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**Easter Seals**

Office of Public Affairs  
1425 K Street, N.W.  
Suite 200  
Washington, DC 20005  
202.347.3066 phone  
202.347.7385 tty  
202.737.7914 fax  
[www.easterseals.com](http://www.easterseals.com)

United States  
Banking, Housing, and Urban Affairs Committee  
Subcommittee on Housing, Transportation,  
and Community Development

Hearing on

**Promoting Broader Access to Public Transportation  
for America's Older Adults and People with Disabilities**

Testimony of

Dr. Mary A. Leary,  
Assistant Vice President  
Easter Seals Transportation Group

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## Introduction

Good afternoon Chairman Menendez, Ranking Member DeMint and members of the Subcommittee. Thank you for the honor of being able to share some perspectives from our experiences at the Easter Seals Transportation Group on the important topic for today's hearing: "Promoting Broader Access to Public Transportation for America's Older Adults and People with Disabilities. My name is Mary Leary and I am the Assistant Vice President for the Transportation Group at Easter Seals. My remarks will focus upon the demographic and economic pressures on transit today, the benefits of public transportation in the lives of America's older adults and people with disabilities, and Easter Seals' Priorities for the reauthorization of Federal Transit Administration programs based on best practices in human services public transportation. The two major themes I will offer are: that person-directed public transportation holds significant cross-cutting economic and quality of life benefits for everyone; and, the importance of furthering partnerships and coalition building with nonprofit organizations and customers affected by public transportation policies.

## Easter Seals' History in Human Services Transportation

Easter Seals is very proud of our long history to increase the mobility of people with disabilities and older adults through facilitating partnerships between the disability community and the public transportation community through our training and technical assistance center called Easter Seals Project ACTION. Our mission is to assist communities to increase accessible transportation in our nation. For over twenty-three years, we have built and enhanced Easter Seals Project ACTION so that today, we provide training, technical assistance, outreach and applied research across a number of areas including mobility management, travel training, coalition building, Americans with Disabilities Act accessible transportation policies and livability/sustainability.

In addition, Easter Seals operates the National Center on Senior Transportation (NCST) in partnership with the National Association of Area Agencies on Aging (N4A). The NCST was created in the Safe, Accountable, Flexible, and Efficient Transportation Act – A Legacy for Users (SAFETEA-LU) to be a resource to increase transportation options for older adults. Key initiatives with the NCST are diversity, mobility counseling, healthy aging and mobility, partnerships between public transportation and nonprofit organizations in volunteer driving and livability/sustainability.

Both these centers are cooperative agreements with the Federal Transit Administration (FTA) where we work in close collaboration with the FTA to assist local communities in furthering mobility for older adults and people with disabilities. Our vision is embodied in what one young man who attended a roundtable on transportation for youth with disabilities told us: "I want to live a spontaneous life." The people we serve tell us that we must continue to invest in transportation resources, which 83% of Americans feel provides access to the things they need in everyday life.

## Demographic and Economic Pressures on Transit

It is a pivotal time in human services transportation for the 54 million people with disabilities and the 38 million adults over 65 in the United States. Twenty-one years after passage of the Americans with Disabilities Act, we have witnessed significant improvements in inclusive community living for people with disabilities. The level of demand for mobility options is increasing and current economic conditions are challenging the nation's transit providers' ability to respond to this demand. Access to public transportation for many people is their critical link to jobs, education, social, recreational, medical, health/wellness, spiritual and volunteer activities.

The 2010 Harris Poll, funded by the National Organization on Disability, established that 34% of people with disabilities report having inadequate access to transportation. This is compared with only 16% of the general public. In fact, the problem seems to be worsening, with a jump of 4% in the number of people with disabilities reporting inadequate transportation options since the last study in 1998.

Demographic realities also underscore the systems change we need to enhance transportation options. In the coming years, the fact that we will have record numbers of people over 65 – over 70 million in the next twenty years, more than double the number today – is not the key issue as many older adults will continue to drive safely well into their 70's. However, 51.5% of older adults over 75 have disabilities; and 71% of people 80 and older have a disability. In 2007, there were 31 million older licensed drivers and 1 million people age 70 and up stop driving each year.

