

From Walk-A-Thons to Congressional Hearings: Rural Transportation Services Come of Age

Connie Garber

In the late 1960s, in rural York County, Maine, one of the first walk-a-thons was organized with the theme: *The children will walk so the elders may ride*. This event raised \$33,000, and the first van was purchased to provide transportation to some of York County's senior citizens.

This scene, with variations on the theme, was repeated in the 1970s in countless other communities across the country, predominantly focusing on the need of elders to access medical care, shopping, and hot meal programs. The Councils on Aging and Senior Centers, serving as advocates for the elderly, set a high priority on access to services. They understood that without a means to move people from point A to point B, the best services were of no use to these potential consumers. Following the example set by advocates for senior citizens, groups such as Associations for Retarded Citizens, United Cerebral Palsy, and the Red Cross became involved with the provision of local transportation for their client groups.

On the federal level, the growth of transportation services was fueled by the expanding array of programs serving health and human service needs. The Health Care Finance Administration (whose programs include Medicaid), Head Start, the Administration on Aging, and many other bureaus in the federal government became involved directly or peripherally in the funding of transportation for specific segments of the population. In 1978, the Urban Mass Transportation Act took on a new dimension when Section 18 was added to the original Act. Section 18 provided funding for capital and operating costs of non-urbanized public transportation. The

establishment of rural transportation funding had been preceded by the Section 147 demonstration projects. These projects had so clearly proven the need for additional rural transportation resources that no full-scale evaluation was needed to substantiate their success.

Why was there such a need? What were the circumstances in this country that precipitated the growth of transportation services, not only in the large urban areas, but in smaller cities and rural regions? We have only to look at how people lived, their means of livelihood, the family structure, the advancements in health care, and the regionalization of services to answer these questions.

A Changing Society

As the economic base of this country changed and people moved closer to jobs, the nuclear family began spreading geographically. As people began to live longer and those with disabilities gained greater independence, the traditional extended family was not always there to assist. As the milkman stopped coming to the door and the doctor stopped making house calls, people had to travel farther to get the goods and services they needed. The needs of these individuals were by no means ignored; instead of a daughter taking her elderly parent to the doctor, or a physically handicapped child staying home (or being institutionalized), a growing network of non-profit agencies began to fill the void.

For instance, the one-van system that began with a walk-a-thon in rural Maine has grown to thirteen bus routes operating five days a week, with over twenty funding sources contributing to a consolidated regional transportation service. York County Community Action Corporation's (YCCAC) service is an example of what has happened nationwide. YCCAC's Transportation Program covers the county's twenty-nine towns--one thousand square miles--and provides rides

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to targeted persons such as the elderly, physically handicapped, mentally retarded, and low-income individuals, as well as the general public. As YCCAC's transportation service has grown, with service provided on YCCAC's buses, in private cars using volunteer drivers, and with sub-contracts to taxicabs and private bus lines, the need for service has grown faster. Even so, YCCAC and other "community transportation" providers have attempted to continue doing more with scarcer resources.

Growing Pains

The growth of community transportation has brought a new set of challenges (the new term for problems). The fragmented system created when small groups provided transportation targeted at their specific client population, exacerbated by the dozens of targeted funding programs at the federal level, has led to a less than perfect outcome.

In urban and rural areas alike, there can be found varying levels of coordination in community transportation services. In some areas, services are fully coordinated, while in other areas there are totally independent, multiple providers, characterized by many gaps in service.

On the lower end of the coordination range, Van A travels down a rural road picking up pre-school children going to Head Start. Van B follows five minutes later picking up a mentally retarded individual headed for a sheltered workshop, followed a half-hour later by Van C collecting senior citizens going to a meal program. Not only are vehicles underutilized, but the administrators of programs A, B, and C often do not have the time or know-how to maintain the vehicles, nor the money to replace them. Vehicle operation and maintenance steals much-needed time from program administrators (who must hire and fire drivers, deal with vehicle breakdowns, work out insurance coverage, etc.), and also steals much-needed funding from the organization, whose primary purpose is to provide a service, not transportation.

The need for more transportation service has led to a national, state, and regional focus on the question of how to maximize existing resources to serve more people. This has led to the use of a full range of coordination options. For instance, in some states (such as Florida, North Carolina and Maine), the state mandates a level of regional planning or the combination of funds. In some regions, groups of special purpose agencies have set up centralized dispatching, maintenance, or bulk purchasing of fuel.

In addition to the need to provide more effective and efficient transportation services, the importance of provid-

ing safe transportation has been recognized. It can no longer be deemed adequate to get a person from point A to point B; there must be some assurance that the vehicle has been designed with rider safety in mind, and maintained appropriately to minimize road hazards. The driver must also be trained to deal with the many demands of the job: special needs passengers, emergencies, defensive driving, and public relations.

