

# TRANSPORTATION AND THE ELDERLY: PROBLEMS AND PROGRESS

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## HEARINGS BEFORE THE SPECIAL COMMITTEE ON AGING UNITED STATES SENATE NINETY-THIRD CONGRESS SECOND SESSION

PART 1—WASHINGTON, D.C.

FEBRUARY 25, 1974



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### Transportation and the Elderly : Problems and Progress

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Part 2. Washington, D.C., February 27, 1974  
Part 3. Washington, D.C., February 28, 1974  
Part 4. Washington, D.C., April 9, 1974

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\*Appointed January 25, 1974, to fill vacancy on committee by resignation of William B. Sarbe (R. Ohio) from the Senate, January 3, 1974.

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## TRANSPORTATION AND THE ELDERLY: PROBLEMS AND PROGRESS

MONDAY, FEBRUARY 25, 1974

U.S. SENATE,  
SPECIAL COMMITTEE ON AGING,  
Washington, D.C.

The committee met, pursuant to notice, in Room 1318, Dirksen Office Building, Hon. Lawton Chiles presiding.

Present: Senators Chiles, Randolph, Gurney, Brock, Stafford, and Pell.

Also present: William E. Oriol, staff director; George Cronin, professional staff member; John Guy Miller, minority staff director; Margaret Fayé, minority staff member; Patricia Oriol, chief clerk; Gerald Strickler, printing assistant; Yvonne McCoy, assistant chief clerk; and Joan Merrigan, clerk.

### OPENING STATEMENT BY SENATOR LAWTON CHILES, PRESIDING

Senator CHILES. Good morning. Today and again on Wednesday and Thursday the U.S. Senate Special Committee on Aging will examine "Transportation and the Elderly: Problems and Progress."

Chairman Frank Church asked me to preside at these hearings earlier this year after I suggested that the committee look, once again, into a subject of major concern to our aging and aged population.

I look forward to testimony by the elderly themselves, by organizations representing older Americans, by State and local officials, and by the administration.

Three years ago, this committee, in a report, declared that there was a crisis in mobility among the older population of this Nation. In December 1971, delegates at the White House Conference on Aging came to much the same conclusion. Their report said:

For many of the elderly, the lack of transportation itself is the problem; for others, it is the lack of money for bus fares, the lack of available services to places they want and need to reach, the design and service features of our transportation systems.

And furthermore:

To the extent the aged are denied transportation services they are denied full participation in meaningful community life.

The problems so vigorously discussed at the White House Conference exist in cities, suburbs, and rural areas. Only about 47 percent of the elderly are licensed to drive, but of course in these days of gasoline shortages that's no guarantee that the driver will get where he wants to go.

Most older persons must rely on public transportation systems—where they exist—to give them the means to reach shops, churches, doctors' offices or clinics, and their friends. Foot power, as at least one of our witnesses will tell us, is a major means of transportation, at least for those whose neighborhoods are still fairly coherent. But the closing of a single retail store or any other vital facility can change a neighborhood overnight. For many residents, it would be time to move. For many elderly, a move may be impossible.

These hearings have as their subtitle, "Problems and Progress."

The problems, as we will see, certainly still exist. The progress is still in its early stages, but encouraging. In Florida, for example, State agencies and a university are working together, by means of annual conferences and other efforts, to develop a statewide program for the transportation of the disadvantaged. Several pilot programs are yielding valuable lessons and providing essential services in some parts of the State. In other States, there are other demonstration projects.

But all in all, the progress is much too slow, especially in view of congressional enactments clearly calling for actions intended to ease the crisis in mobility for older Americans.

#### CONGRESSIONAL ENACTMENTS

(1) In a 1970 amendment to the Urban Mass Transportation Act, Congress stated:

It is hereby declared to be the national policy that the elderly and handicapped persons have the same right as other persons to utilize mass transportation facilities and services.