In addition to this increased demand for transit, 90% of transit agencies see flat or declining local and regional funding and 84% have had to either reduce services or raise fares. Many communities, especially rural ones, may not have either public transportation or adequate accessible pathways such that people with disabilities cannot access transit resources without assistance. A frequent term we use is 'the last mile' to characterize when residents cannot get to bus stops because their home, streets and pedestrian environments are not accessible.

## Benefits in Public Transportation – Employment, Health, Community Living and Long-term Care

### *Employment Benefits*

Access to human services transportation facilitates employment and provides economic benefits to communities. Of the 28 million people aged 21-64 living with disabilities, only 46% are employed versus 84% of people 21-64 in without disabilities. We know from experience that one of the many barriers to employment for people with disabilities is access to reliable, affordable, and accessible transportation options to and from work. Increased workers increase tax revenues, which is good for everyone. In addition, demographic changes are leading to the need for more direct care workers, many of whom will depend upon transportation options to get to work. Our hotline is receiving more and more calls from people with disabilities who are losing public transportation resources in their communities resulting in people becoming unable to get to work.

### *Health Benefits*

The affects of aging and chronic conditions can have significant health and wellness implications that can be mitigated by access to transit and livable communities. The Centers for Disease Control recommend that adults average at least 22 minutes per day of moderate physical activity such as walking. In a 2010 APTA study, Litman found that universal and neighborhood design features that support transit, such as walkability and mixed land use, also support public health. Of people with safe places to walk within ten minutes of home, 43% achieve physical activity targets, compared with just 27% of less walkable area residents. Sustaining or improving public health is not only important for individuals it is important for our economy. Chronic conditions account for 75% of healthcare costs (CDC, 2007). This link between healthy, active lifestyles is well known, yet, 32.5% of older adults over 65 have no leisure time physical activity. If older adults and people with disabilities have access to public transportation, there is a distinct possibility of improved health outcomes.

There are other ways that research suggests there is a direct link between access to transportation and health status. Well documented studies show that driving cessation often results in depression. Depression often

results in reduced health status, and, reduced health status increases healthcare costs. Through our cooperative agreements, Easter Seals, the American Medical Association, and Logisticare are currently working together to study the relationship between transportation access and health and wellness through a study being led by noted public health research Dr. Tom Prohaska of the University of Illinois at Chicago. Dr. Prohaska and colleagues at Texas A&M and the University of California at Berkeley hope to develop an evidence-based model on this relationship. In addition, an important CDC health aging research initiative – the Healthy Aging Network – has recognized the importance of mobility in terms of access to transportation options for people with disabilities and older adults. According to Cecil B. Wilson, former President of the American Medical Association, “Approximately 2.6 million adults in the U.S. don’t get the health care they need because they don’t have transportation. Understanding the relationship between access to transportation and access to care is key to helping patients get the care they need.”

### *Community Living & Long-Term Services and Supports Benefits*

As the country celebrated the Olmstead decision last week, it reminds us of the importance of a strong home and community-based system of services and supports for people with disabilities. The law of our land reaffirms the civil rights of people with disabilities including the right to live in the least restrictive setting. At the same time, legislative advances are enabling a better home and community-based long-term services and supports system. In addition to the formal long-term services and supports system, there is approximately \$375 billion in long-term services and supports being provided by family caregivers, almost four times the amount provided by Medicaid. Access to supportive services such as transportation is critical to the success of both our formal and informal long-term services and supports systems. A recent National Association of Area Agencies on Aging study funded by the Metlife Foundation found that transportation was one of the top three issues governmental agencies around the country found was critical for ensuring their communities were supportive of the aging of their citizens. The strong partnership between the Federal Transit Administration and the Administration on Aging is seeking to assist in addressing the increasing transportation needs of older adults as transportation is the second largest expenditure in the Older Americans Act.

Though a number of federal programs increase access to community living for people with disabilities and older adults, gaps remain. Medicaid transportation is an essential link to covered medical services such as dialysis, yet for people who need dialysis treatment and are not on Medicaid, options are scarce. We hear stories all of the time from community service providers and public transit officials about their concerns for ensuring access to life-saving services such as dialysis.

