
EXPLORING HOW OLDER PEOPLE CONTEMPLATE AND EXPERIENCE GIVING-UP DRIVING

Background

The importance of mobility has been highlighted for all segments of life and society and has been linked to satisfaction and quality of life (Schlag, Schwenkhagen and Trankle, 1996). Hence, it is no surprise that reduced mobility and independence, particularly through giving-up of the car, has been shown to be strongly correlated with an increase in depression and loneliness (Fonda, Wallace & Herzog, 2001; Ling and Mannion, 1995).

Previous research by Musselwhite and Haddad, (2007, 2008a,b) identified motivation for travel amongst older people can be said to inhabit three main categories: *practical* (primary) needs, *psychosocial* (secondary) needs and *aesthetic* (tertiary) needs. Musselwhite and Haddad (2007, 2008a,b) suggest that older people who had given-up driving tend to find that, on the whole, their practical needs are met, but other needs are not. Hence, the association between giving-up driving and a decline in mental health is linked to the loss of affective or emotive needs not being met. However, in Musselwhite and Haddad's (2008) study two different cohorts were used, one of drivers and one of ex-drivers. This study will use one cohort of older people and aims to investigate the experience of older drivers as they give-up driving examining how travel needs change as and developing recommendations for helping older people give-up driving, following one cohort.



Proposed methodology

A total of 25 individuals will be identified who are contemplating giving-up driving. A literature review will inform the recruitment strategy for the research, for example, it will be important to consider the following:

Gender – previous research suggests that male drivers find it harder to give-up driving and are less likely to plan giving-up driving over a long-time period.

Location – the location of local public and active transport network is key to transition from private transport

Physical accessibility to alternative travel. Accessibility to public transport and use of active travel is difficult for those who are less physically mobile.

Contemplation – Individuals who contemplate giving-up driving and devise strategies for moving to alternative travel are more likely to find giving-up driving as less stressful

Social support networks – those will family and friends who can help share the journeys after giving-up driving reduce the stress.

Compensatory behaviour – Individuals have often already involved themselves in compensatory behaviour prior to giving-up driving, including less driving at night, in rush-hour and on motorways being three key areas.

Virtual travel and access to technology – Individuals who have access to technology to help with shopping and staying in touch with others may find giving-up driving less of an issue

Temporal travel – Individuals may replace actual travel with temporal travel and the ability to travel through storytelling and recalling past events may help overcome some of the loss of physical travel.

A three stage approach to the research with a six wave main data collection phase involving iterative qualitative data techniques will be employed:



Stage 1 - literature review and scoping the context

Stage 2 - Data collection in the field (with 25 individuals contemplating giving-up driving)

Wave 1: Induction and contemplation interview

Wave 3: Focus group 1 - Exploring alternative travel

Wave 4: Interviews - Barriers / benefits to giving-up driving

Wave 5: Focus group 2 - Help and enabling travel

Wave 6: Interview 3 - Reflection on the process

**Wave 2:
Travel and
driving diary**

Stage 3 - Developing recommendations and writing-up

It is hoped such in-depth exploratory work will identify the issues that older people face as they give-up driving and use other forms of travel (including public transport, accessing lifts, active travel and virtual and temporal travel). In identifying such issues, a set of recommendations will be developed with the help of external stakeholders.



Contact Details

The study is planned to run from January 2010 for 12 months. For further details please contact the CTS project investigator:

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