



AGEING WELL

maintaining quality of life

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Older drivers and road safety

Driving, licensing laws and road use behaviour can be a highly emotive issue. To many people driving is fundamental to modern life, being central to a complex range of issues relating to lifestyle, access to services and maintaining social networks. Driving is perceived by many as essential to maintain quality of life and independence. This perception may lead some drivers to continue driving long after it is safe for them to do so.



Many myths and misconceptions surround the relative safety of "older drivers" as compared to other road users. Research conducted by VicRoads reveals that overall, older drivers (over 65 years of age) are in fact involved with fewer crashes than younger drivers. The tendency for older drivers to be cautious, responsible and less likely to engage in high risk driving, as well as a range of lifestyle factors (including driving only relatively short distances) contribute to this observation.

However, for every kilometre driven, older drivers are at a significantly higher risk of crashing compared to middle aged drivers. Indeed this risk of crash is the same as that for inexperienced male drivers. Those who are involved in a crash also face a much higher risk of being killed than their younger counterparts.

Problems which may affect older drivers include slower responses to traffic hazards, difficulty judging distance from

other vehicles and reduced ability to recognise hazards, especially multiple hazards. Increased anxiety relating to behaviour of other road users is also common.

It is important that drivers of all ages take responsibility for their driving. Drivers who are experiencing problems with certain driving conditions (such as at dusk or in inclement weather conditions) should adjust their road use accordingly. Drivers can plan to drive shorter distances only in daylight hours, and to avoid peak hour. Power steering, air-conditioning, automatic transmission, and electrically adjustable mirrors can help people drive safely. People may also wish to consider passive safety features (safety when involved in a crash) such as the size of the car (generally bigger is safer) and airbags. It is important that drivers consult with their doctor about driving, particularly when recovering from illness, while taking medication and in deteriorating health.

Wise people plan ahead. This includes planning about community mobility and might include modifying driving behaviour and becoming familiar with alternatives, such as taxis, delivery services, public transport or travelling with others. For example, people could use a mix of their own and public transport by driving to the local train station and then using the train to access the city – a high complexity, high risk environment. This can minimise exposure to avoidable risks. The result is improved road safety for all road users.

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Education

NARI has presented a number of successful education events throughout the year including Assessment and Care Planning courses, a series of Safe Drive Medical seminars and a joint venture symposium with Royal Freemasons' Homes of Victoria on Research Based Care. NARI is looking forward to another successful year in 2001.

If you would like to receive information about future education events, please contact NARI to be added to our education mailing list. For details about Assessment and Care Planning courses or Safe Drive Seminars to be held in 2001, please contact Robyn Sloan on (ph 03 8387 2148 or email r.sloan@nari.unimelb.edu.au)

A Message from the Interim Director...



This is the last issue of *Ageing Well* for the year 2001. It has been a year full of achievements, celebrations, international collaboration and recognition. The list of achievements of NARI will continue to grow under the leadership of our new Director, Professor Allan McLean. It is an exciting time for NARI as we welcome the appointment of Professor McLean who will take up the position fulltime in early 2002. Professor McLean will also concurrently hold the appointment of Director of Aged Care at Melbourne Health. He also holds a professorial post within the University of Melbourne, School of Medicine, with respect to these appointments. Professor McLean has a distinguished record in biomedical and public health research. His previous appointment was the Director of both the Aged Care Unit and Department of Geriatric Medicine at the Canberra Hospital together with appointments as Professor of Medicine at the University of Sydney and the Australian National University from which positions he joins us. Professor McLean will lead NARI into a new era of biomedical research and service delivery and will strategically position NARI at the forefront of ageing research nationally and internationally.

The appointment of Professor McLean is great timing for me personally as I have been awarded funding from the National Health and Medical Research Council to continue my research in Alzheimer's disease and to further develop the skin test for early diagnosis of this disease. I have been working on this project for nearly 8 years and I am eager to continue my research in this area till fruition.

Upon the arrival of our new Director, I will continue in my usual role as Director of the Biomedical Division at NARI. My role is managing the biomedical research team, setting up new initiatives in the research effort and developing new research ideas which could lead to new discoveries, initiating new national and international collaborations, as well as continuing my academic role with the University of Melbourne in teaching and supervising students.

Most importantly, my commitment to ageing research and to NARI will continue. The challenge for me will be to continue to raise NARI's profile in biomedical research nationally and internationally. I believe that NARI offers an excellent environment for researchers by providing an ideal interface between clinical medicine and laboratory science. Together with our new Director and our dedicated Education and Public Health teams we will continue to improve the quality of life of our older population.