(2) The Older Americans Comprehensive Services Amendments of 1973 provides for study and demonstration projects related to transportation. In addition, the amendments directed the Commissioner on Aging to conduct a survey which would emphasize "solutions that are practicable and can be implemented in a timely fashion." The Commissioner was to consult first with the Department of Transportation and HUD, and he was to give careful attention to the possible usefulness of all components of public transportation systems. Clearly, Congress did not intend this survey to be "just another study." It wanted the facts that could enable early action.

(3) Another major enactment occurred last year, when the Federal Aid Highway Act was amended to enable States to use part of the highway funding for public transportation purposes. The act included three provisions of special relevance to this hearing: (A) It required that buses and other transit vehicles using Federal financial assistance shall be planned and designed for easy utilization by the elderly and the handicapped. (B) The act also enabled the DOT Secretary to make grants and loans to private nonprofit corporations and associations—a provision which could foster development of transportation subsystems designed to help the handicapped and the isolated elderly. (C) It also provides for a rural highway public transportation demonstration program.

It's still too early to ask DOT for a report on progress made under the Federal Highway Act, although I do hope that DOT witnesses will tell us about their intentions when they testify on Thursday.

I will also ask Dr. Arthur Flemming, Commissioner of Aging, for information about plans to implement provisions of the Older Americans Act amendments. Frankly, I was very much disappointed by last month's budget request, which failed to request funding for the transportation model projects and survey I mentioned before.

And I will also ask all administration witnesses for their comments on how the President's new transportation program and the probable enactment of legislation to provide operating subsidies for transit systems can be put to work on behalf of older Americans.

When I first proposed these hearings, I did not intend to dig deeply into the energy crisis which now so concerns us all.

#### SOME PROGRAMS SHUT DOWN

In the weeks since then, however, the committee has received reports indicating that some programs designed to serve the elderly are being shut down or sharply curtailed. Volunteer workers, in some cases, can't find the gasoline they need to reach older people in need of their help. In my home State, the St. Petersburg area seems especially hard hit. Many older persons are, in effect, marooned. Distances are too great for them to walk, gasoline stations are closing; and transportation systems don't meet their needs.

I will look forward with special interest, therefore, to the testimony from the Federal Energy Office.

Commissioner Flemming has already assured the committee that he is seeking interagency action to help deal with the crisis.

I hope that such action is soon forthcoming. I heartily agree with the statement made by Commissioner Flemming at his confirmation hearing last year:

"Transportation—or the lack of it—is one of the most serious problems facing older persons today."

That statement is even truer today than it was then.

Senator Frank Church, chairman of the committee, has a statement for the record. Unfortunately, he could not be here. Without objection, his statement will be inserted at this point in the record.

[The statement follows:]

#### STATEMENT OF SENATOR FRANK CHURCH

More than 3 years ago, the Senate Special Committee on Aging issued a report declaring that there was a "crisis in mobility" among older Americans of this Nation.

That report was directed not only at the Congress and the executive branch, but also at the planners and potential delegates to a White House Conference on Aging scheduled to take place in December 1971.

At the White House Conference, participants in a section on transportation emphatically concurred with the Committee on Aging.

They declared: "Meeting the transportation needs is a problem of vital concern. . . . The elderly, like everyone in society, must depend upon the ability to travel for acquiring the basic necessities of food, clothing, and shelter as well as employment and medical care. Their ability to travel is also necessary for their participation in spiritual, recreational, and other social activities. To the extent the aged are denied transportation services, they are denied full participation in meaningful community life."

Two years have passed since the White House Conference, and some progress has been made. I am glad that the title of this hearing acknowledges that progress has occurred but it also acknowledges that problems still persist.

As I visit communities in Idaho, I meet many older persons who could get along quite well if only they could be assured of good transportation at reasonable cost. Many have automobiles but wonder how long they can continue to drive. And now, with a gasoline shortage, they have additional reason to wonder.

I am impressed, therefore, by the heavy emphasis that the Administration on Aging has placed upon transportation in its guidelines and statements of general intent. But I wonder just what the AoA is doing to enable program directors in Idaho and elsewhere to provide transportation where it is needed for the successful operation of those programs. I am disappointed, as well, by the failure of the administration to include in its budget request any funds at all for model transportation and an interagency survey of transportation, as mandated in the Older Americans Act amendments of last year.

