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Project Title
Buffering negative health outcomes following driving cessation among older adults: analysis of the Canadian Longitudinal Study on Aging (CLSA)

Project Summary
Mobility refers to the ability to move oneself within environments, or life-spaces, that expand from one’s residence to the neighbourhood and to regions beyond. For many older adults, mobility outside the home is primarily achieved through driving a motor vehicle. Driving affords independence, forms a central part of identity, and has been associated with high quality of life. Driving cessation among older adults is associated with poor health as well as increased risk of institutionalization and mortality. The available literature suggests that driving cessation is a one-way street to poor physical and mental health; yet previous work has ignored the potential effect of buffering factors that can mitigate poor health outcomes after driving cessation. Using data from the Canadian Longitudinal Study on Aging (CLSA), this study will examine driving cessation and factors that buffer its effect on health using a large, representative sample of adults over 45 years old. Our goal is to examine health and community mobility following driving cessation among older adults, thereby providing data to support smoother transitions to driving cessation through the development of evidence-based interventions for current and former older drivers. Our main objectives are: 1) confirm the associations between driving cessation and health-related outcomes in a large Canadian sample; and 2) identify individual- and contextual-level factors that moderate the relationship between driving status and health-related outcomes among older adults. This study will identify factors that promote health among older adults after driving cessation and can be used to develop interventions and policies to facilitate a healthy transition to non-driving.

Keywords
Aging, Driving, Health, Quality of life, Mobility