### *Caregiver and Employer Benefits*

Eighty percent of people older than 60 are living with one chronic illness, and 50% of people older than 60 are living with two chronic illnesses (CDC, 2003). When older adults can no longer drive due to a disability, they often rely on family caregivers to provide transportation. This poses significant challenges for families and businesses. One of the number one reasons people take time off work is to take a loved one who cannot drive somewhere. One Metlife study found the caregiving cost to employers due to decreased productivity was \$36.3 billion annually. Caregivers themselves may face a faster health decline after years of supporting a loved one with a disability. Often, strong community resources that help caregivers like transportation resources to respite services such as adult day healthcare give a caregiver a much-needed break that rejuvenates them.

Some programs, such as the New Freedom Program (Section 5317) that have helped develop specialized approaches to increasing community transportation are small, yet have been very effective. Many states and localities have been able to develop mobility management programs and reduce costly ADA paratransit

services by developing choice demand-response services, creating public/private partnerships, or utilizing the power of intelligent transportation systems technology. These programs promote a strong partnership between nonprofit providers and transit providers that has been a long-standing mainstay of our community system. In one community where public transit had to cut some routes, the mobility manager worked with local nonprofit providers to ensure that everyone who depended upon the routes that were cut were given other transportation options so they could continue to stay mobile.

As the nation ages and more demand is put on these specialized systems, our citizens and communities tell us that they need the Administration, Congress, State and local governments, and local transit and human service providers to work together to increase the accessibility of our nation's transportation network and increase the mobility of all Americans. This not a time to put further stresses on this incredibly important system or further reduce funding. Communities have already begun the important work of coordinating and leveraging their assets to reduce costs through increases in efficiencies. The need to ensure that we do not have three buses going through the same neighborhood picking up passengers in the same hour is well understood and, in many communities, being very effectively addressed. Community coalition building must continue and we need more people who are affected by program and policy decisions to be at the table. Based on our community coordination and coalition building activities, we found a number of successes with creating systems change.

### Best Practices in Human Services Transportation

For over ten years, Easter Seals Project ACTION has led coordination and coalition building events with over 149 community-based teams. We also hold training programs on travel training and outreach to community planning organizations to discuss the importance of addressing accessibility in sustainable community projects. The best practices we see in these areas are:

- Involvement of older adults and people with disabilities in coordination activities, especially those who use or would use public transportation if it were available and accessible;
- Coalition building between community nonprofit providers, public/private partnerships and public transit providers;
- The development of cross-functional transit coordination plans that maximize the use of community transportation resources;
- Person-directed mobility management;
- Innovative approaches to rural transportation;
- Travel training;
- Coordination between metropolitan planning organizations and local community organizations, especially human services providers; and,
- Volunteer driving programs.

Based on these best practices, Easter Seals offers the following priorities for the reauthorization of Federal Transit Administration programs and other surface transportation programs.

### Easter Seals Policy Recommendations for Transportation Reauthorization

#### Access to Transit Options

People with disabilities and older adults are disproportionately reliant on public transportation. If access to transit programs in all areas of the country, including formula grants for urbanized and rural areas and others that provide more targeted funding to vulnerable population groups such as people with disabilities and older adults, is increased, then people with disabilities and older adults will benefit. As the population ages, more people are going to be relying on public transportation options to maintain their mobility thereby increasing demand. However, many older adults will find that transit options are not available in their community as they age and potentially need to cease driving. In fact, according to the recent Transportation for America report “Aging in Place, Stuck Without Options”, by 2015, more than 15.5 million Americans 65 and older will live in communities where public transportation service is poor or non-existent. Increasing transit services in communities would allow more transit providers to utilize intelligent transportation systems (ITS) to create greater mobility. In addition, more flexibility in funding, particularly using 5310 funding for operating assistance would be a great help to utilizing dollars more effectively. It is critical that we invest in transit at a level that will meet the growing demand for services and allows for affordable, accessible, efficient, and reliable transportation options for all Americans.

Although there are challenging economic times, it is critical that we invest in this important area. If resources for general and specialized transit were significantly reduced more people with disabilities and older adults would be stranded and isolated. All of the advances we have made over the last several years in providing innovative and cost-effective approaches to providing mobility options as well as the planning and coordination efforts that have helped to achieve efficiencies could be at risk if there are significant reductions in resources.

### **Consolidation**

Efforts to streamline transportation programs to create efficiencies and minimize administrative burden are laudable and necessary in the current economic environment. However, we urge that consolidation efforts be undertaken very cautiously and that protections be put in place to assure that needed services are not lost in the process.