I am sure that the hearings will provide valuable testimony on that issue and also upon several important provisions in last year's Federal Highway Act. I am especially interested in a provision of that act which provides for demonstration transportation programs for the elderly and the handicapped in rural areas.

To Senator CHILES, who is conducting these hearings at my request, I would like to extend my thanks for making the suggestion earlier this year that the committee look once again into issues affecting the mobility of older Americans. He has reason to be proud of the progress being made in his own State of Florida, where State and Federal officials are working together on several important joint projects. He has also indicated a special interest in the problems being caused to the elderly by our fuel and energy crisis. The elderly should not be forgotten as the Nation meets this latest challenge, and I am sure that they will not be forgotten in the testimony during these 3 days of hearings.

Senator CHILES. Senator Harrison A. Williams, former chairman of the committee, also has a statement for the record. He, also, could not be with us today. Without objection, his statement will be inserted in the record.

[The statement follows:]

#### STATEMENT OF SENATOR HARRISON A. WILLIAMS

Mr. Chairman, I have a brief statement on the issues under consideration at these timely and significant hearings.

As a former chairman of this committee and now as ranking member, I have seen transportation emerge as a priority matter of concern among older Americans and officials working on their behalf.

In a foreword to the committee report on mobility problems of the elderly in December 1970, I wrote that the purpose of the report was:

"To document the fact that transportation inadequacies are intensifying many other difficult problems faced by the elderly in the United States today. Low-income individuals are hardest-hit, but so are those with fair-sized retirement incomes.

"Transportation is the lifeline to services they did not need until they became old. Without mobility, they are denied much else."

Considerable attention was given in that report to a provision of the Urban Mass Transportation Assistance Act of 1970 which said:

"It is hereby declared to be the national policy that elderly and handicapped persons have the same right as other persons to utilize mass transportation facilities and services; that special efforts shall be made in the planning and design of mass transportation facilities and services so that the availability to elderly and handicapped persons of mass transportation which they can effectively utilize will be assured; and that all Federal programs offering assistance in the field of mass transportation (including the programs under this act) should contain provisions implementing this policy."

At that time, as chairman of the Committee on Aging and as the originator of the urban transit legislation in question, I welcomed this declaration because it clearly stated the congressional conviction that transportation systems should serve all the people.



Since 1970, the Department of Transportation has conducted several surveys and pilot projects which have responded somewhat to the mandate of Public Law 91-453. I have been assured by DOT that it takes the language in that law very seriously and that its intentions are good. However, I wish that their progress could be more certain and more swift.

Moreover, I am puzzled and disappointed by at least one of the features of the legislation submitted by the administration last week to fulfill its pledge for broadened support to public transportation systems.

I'm referring to the fact that this legislation, as now written, significantly alters the language which I have just read from P.L. 91-453.

If it is the intention of the administration to withdraw from the commitment so clearly expressed 4 years ago, I want to know why.

If the administration has some other plan to comply with congressional direction, I want to know what it is.

Gains in assuring transportation for the elderly are too slow now; they should not further be hindered by uncertainties about administration policy.

Furthermore, as chairman of the Senate Committee on Labor and Public Welfare, I would like the representatives of the Administration on Aging to resolve another puzzle for me. I'm referring to the fact that the budget submitted a few weeks ago for fiscal 1975 makes no funding request for a transportation survey and pilot projects authorized under the 1973 Older Americans Comprehensive Services Amendments. Those amendments were considered long and hard by committees in both the Senate and House, and careful attention was given to transportation problems of the elderly. I would like to know why the administration has not asked for the means to carry out an important provision of the amendments.

Finally, Mr. Chairman, I would like to submit for the record a New York Times article of February 22 which sums up the situation on another transportation front. I'm referring to the efforts on behalf of my emergency mass transit aid bill. It makes several important points about the need for final action on that legislation.

I welcome the opportunity to add my views to your hearing record, and I commend Senator Church and Senator Chiles for taking up such a vital subject at this time.