Strides Made in the 1980s

How are these things being accomplished? Great strides have been taken in the last three to five years. During this period, rural and specialized transportation operators formed the National Association for Transportation Alternatives

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(NASTA) and got the ear of key individuals, such as Congressman James Oberstar from Minnesota. Initial congressional hearings on rural transportation needs for training and technical assistance laid

the groundwork for the UMTA Rural Transit Assistance Program (RTAP), which now includes both national and state programs to meet a variety of training needs.

At the national level, a series of training modules have been developed, dealing with topics such as meeting the needs of special passengers, emergency procedures, dispatching, and board training. A national clearinghouse for information, with a toll-free hot line, has been set up, and a peer-to-peer network of professionals in the field is able to offer assistance to fellow providers on a variety of topics. The clearinghouse and the peer network are being operated under contract by the Community Transportation Association of America (CTAA), a national professional organization formed in June 1989 through the merger of NASTA and Rural America, a rural advocacy organization. Operators of rural and specialized transportation continue to play a critical role in the national RTAP effort, serving on the review board (which provides direction for the development of the modules, reviewing and giving technical input, and helping to coordinate the variety of training efforts underway at UMTA), and forming the "talent" for TransNet, the peer-to-peer network.

The bulk of the RTAP funds (85 percent) are distributed on a formula basis to the states, where local training and technical assistance needs can be prioritized and addressed. An incredible assortment of training workshops, conferences, scholarships for travel to training sessions, "roadeos", community transportation marketing, and many other services have become available through RTAP. The importance of RTAP in providing local operators with access to training cannot be overemphasized, yet in most states this access has

been limited (by funding constraints) to those transportation providers receiving UMTA Section 18 or Section 16(b)2 funds.

Only within the last year have additional monies become available, through the combined auspices of UMTA and the U.S. Department of Health and Human Services (HHS), to expand training and technical assistance to the vast number of human service agencies, funded by HHS, who provide transportation either as a primary or peripheral service. In February and March of this year, the Community Transportation Association of America convened two regional conferences on "Integrated Client Transportation," cosponsored by UMTA and HHS. These conferences represented the first effort to bring human service agencies into the network created by RTAP, and provided a forum for the agencies to voice their concerns on barriers to coordination and make suggestions for resolution to these issues.

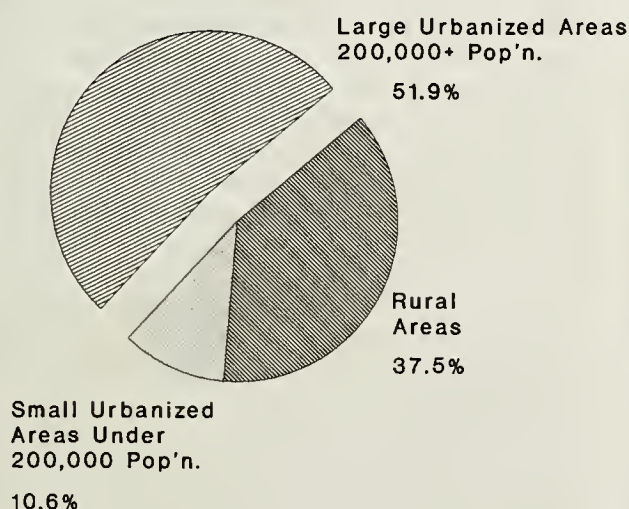
At the regional conferences, it was easy to see the need for the expansion of training services. There was a thirst for communicating with peers at coffee breaks, during workshops, and at meals, and a hunger for written information as every hot line brochure, copy of *Community Transportation Reporter* magazine, and all other resource materials were snatched up. In all cases, the characteristics that set this group of community transportation operators and human service agencies apart from the large urban mass transportation providers is an historical lack of national focus, inadequate funding, and insensitive regulation.

For too long, this country has paid only lip service to the needs of its citizens outside the large urban areas. When almost half the U.S. population resides in small urban and rural areas, with 50 percent of those non-urbanized counties receiving no public transportation funds, and only 3.4 percent of formula funds from UMTA going to rural areas (see Figure 1), there are obvious inequities that need attention. When elderly women and men ride rural transit services in numbers three times their proportional share of the population (see Figure 2), and yet the lack of transportation is ranked at state and national aging conferences as one of the largest problems, there are undeniable funding issues that need resolution.

Proposed Federal Legislation

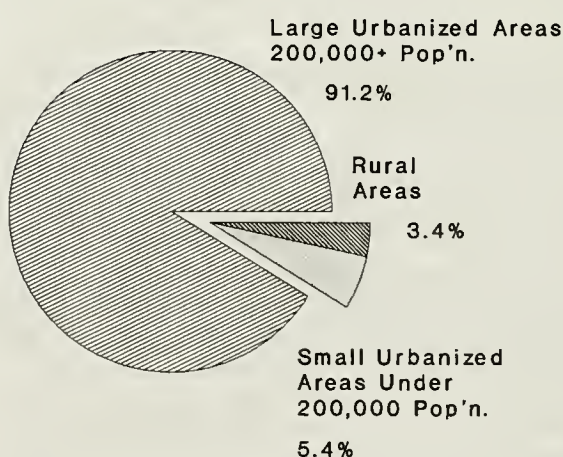
There is an important opportunity this year with the reauthorization of two critical pieces of legislation before the Congress: the Urban Mass Transportation Act, and the Older Americans Act. At a recent hearing held by the House Select Committee on Aging, Subcommittee on Human Services, a number of statements were made in formal testimony which underscored the need to focus on the geographic and funding inequities currently existing. Senator Brock Adams of Washington stated that "... in 1978, as Secretary of Transportation, I issued a policy paper entitled 'Transportation Policy for a Changing America,' which stated: 'We have come to recognize personal mobility as vital to the quality of life for all people at all income levels and to the transporta-