The most prominent discussions around consolidation seem to focus on programs that serve unique needs of people with disabilities, older adults and low-income individuals, particularly the 5310 program, New Freedom Program and the Job Access Reverse Commute (JARC) program. While there are many overlapping issues affecting all of these populations, there are also some distinct needs and competing interests that need to be taken into account in any consolidation discussion. It is critical that there be assurances that projects in consolidated programs continue to address the sometimes-unique needs of these different populations. Without some protections to assure that everyone’s needs are represented fairly in the decision-making and priority setting process, one or more of these communities could literally be left behind. There are some specific things in the planning process that might make sense to help create these protections.

Another issue to consider is the primary role that the 5310 and New Freedom programs have played in helping assure that people with disabilities and older adults have access to services. 5310 has evolved to be a real lifeline for nonprofit service providers and we should do nothing to erode that. The 5310 program is often the sole resource that service providers have to make sure that people are able to attend their programs and participate in healthcare, respite, social and other activities. This partnership between nonprofit service providers and transit also allows 5310 dollars to go further as they are bundled with philanthropic and other private dollars to create better service. We fear that in consolidation, the balance of power in decision-making would mean that transit agencies would be less likely to pass through 5310 funding to nonprofit

providers and instead create new programs of their own or support existing targeted programs, especially in these very tough fiscal times. The vital partnership between transit agencies and nonprofit service providers that 5310 has created is successful and must be protected. In addition, the New Freedom Program has been used to initiate cost-effective consumer responsive options such as dial-a-ride, taxi vouchers and volunteer driver programs, not just fixed route transit. Having resources that expand mobility options beyond fixed-route transit is something that needs to be continued in any consolidation discussions.

Finally, we recommend that any consolidation of programs should make sure that the resulting consolidated program provides at least the current level of services and support to providers and riders that the programs would have separately.

## **Planning**

One of the very positive things to come out of SAFETEA-LU has been the consolidated human services planning process required for New Freedom, 5310 and JARC funding. We have seen tremendous progress in getting more people with disabilities, older adults and the people who serve them to the table to help create the priorities for spending. In this reauthorization, we would like to see this process strengthened even further. Easter Seals Project ACTION and the National Resource Center at the Community Transportation Association of America (CTAA) have supported many coordination and coalition building activities. Attendees regularly express the value they received from these programs.

Planning must be accountable, transparent, inclusive, and have real measures of expected outcomes so there is a reference point to define success. In addition, planning processes for different aspects of mobility, including highway planning, should be consistent. In order to do this, more direction is needed on what a truly inclusive process means and further oversight of the process of planning, not just the outcome. In order to make sure that the disability and aging communities are genuinely part of the process, it takes real outreach efforts from transit and planning agencies. Although we all know how critical transportation is to the lives of individuals, it is often not the primary area of expertise for most advocates and individuals who are most likely to be part of the planning process. Too often, I hear that transit planners tried to reach out but were not able to get people to participate. This is not necessarily due to apathy, but often to competing priorities and a lack of understanding about transportation systems and other things that are often second nature to transit and planning authorities.

We recommend that designated agencies be charged with documenting how input from stakeholders was considered in the development of the coordinated transportation plan. The Department of Transportation should review those efforts to assure that they are sufficient and that every effort was made to enable input. Stakeholders should also have an opportunity to review and comment on the plan before it is finalized. We also continue to call for all plans to be quickly and easily available to the public in one central location.

In addition to the specific human services planning process, Easter Seals sees great opportunity to use overall community planning to assure that people with disabilities and older adults are able to have the greatest mobility and independence possible. Efforts such as the Administration's liveable community initiative that help communities think holistically about the entire community environment and plan for the needs of all citizens are critical to people with disabilities and older adults. If we are able to assure that pedestrian access routes, transit stations, bus stops, and other aspects of the community work for people with disabilities and older adults, we will increase the mobility of the entire community. Comprehensive, quality community planning efforts should be applauded and continued.

## **Mobility Management**

Mobility management is a critical concept that needs to be enhanced in this reauthorization. Mobility management focuses on the individual and identifies the best transportation options, both public and private, for that person's travel needs. Mobility management improves transportation options for those utilizing community services, workforce development centers, education, and health services and ultimately improves mobility options for everyone. Mobility management services also help to maximize the use of Intelligent Transportation Systems and other technology to enhance mobility and creates one-call systems that allow greater ease-of-use for customers. In addition, mobility management includes people with disabilities and older adults in the design of transportation options.

