



### **Driving and Community Mobility as an Area of Occupation**

Community mobility in the United States is a critical area of occupation, grounded in independence, spontaneity, and identity. It begins early when we are passengers in a car seat and on the school bus, then when we learn to ride a bike and cross the street. Mobility continues through the lifespan, as we access public transit and obtain a first driver's license, sometimes culminating in dependence on others for transport. Although the mode of transportation may change throughout the lifespan, the meaning remains constant: transport from one location to another enables participation in our necessary and/or desired occupations. Occupational therapy practitioners can play a central role in facilitating this important area of performance.

## **The Occupational Therapy Role in Driving and Community Mobility Across the Lifespan**



Community mobility is defined by the Occupational Therapy Practice Framework as “moving self in the community and using public or private transportation, such as driving, or accessing buses, taxi cabs, or other public transportation systems” (American Occupational Therapy Association, 2002, p. 620). Engaging in community mobility, either by motor- or man-powered methods, is an important aspect of human participation that enables engagement in occupations outside of the home.

Occupational therapy programs can reinforce driving and community mobility as important occupations by offering a range of related services, both within the program and through referral. Occupational therapy practitioners address community mobility through the process of evaluating individuals, organizations, and systems to provide the necessary interventions to promote participation and preserve safety.

---



## What Role Can Occupational Therapy Play Throughout the Continuum of Care?

### Evaluation

The range of evaluation roles throughout the lifespan may include:

- Screening for proper child passenger safety
- Assessing school system capacity to transport general and special education students
- Determining readiness to ride a bicycle
- Assessing ability to cross the street and negotiate curbs and sidewalks
- Assessing visual motor skills necessary for reading street signs
- Ascertaining driving readiness among adolescents
- Evaluating the ability to access and use transportation other than private automobile
- Evaluating driving ability and safety among adults with disabilities, acquired or otherwise
- Establishing baseline driving performance of adults with progressive illnesses
- Assessing driver-vehicle fit for older adults who live in the community

### Intervention

Occupational therapy practitioners can:

#### Create

- Promote use of transportation alternatives
- Create a network of community resources to support clients after driving cessation
- Generate a community partnership with Safe Routes to School ([www.saferoutesinfo.org](http://www.saferoutesinfo.org)) to encourage walking to school

#### Establish/Restore

- Establish a routine for community mobility for efficient use of transit services

- Restore range-of-motion, or strength through an individualized exercise program with a goal of safe car handling
- Enhance problem solving and safety through cognitive retraining

#### Maintain

- Coordinate a walking wellness program to maintain physical agility
- Advocate for maintenance of safe, clear, walkable and bikeable communities through collaboration with municipal agencies

#### Modify

- Equip the vehicle with adaptive equipment to compensate for decreased function in extremities
- Maximize visual access to the driving environment through modification of the driver's seat or installation of convex mirrors

#### Prevent

- Develop a community walking program to prevent childhood obesity
- Prevent injuries and fatalities through promotion of the proper use of vehicle safety features and child passenger safety seats

Occupational therapy practitioners can also be involved in:

- Advocacy for
  - Walkable and bikeable communities for promotion of healthy living
  - Safer roadway infrastructure
  - Transportation services for persons who cannot drive
- Program development and evaluation
- Policy development
- Collaboration with schools and state and local agencies for safety training



## Occupational Therapy Practitioners Address Participation Through the Lifespan

### Children and Youth

As passengers, infants, toddlers, and children rely on caregivers to transport and secure them safely. Therapy interventions address emerging mobility needs of children that have an impact on safe engagement and participation in the community. These situations may include:

- Travel as passengers in private vehicles (car seats, booster seats)
- Children with disabilities who have special securing needs
- Parents with disabilities who need assistance
- Grandparents' transportation of grandchildren
- Initiation of bicycling education, including helmet use
- Beginning travel as pedestrians
- Safety tips for transport by school bus, including evacuation training
- Other transportation means, including skateboards, rollerblades, etc.

