Menadue Reports about health related transport are implemented;
13) public and private health services and providers give greater attention to considering how older people will access their services and on training key staff (such as hospital admittance and discharge staff and doctors’ receptionists) to be sensitive to older people’s needs in this respect;

14) the Departments responsible for community transport and the service providers ensure that:
   • the reimbursement of volunteer drivers’ car running costs is at the Australian Taxation Office rate, and on a par with the payment made to paid drivers using their own vehicles
   • arrangements are in place so that volunteer drivers are adequately covered by insurance
   • volunteer drivers are not placed unreasonably in situations of being expected to deal with medical emergencies while driving older people to or from health appointments;

15) community transport in rural areas be adequately funded to enable it to meet the needs of older people in rural areas;

16) licensed clubs be encouraged to become more pro-active in arranging and offering transport to club-based activities for older people living in outlying areas, as part of their contribution to the local community.

Promoting safe driving by older people

The number of drivers over the age of 65 is predicted to increase sixfold over the next 15 years. Yet, as mentioned earlier, the design of roads and intersections, signage and other aspects of the traffic environment has generally not taken into account the needs of older drivers. The same is also true of vehicle design. The changes suggested would benefit all drivers.

The Committee on Ageing recommends that:

17) in the light of the projected major increase in the numbers of older drivers, the Government examine ways to improve the design of roads and intersections, signage and other aspects of the traffic environment so that they are more sensitive to the needs of older people and can assist older people to remain safe drivers;

18) the Government and insurers investigate ways to ensure that older drivers in rural areas have access to driving safety awareness programs and to free or low-cost driver education and refresher courses (especially those with a practical driving component);
19) local councils in rural areas be encouraged to employ road safety officers with a brief to enable local older people to gain awareness of road safety risks and safe driving practices;

20) the NRMA be encouraged to continue the expansion of its Years Ahead – Road Safety for Seniors Program into regional and rural parts of NSW.

21) in order to make driving easier for rural older people, the Government examine ways of upgrading the condition of local roads in rural areas, drawing on NSW Government and Commonwealth Government funding.

Decisions about retirement housing

Accessibility to services, social and other destinations, is determined not only by the availability of transport but also by the location of these destinations relative to where older people live. Clearly, state and local government planning and development policies and decisions can influence this, as do older people’s own decisions about their housing options and choices in retirement.

The Committee on Ageing recommends that:

22) the need for older people to be in close proximity to facilities and services remains a key consideration under the State Environmental Planning Policy No.5, currently under review;

23) the issues raised in this report be considered by the Department of Urban Affairs and Planning in any current or future reviews of State Environmental Planning Policy No.5 and related planning instruments;

24) NSW Government and local government re-examine the incentives and disincentives that influence older people’s decisions about housing choices in retirement, with a view to:

• facilitating rural older people who wish to move to areas with better access to services and transport, to do so

• encouraging older people to consider the location of services and availability of transport when making decisions about their housing options in retirement.
Endnotes

1 NSW Committee on Ageing, Caring for the Country : A spotlight on the needs of older people who live in rural and remote NSW, January 2000.
3 Hunter includes Newcastle and Southern includes Wollongong.
5 NSW Ministerial Advisory Committee on Health Services in Smaller Towns, 2000.
6 American Association of Retired Persons, Older Drivers, AARP research, AARP Public Policy Unit, Washington, 1999.
10 Roads and Traffic Authority, June 1999 data.
13 Australian Housing and Urban Research Institute, Statistical Analysis of Older People and their Housing Circumstances, Commonwealth Department of Transport and Regional Development, 1996.
Note that in this survey ‘trips’ included all trips outside their homes made by any means of transport or on foot, including very short trips to visit a next door neighbour, for example. The various studies quoted in this report are not directly comparable as each uses a different definition of ‘trip’.
15 B.N. Fildes, S.J. Lee, D. Kenny and W. Foddy, Survey of older road users: behavioural and travel issues, NRMA ACT Road Safety Trust and Monash University Accident Research Centre, 1994
16 Department of Veterans Affairs, Australian Veterans and War Widows: Their Lives Their Needs 1998.
20 Rosenbloom and Morris, 1998.
23 Presumably a different definition of ‘trip’ than the one used in the Melbourne study.
Driving Miss Daisy in Country NSW
58 Harris, 1998.
60 Brown, 2000.
61 COTA (NSW), 2000 and Harris, 1998.
63 Personal communication, Steer Clear Driver Rehabilitation Program, Cumberland College of Health Sciences.
64 Brown, 2000.
65 Other RTA educational leaflets are Older drivers: Advice to family and friends, Medical and driving tests and Driving and dementia.
67 Council on the Ageing (ACT), ACT Older Drivers’ Handbook, COTA (ACT) and ACT Department of Urban Services, 1995.
68 COTA (NSW), 2000.
70 Fildes, 1997.
71 Fildes, 1997.
73 Harris, 1998.
75 Harris, 1998.
78 Includes older people living in residential care as well as in their own homes.
Australian Housing and Urban Research Institute (AHURI), Statistical Analysis of Older People and their Housing Circumstances, Commonwealth Department of Transport and Regional Development, 1996.
81 AHURI, 1996.
82 ABS, 1999
84 Straight, 1997.
85 Ageing and Disability Department, Transport Innovations No 3: Transport Demonstration Projects for Older People and People with Disabilities, January 2000.
87 AHURI, 1996.
90 NSW Ministerial Advisory Committee on Health Services in Smaller Towns, 2000.
Previous publications from the NSW Committee on Ageing

Caring for the country: a spotlight on the needs of older people who live in rural and remote NSW
Sarah Fogg

Taking Charge: Making Decisions for Later Life
Benevolent Society and Centre for Research and Education on Ageing

A Two Way Street: Older People and Volunteering
Sarah Fogg

Building Community Trust
Margaret Tucker

Over the Hill or Flying High: An Analysis of Age Discrimination Complaints in NSW
Sol Encel and Helen Studencki

Who Pays: The impact of user pays and economic policy on older people
Elizabeth Savage, Michael Fine and Jennifer Chambers

Older People and Crime: Incidence, fear and prevention
Robyn Gilbert and George Zdenkowski

Never Too Late to Learn: A report on older people and lifelong learning
Ingrid Fitzgerald

Gendered Ageism: Job Search Experiences of Older Women
Sol Encel and Helen Studencki

When Families Break Down: Rights of Grandparents and Grandchildren
NSW COA and Council on the Ageing (NSW)

Retirement: a Survey
Sol Encel and Helen Studencki

Local Government Services for Older People
John Toon and Diana Loges

Keeping in Touch: Older People Living Alone
Sol Encel, Margaret Kay and George Zdenkowski

Volunteering and Older People
Sol Encel and Penny Nelson

Job Search Experiences of Older People
Sol Encel and Helen Studencki