[The article referred to by Senator Williams follows:]

[From the New York Times, Feb. 22, 1974]

#### TRANSIT BREAKTHROUGH

The emergency mass-transit aid bill agreed upon by a House-Senate conference committee represents an extraordinary breakthrough on behalf of public transportation throughout the country. Its benefits would be of special value in the New York metropolitan area, which accounts for 40 percent of the country's transit riders.

Under a revised allocations formula, based on ridership and vehicle-miles traveled as well as on population, the \$800-million bill would give New York City an estimated \$150 million in operating subsidies. This is more than double the amount offered in alternative legislation proposed by President Nixon. When added to existing and promised state assistance, the projected grant would put the city within striking distance of the amount needed to save the 35-cent fare.

Although Administration aides already are reportedly lobbying against the bill, Senator Harrison A. Williams Jr. and Representative Joseph G. Minish of New Jersey, its sponsors, voice confidence of early passage. No justification exists for a threatened Presidential veto, especially since the measure has been modified to accommodate Mr. Nixon's view that local communities should have the option of spending their share of Federal funds on capital construction rather than for operations. Moreover, the President himself has indicated a willingness to modify the unfair population formula along lines urged by the conference committee.

The Minish-Williams bill admirably fulfills the Administration's stated objective of helping to ease the energy crisis through increased Federal support for mass transit, including aid in meeting operating deficits. The measure offers the crucial advantage of providing immediate relief for hard-pressed

transit systems across the country whereas the more complex Presidential transportation package may take months, even years, for passage.

With the gasoline shortage already needlessly aggravated by governmental mismanagement, there can be no excuse for further delay in making this soundly conceived emergency aid available to the nation's long-neglected mass transit systems.

Senator CHILES. Senator Hiram L. Fong, ranking minority member of the committee, has a statement for the record. Without objection, his statement will be inserted at this point in the record.

[The statement follows:]

#### STATEMENT OF SENATOR HIRAM L. FONG

Transportation problems experienced by many older Americans have been most serious for a long time.

Development of workable solutions to them deserves highest priority. This is so in part because the problem is so widespread and in part because of the intense personal loss from isolation and loneliness imposed on individuals by the transportation difficulties they face.

In our automobile oriented society, the problems of isolation and loneliness have assumed increasingly serious proportions for the elderly. These problems strike most harshly at persons of most advanced years and lowest incomes, but they can be severe for many other older Americans.

The transportation problem varies sharply between different types of communities. The form it takes, if not the result, is much different in metropolitan areas from what it is in rural settings. There is a whole range of modifications in the variety of communities which fall between these extremes. In them all, however, the unmet need can assume stark dimensions that are sometimes tragic.

Because of the problem's complex nature and the frequent inability of its victims to speak out effectively about their plights, transportation has too often been ignored by our society in its concern for older Americans. It has been pretty well demonstrated, however, that the need is great. If our objective is to assure older persons honorable lives with dignity and a full sense of worth, the transportation problem should be among the first to which we direct our attention.

I am gratified, therefore, that the Special Committee on Aging Chairman, Senator Frank Church, has seen fit to call the hearings which begin today. I hope the dialog they initiate will be productive. I am pleased at indications that witnesses who are scheduled to appear will offer examples of possible solutions in varying types of settings as well as information about the problem's scope.

That the problem is sharpened by today's energy crisis goes without saying. Even when the current crisis has passed, however, the basic transportation problem will still face our Nation. Meeting both the immediate and long-range need will require full use of America's ingenuity, resourcefulness and cooperative spirit.

I am persuaded that transportation in America is more than a problem of the aged. It obviously hits the old, the poor, and minority groups. But almost all of us, at all ages, have substantial unmet transportation needs.

If any ultimate blessings are to come from our current shortages in petroleum, I would hope that they will include new recognition by all our people that our society must do something to provide new responses to our problem of mobility, both as it affects people and as it affects delivery of goods and services. As a member of the Senate representing Hawaii, a State situated in the middle of the Pacific Ocean, I am especially sensitive to the crucial character of transportation as it affects the lives of all American citizens.

