

AD/HD Safe Driving Program: A Graduated License Plan

by Mark Katz, PhD

GOOD NEWS FOR TEENS WITH AD/HD wanting to improve their driving skills and also reduce their risk of car accidents and traffic violations: the AD/HD Safe Driving Program can help.

Parents, educators, health-care providers and well-informed consumers are finding creative ways to address the needs and daily challenges of those who struggle with AD/HD. In each issue of Attention, we highlight one innovative program, model, or practice and pass on appropriate contacts so you can implement similar efforts in your community.

Developed by Russell Barkley, PhD, the program incorporates several research-validated practices found in his extensive work with parents of teens with AD/HD, including charting, contracting, and monitoring. Medication compliance is also closely tracked in those for whom medication has been prescribed. Barkley's research shows that stimulant medication has a positive impact on driving performance among individuals with AD/HD.

Three levels of independence

Beginning drivers progress through three levels, with each new level allowing for greater independence. A level can be completed in 6 months, as long as young drivers follow all program guidelines and demonstrate safe driving skills. The program runs for approximately 18 months from beginning to end.

On level one (0 to 6 months), teens drive only during daytime. Level two (6 to 12 months) ex-

tends driving time to the evening hours (9 or 10 p.m.). Research shows that most fatal car accidents involving teens occur between 9 p.m. and 6 a.m. Teens drive freely on level three (12 to 18 months), while following rules agreed upon with parents.

Parents and teens also complete a 26-item driving behavior survey at the start of the program and after completing each level. Results help determine whether teen drivers are ready to move from one level to the next.

How to get the keys

Young drivers are asked to keep a log of each driving experience. Log entries include medication (if prescribed, was it taken?), destination, route/miles, contact name and phone number, time/out and time/returned, and odometer. They must also place a small decal on the driver's side window listing the following Everyday Rules:

AD/HD and Driving Risks

Researchers Russell Barkley, PhD, and Daniel Cox, PhD, reviewed the scientific literature on the driving risks and impairments associated with AD/HD and the effects of stimulant medication on driving performance. Among their findings:

- Young drivers with AD/HD are 2 to 4 times more likely to have traffic accidents, 3 times as likely to have injuries, 4 times more likely to be at fault, and 6 to 8 times more likely to have their licenses suspended.
- To date, medication is the only known treatment shown to help AD/HD driving behavior.
- Effective behavioral treatments are needed that can help young drivers with AD/HD while driving, or at the point of performance.
- Based on the research, clinicians should educate patients and their caregivers about the increased risk of adverse outcomes among untreated individuals with AD/HD, and the role of medication in improving driving performance.



MORE INFO: For a list of references and helpful resources, visit www.chadd.org/attention/references.

1. Take medication as prescribed.
2. Fill out the log every trip.
3. While driving
 - Keep music low
 - Preset radio stations
 - No eating
 - No other teens in the car
 - Absolutely NO alcohol

Three steps to getting started

Before beginning, new drivers and their parents enter into a contract that spells out their respective responsibilities. Teens are responsible for accepting AD/HD as a biological disorder that affects driving. Teens also agree to abide by the safe driving rules, and must understand that they can graduate to the next level only when they succeed for six consecutive months at their current level. Parents agree to grant driving privileges if rules are complied with. Parents and teens also agree that parents have the right and responsibility to check the accuracy of the teen's driving log, the right to determine whether rules were appropriately followed, and if not, to institute appropriate consequences, which could include loss of driving privileges.

Next, new drivers listen to a song on a CD that helps them remember the Everyday Rules. The decal listing the rules is then placed on the driver's side window (at the point of performance). This way, rules are always visible when driving.

The program also highlights important research findings related to young drivers in general and young drivers with AD/HD in particular. Research shows, for example, that new drivers with AD/HD have 2 to 4 times more accidents (including serious accidents with injuries) and many more traffic violations than their peers who do not have AD/HD (see sidebar). These and other findings help parents and teens understand why the everyday rules were selected and the purpose behind graduated levels. For those teens with AD/HD who feel unfairly singled out, the findings help explain why a program like this may represent an important opportunity, rather than a punishment.

Information about the AD/HD Safe Driving Program can be obtained through Compact Clinicals (www.compactclinicals.com or by phone, 800-408-8830). Those wishing to learn

more about the program or those having questions are encouraged to e-mail Tressa Collins at tressa@compactclinicals.com. Refer to the article by Russell Barkley and Daniel Cox, which appeared in the *Journal of Safety Research* (Vol. 38, 2007) for a review of studies exploring driving risks associated with AD/HD. **A**

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