Person-directed mobility management includes:

- identifying needed services and transportation needed to access those services;
- assessing community transportation resources;
- assessing an individual's ability to use those resources;
- filling service gaps, and;
- providing agencies and individuals with information and training on using local transportation.

SAFETEA-LU established an inclusive concept of mobility management, which is an available capital expense throughout the federal transit program, including Section 5310. Unfortunately, only minimal technical assistance is currently available to help transportation programs develop mobility management efforts and adapt them to people's unique needs. In addition, there are few incentives for local providers to adopt mobility management strategies instead of investing more in vans or buses, since all are treated equally as capital expenses. Mobility management services must be enhanced to better help transit and human services systems meet the needs of people with disabilities and older adults by establishing a dedicated resource for these services. We also recommend that any resources available for mobility management require that human service providers be a critical part of the delivery of services.

The additional advantage to having mobility management resources in as many communities as possible is in the planning process. Once mobility management is set up in a community, there is a single entity charged with knowing the entire array of transportation resources in that community, both public and private. This will help minimize duplication and unnecessary use of federal and state dollars if there are private resources already available. Recently, the Partnership for Mobility Management hosted the first ever Mobility Managers' Conference at the CTAA Expo. CTAA, APTA and Easter Seals are three of the founding members of the partnership.

### **Technical Assistance and Education**

While great progress has been made in the accessibility of transportation options since the passage of the Americans with Disabilities Act in 1990; advances in technology, changes in consumer demand, continuing changes in societal attitudes about people with disabilities, and the aging of America all speak to the continued need for targeted technical assistance and education to help people with disabilities, older adults, and communities work together to overcome barriers to mobility.

The funding level for Project ACTION has remained static since 1998. At the same time, the increasing complexity of mobility issues facing people with disabilities and transit providers, as well as the increased prominence of the work done by Project ACTION, has greatly increased demand. By any measure, Project ACTION has done an exemplary job in providing quality, needed and targeted technical assistance, training and education with limited resources and has managed to significantly expand its reach by increasing efficiency and intelligent use of technologies such as on-line training to expand their reach. Another thing

that has helped Project ACTION continue to thrive has been partnerships with other federal agencies and private sector entities to undertake targeted projects. These partnerships are critical in not only expanding the reach of Project ACTION, but also in assuring that mobility for people with disabilities is addressed in a variety of venues. However, without additional resources, Project ACTION will not be able to continue to meet the broad range of need that is emerging and quality and access to services will suffer.

The NCST, originally authorized under SAFETEA-LU, has proven to be a valuable resource for helping communities meet the needs of a growing aging population. Since beginning operations in 2007, the NCST has provided necessary technical assistance on best practices for non-governmental organizations and public agencies and brought together aging and transportation professionals in order to better serve the transportation needs of older adults. Increased funding for the program would begin to help meet existing demand for technical assistance and education, and would increase the ability of the center to provide direct support to more communities who are trying to meet existing demands and help promote cost-effective and coordinated mobility solutions to meet the growing demand for services.

### Summary

Thank you very much for this opportunity to provide input into this critically important process. We feel that if we continue to invest in our nation's transit providers, we will be well positioned to deliver the needed services safely and efficiently in communities of all sizes. We hope the success stories and data underscore the employment, health, community living, long-term services and supports and employer and caregiver benefits of continuing to invest in a robust, national, multi-modal transportation system. This investment is good for businesses, it is good for state and federal economies, and, even most importantly, it is good for our citizens. Public transportation services increase:

- Health - increased quality of life (including for caregivers)
- Access to Community Based long-term care
- Civic engagement – is boosts volunteerism
- Socio-emotional connections enabling empowerment, independence
- Access to jobs for people who cannot drive.

As Jim Williams, our Easter Seals President and CEO says, “accessible transportation for people with disabilities is an important part of Easter Seals’ mission to help people with disabilities and their families live, learn, work, and play in the communities of their choice.” We know that all of our partners in the transit, disability, human services, medical and healthcare world would echo the same sentiment – rides do change lives.