Associate Professor Zeinab Khalil
Interim Director

NARI



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Be proactive in meeting the training needs of community care staff



On 11th September 2001, NARI conducted the first of two training sessions for aged and disability assessment staff on "assessment and care planning" for the 2001 calendar year. The program aims to equip staff with the skills to use consistent, strategic and reflective approaches to assessment and care planning. Topics covered in the program include: frameworks for understanding needs; general needs assessment and care planning; domains; introduction to assessment tools and assessing risk; recognising signs and developing management strategies; policies and priority of access guidelines; legal and ethical issues facing community care professionals.

Participants in the September program (pictured) were from the Cities of Melbourne, Stonnington, Frankston, Banyule, Yarra, Hobsons Bay, Boroondara and Boroondara; Shire of Baw Baw; Care Connect; Barwon Health; West Grampians Health Service; Villa Maria Society; and Carers Australia.

Program facilitator Joan Nankervis, "the program serves a need to develop local approaches which assist community care professionals to achieve care planning goals and strategies". Co-facilitator Peter Darzins agrees, "we are able to respond to real issues facing staff, and participants learn a great deal from each other".

Division Director, Dr Peteris Darzins is pleased with the success of this program, saying that "the facilitators are experienced in aged care and bring complimentary perspectives and expertise. The feedback they have developed has been well received, and other NARI programs are able to contribute". Dr Darzins himself presents a session on "assessment and care planning" in the program.

It is important for NARI to be proactive to meet the workforce training needs of the broader aged care workforce. Offering training on a continuing basis to aged and disability assessment staff is a logical step, Dr Darzins says.

Further programs are planned for 2002. The first is expected to be in March.

YES!

I would like to help ensure more people are "ageing well".

Please accept my gift of:

\$25 \$50 \$100 \$200

my choice \$ _____

All donations over \$2 are tax deductible

Name and address (for receipt)

Title: Dr/Mr/Mrs/Ms/Miss _____

First Name _____

Surname _____

Org. (if applies) _____

Address _____

State _____ P'code _____

Telephone _____

Date of Birth ____/____/____

I enclose a cheque*

OR please debit my

Diners Bankcard Visa

Amex Mastercard

for the total amount of \$ _____

Card Number _____

Expiry Date: ____/____

Signature: _____

* payable to Ageing Well Foundation

Further information overleaf

Please return to:

National Ageing Research Institute

PO Box 31

PARKVILLE VIC 3052

AUSTRALIA

thank you

YES!

I would like to know more about "ageing well".

Please send me more information on:

- Becoming a NARI Volunteer
- Memory, pain, falls and wound clinics
- Current Research Projects
- Bequests and memorial gifts
- Sponsorship
- Education

Please help us get to know you:

How did you hear about NARI and the Ageing Well Foundation?

What are your main areas of interest?

- Ageing in general
- Dementia and Alzheimer's Disease
- Pain management
- Falls, balance, mobility
- Research (biological, clinical and public health)
- Education
- Other area(s) _____

Why are you interested in NARI and the Ageing Well Foundation?

- Self
- Family member
- Professional interest
- General interest

What age group do you belong to?

- under 30
- 31 - 40
- 41 - 50
- 51 - 60
- 61 - 70
- 71 - 80
- 81 - 90
- over 90

Other comments about NARI or feedback about *Ageing Well* newsletter:

NARI Newspoints



NARI would like to welcome Public Health's newest staff member, Ms Lisa Engel. Lisa originally trained as a nurse and developed a strong interest in diabetes management. For the past five years Lisa has been a self-employed consultant, undertaking a range of health-care related projects and operating a diabetes education practice.

Lisa has also convened national symposiums with a diabetes related theme including "Diabetes & the Older Adult" as well as developing and facilitating many training programs for health professionals in the acute and aged-care sectors. Lisa joined the Public Health Division in October 2001 to work on a project to promote health promotion practices in supported residential services and says,

"I am very happy to be working at NARI, after spending the past five years being self-employed, its good to belong somewhere again working with supportive and friendly people."

Lisa's previous research experience was investigating Binge Eating Disorder in a population with Type 2 Diabetes. Lisa is currently completing a Graduate Diploma in Psychology at the University of Melbourne.

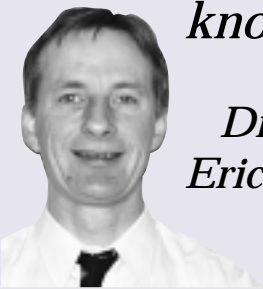
Thank you...

NARI relies on corporate and community support to maintain our research projects and in working towards our mission of ageing well for all older people. NARI would like to thank the people who have donated generously over the last few months, they include Ms R Swift, Mr W E Mayell, Croft Healthcare, Mrs Janis Rees, Mr Neville Brooke, Mrs Shirley Ramsay, Mrs Julie Burke, Mr and Mrs EC and TJ Moran, Ms Nelva Griffiths, Mrs Shirley Miles, MECWA Community Care, Mrs Phyllis Shores, Mr Anthony Muston, Ms Margaret Rae Janes, Ms Ann McCoughtry, Miss Florence Arnott and Ms Valerie Ahearn. All donations to NARI and the Ageing Well Foundation contribute to improving our understanding of the ageing process, which will ultimately help us all to age well.