Figure 1



1988 Population Percentages

Statistical Abstract of the U.S., 1990

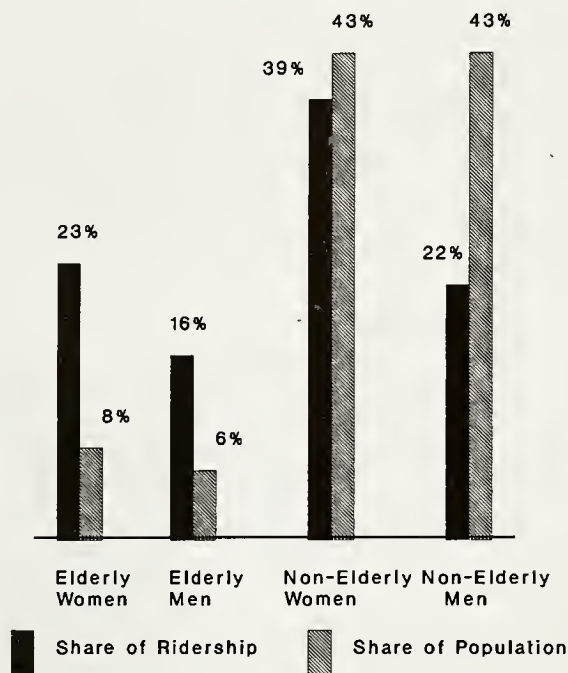


UMTA Assistance, FY'90

UMTA Statistical Summary, FY'89

Figure 2

Relative Ridership of Rural Transit



tion disadvantaged--the disabled, the elderly and the young. Equity has become an important principle of transportation policy."

On February 21, 1991, Congressman Nick Rayhall of West Virginia introduced the Mobility Assistance Act of 1991, H.R. 1079, and listed the major focuses of the bill:

1. To increase the balance of funding between rural and small urban areas (to 7.5 and 10 percent respectively) and large urban areas.
2. To target the transportation dependent as priority users of the services, particularly in light of last year's passage of the Americans with Disabilities Act (ADA).
3. To reverse the trend towards rural isolation exacerbated by deregulation of airline, passenger rail, and intercity bus services, with the resulting loss of service to over 4,000 rural communities.

A summary of the major provision for the Mobility Assistance Act of 1991 states:

The Mobility Assistance Act of 1991 is designed to restore funding for public transportation to a level more in keeping with the economic, social and environmental importance of these programs, to allocate a significant portion

of the increased funding toward meeting new and previously unmet mobility needs, and to renew the level of federal support in planning, research, and technical assistance as well as in financial aid. In keeping with the recognition that public transportation programs are important to all Americans in all areas, it changes the name of the Urban Mass Transportation Administration (UMTA) to the Federal Public Transportation Administration (FPTA).

Bringing these sweeping phrases and proposed major shifts in national policy down to the human level, there is an opportunity in 1991 and the years ahead to make a positive change in the lives of people all over our country:

- The elderly man looking for someone to drive him three times a week for kidney dialysis.
- The elderly woman who can only get out of her house one day a week for the couple of hours a bus is available in her town of 1,500.
- The physically handicapped and mentally retarded women and men trained to work who cannot get to potential job sites.
- The low-income and "working poor" families who cannot afford the luxury of more than one car (or any car in many instances), leaving children and one parent isolated, without access to services taken for granted in larger urban areas.

Conclusion

The Community Transportation Association of America urges all people to become advocates for mobility--the "missing link" in the chain of consumer services, goods and employment. Become involved, learn what community transportation services are provided in your county and state, and become a proponent for equity, accessible services, and a pro-active national policy on mobility for all citizens. State associations must help to focus state attention on these issues, as well as forming coalitions to impress upon all elected officials--local, state and federal--the importance and timeliness of the issue of mobility.

The energy that began a walk-a-thon over 20 years ago has not diminished; if anything, it has grown and multiplied. Contact the RTAP Hotline (1-800-527-8279) if you need the name of contacts in your state, or want additional information on what you can do, as an individual or part of a group, to forward the cause of mobility. It is time to allow all people to be as economically productive, physically independent, and happy in their lives as they are capable. Mobility is the critical means to that end. And as the lives of neighbors, friends, and families improve, each individual community and our national community will also improve. □