### School Age and Adolescence

Students on the autism spectrum, as well as those with nonverbal learning disability, cognitive impairments, spina bifida, and cerebral palsy, need to address the issue of driving while still in high school. The assessment of transportation needs has an impact on a student's access to employment, housing, social, educational, and recreational opportunities. Occupational therapy can contribute to improving a student's potential to drive by addressing pre-driving skills that promote life skills independence and safety in the community. Pre-driving skills include coordination and quick use of extremities, crossing streets, managing social interactions, managing time, handling an emergency situation on one's own, and caring for oneself when alone. Additional skill development for community mobility includes reading maps, managing money, and participating in public transportation systems. Managing emotions and feelings and regulating sensory input are essential skills for all persons, with or without disabilities. The capacity for impulse control and stress reduction is essential for all drivers. Sensory regulation is necessary for filtering and tolerating sensory information provided on a crowded bus or in a traffic jam.

School mobility includes safety in navigating hallways as well as transportation to and around school grounds. For school team members looking at transitional planning for students after graduation, it is essential that the student's potential for learning to drive is addressed. Many students with special needs may encounter barriers to driving in the areas of executive function, visual, and motor skills. The earlier that pre-driving skills are addressed, the better pre-

pared the student will be for transitioning to independent life after school and exploring the possibility of driving, or using other means of community mobility if driving is not a viable option. Some key issues to address with this age group are:

- Traveling as passengers, particularly with other new drivers
- Learning to use public transit
- Developing complex motor and sensory pre-driving skills
- Obtaining a first driver's license

### Productive Aging

Seniors are often living with medical conditions that may affect driving safety. To address the goal of "driving safer longer," occupational therapy programs offer education, evaluation, strategies, and identification of appropriate options where needed. Programs can also offer strategies and resources for caregivers transporting adults with special needs (e.g., dementia-friendly transportation), as well as caregiver training and specialized intervention for ensuring cessation when necessary, while addressing the need for continued mobility as driver or passenger. Considerations for these persons are:



- Illness or disability that may hinder driving performance and safety
- Transportation of aging parents
- Transportation of children who need occupant protection
- The complexity of traveling on public transit with a disability
- Driver-vehicle fit issues
- Functional decline that may necessitate adaptation
- The increased duty to transport others as peers' skills decline
- Addressing the impact of driving cessation when continued driving is deemed unsafe
- Searching for transportation alternatives
- Instruction in wheelchair mobility, accessibility, and environmental modifications

## Driving Rehabilitation Programs

In addition to broad-based strategies to promote safe community mobility alternatives, there is a role for programs that focus on driving. At every stage of life, mobility needs can be addressed by specialized driving rehabilitation programs offering evaluation and intervention services, which correlate an individual's strengths and impairments with driving goals and driving risk. Continued, safe driving is the goal of these occupational therapy programs, and they provide a range of specialized services either directly or through referral.

To find a specialist in your state, go to [www.aota.org/olderdriver](http://www.aota.org/olderdriver) and use the Specialists Directory. ■

*Developed for AOTA by  
Wendy Stav, PhD, OTR/L, SCDCM,  
and Miriam Monahan, MS, OTR, CDRS, CDI*



## Reference

American Occupational Therapy Association. (2002). Occupational therapy practice framework: Domain and process. *American Journal of Occupational Therapy*, 56(6), 609–639.



For more information, contact the American Occupational Therapy Association, the professional society of occupational therapy, representing nearly 36,000 occupational therapists, occupational therapy assistants, and students working in practice, science, education, and research.

### **The American Occupational Therapy Association**

4720 Montgomery Lane, Bethesda, MD 20814-3425  
301-652-AOTA (2682) [www.aota.org](http://www.aota.org)

### **Occupational Therapy: Skills for the Job of Living**

Copyright © 2008 by the American Occupational Therapy Association. All rights reserved. This material may be copied and distributed without prior written consent. For all other uses, please e-mail [copyright@aota.org](mailto:copyright@aota.org).