MORE RESEARCH AND NEWS →

Turn over page

Getting to know...



*Dr
Eric Seal*

Dr Eric Seal was first associated with NARI as a registrar in Geriatric Medicine in the early 1990's. After he completed his FRACP he travelled overseas working in the United Kingdom.

Dr Seal then worked as a Research Fellow in the Movement Disorders Program in the Department of Neurology at the Cleveland Clinic in Cleveland Ohio.

He returned to Australia in 1996 to commence PhD studies at NARI and also to work on as a consultant.

He is currently writing his thesis and works in the Falls Clinic, CDAMS Clinic as well as his commitment to the wards at Melbourne Extended Care and the Dementia Drug Trials at NARI. Recently he has also taken up a position on the General Medical Roster at St Vincent's Hospital.

"Life is hectic and my daily challenge is closing my office door long enough to get on with my thesis. Despite the chaos I love my work and love the NARI family. It's a great place to work and they have all been most supportive."

Eric's major passion is his family, wife Andrea and their three children. "The common question at home is 'When is Daddy going to finish his homework?'"

NARI working to improve road safety

Make sure
they're right to drive.

TAC

**Safe Drive
Medical program**

vic roads



Many older road users are as safe as any other group of drivers and pedestrians, but some are not. The safe older road users can be unfairly tarnished by the bad reputation of the unsafe ones. This can pose problems for both older road users and the health professionals who care for them. Together with VicRoads, NARI has developed Safe Drive Medical, a state-wide seminar program designed to promote safer road use by older Victorians.

Safe Drive Medical aims to assist General Practitioners (GPs), occupational therapists, pharmacists and other health professionals deal more effectively with issues relating to older drivers and pedestrians (such as medication, licensing and legal obligations). The underlying goal of Safe Drive Medical is to improve road safety, while maintaining older people's community mobility.

Since 1999 NARI, together with VicRoads, has presented 24 seminars to Victoria's health community. More than 500 health professionals from all over the state have been involved. Participants consistently report that the Safe Drive Medical program increases their knowledge and provides them with more confidence in these matters. This will encourage consistent, evidence based, approach by health professionals to the complex older road user issues. It is hoped that other Australian states will recognise the value of the seminars and elect to run the Safe Drive Medical program to assist health professionals elsewhere in Australia.

NARI is delighted to be working with VicRoads again in 2002 to present another statewide series of Safe Drive Medical seminars to Victoria's health community. The Transport Accident Commission (TAC) will again be the seminar series sponsor in 2002. For details of the 2002 series of Safe Drive Medical seminars for health professionals, check our web site (www.nari.unimelb.edu.au) or contact Robyn Sloan at NARI (ph 03 8387 2148 or email r.sloan@nari.unimelb.edu.au).

International Year of Volunteers 2001

While some NARI volunteers are a testament to the proverb "Many hands make light work"



Olive Browning being part of a regular group of helping hands.



Exchange student Elizabet Jonsson measures volunteer William Babb's blood flow.



Keith Browning sorting through one of NARI's many mailouts.



Other volunteers at NARI help our scientists add another piece to the puzzle of ageing.



Volunteer Zelma Riddell taking part in talking to the 4th year medical students on what it is like being on 'the other side of the coin'.

It's not just work, it is companionship and sharing of information and stories.

Volunteering is valuable in our society and we ask you to continue to celebrate International Year of Volunteers into 2002, by sharing your volunteer experience. Please write to us here at NARI, PO Box 31, Parkville, Vic, 3052, we would love to hear from you!

Healthy Living Tips

SAFE ROAD USE FOR PEDESTRIANS

Like drivers, pedestrians require complex physical and mental skills to see and hear traffic, to recognise all the potential hazards roads provide, to decide how to respond to them and to execute safe movement within limited time. Some tips to improve safety for pedestrians are:

- plan to walk along footpaths, use controlled crossing points and pedestrian over- or under-passes
- avoid crossing busy roads other than at controlled crossing points
- make sure the road is clear before stepping off the curb
- never assume drivers have seen you because you have seen their vehicles; establish eye contact
- be alert to sudden changes eg U-turning or reversing vehicles
- avoid crossing near a crest or in a bend in the road
- wear light coloured clothing and a reflector at night
- cross at Pedestrian crossings, traffic signals or pedestrian refuges
- at crossings make sure traffic has actually stopped before stepping onto the road
- do not cross between parked vehicles
- if needed, wear glasses and hearing aids when walking
- avoid peak hour traffic
- those older pedestrians who cannot increase their maximum walking speed and cannot run and thus cannot decrease the time taken to cross the road, even if they are threatened by approaching vehicles, must take extra care

For more information about safe road use as a pedestrian, contact VicRoads or the Transport Accident Commission (TAC).