Perhaps the personal difficulties being experienced today by younger people, as the current gasoline shortage imposes unaccustomed restrictions on their own ability to move from place to place, will give them a new understanding of the kinds of problems many elderly have faced for years. Through this frustrating experience, which strikes at all, we may begin to achieve the kind of public recognition necessary to speedy and appropriate action on the serious continuing transportation problems of older Americans.

Senator CHILES. Senator Gurney has a statement.

## STATEMENT BY SENATOR EDWARD J. GURNEY

Senator GURNEY. Mr. Chairman, the problem of inadequate transportation is one which has been experienced by older Americans for years now and I can honestly say that if any good comes from this energy crisis it will include the proving to all Americans what older Americans have known for years now—if we can't get from here to there, hardship, loneliness and a deep sense of isolation result.

Transportation, in my view, is a two-fold problem for the elderly: First is the problem of getting back and forth between homes and the grocery store or the drugstore or the doctor's office or trips of necessity. The second problem in transportation is in getting back and forth from city to city, to visit the family or to visit friends.

For senior citizens in large cities with adequate mass transit systems, transportation back and forth to the store may not be as convenient, but it will probably still be possible. Visits out of town, however, will be another story. For senior citizens in small towns and rural areas, however, the energy crisis will be a crisis in the true sense of the word, since in a great many of those small towns, the automobile is the only way to go. In those places, an outing to the grocery store is a major undertaking, and no transportation means no food. It is with a strong sense of urgency and concern, then, that I look forward to our hearings this week. I am hopeful that our witnesses will provide us not only with a focus on the true scope of the energy crisis and its effect on transportation for older Americans, but will give us some down to earth suggestions and alternatives, so that we can meet this energy crisis headon.

I am grateful to the chairman, Mr. Church, for calling the hearings, and I hope that the testimony, suggestions, and recommendations made this week will be instrumental in meeting transportation needs which will exist long after the crisis has passed.

Senator CHILES. Thank you, Senator.

Senator Randolph has a statement.

## STATEMENT BY SENATOR JENNINGS RANDOLPH

Senator RANDOLPH. Thank you very much, Mr. Chairman. I congratulate you for your leadership in these hearings and I am gratified that among the witnesses are those from West Virginia, who have an intense interest in having the record made complete. I know you will have it made complete in this process of talking through those who represent our elderly population, a problem that often has been overlooked.

The transportation problems of older Americans are very real and without attempting to commend West Virginians too much, I would say the record indicates that we, in a sense, have taken action on this matter at a date earlier than the hearing conducted here today.

I recall, Mr. Chairman, that in October of 1970, it was my responsibility, representing this committee, as you do today, to go into the State of West Virginia and hold hearings on the transportation problems of older Americans in rural areas.

I recognize that rural areas are certainly not uncommon to Florida and the two Senators from that State understand the problems that affect their people.

I know that the Senator from Tennessee, Mr. Brock, has a terrain that would be comparable to the West Virginia terrain but whereas Florida would not have the problem actually of the transportation, the movement of the vehicles that we have in West Virginia or Tennessee; our problems are accentuated to a degree.

I remember when we had the testimony in a small community at the end of a very bumpy, circuitous road. That town had a name of "Dog Bone" and it was a good site for helpful information—not only about people—but from the people affected by transportation inadequacies.

I remember the testimony of Joan Ross as she described the actual findings of 4,500 elderly people in three counties. We were meeting in Lincoln County and I am not sure what the other counties were in the survey, but she said you live up a dirt road in a hollow and there are the 52 percent that have to take medications and who have trouble getting their medications because of the problem of transportation.

#### INCOME DOESN'T COVER EXPENSES

Public transportation is virtually unknown and nonexistent and if a friend can take you to take medication, you will probably be charged anywhere from \$5 to \$22 for the service. Your monthly income can be \$56 and you could be among the 53 percent who said their income just did not cover expenses.

I remember another witness who said that many older people that do not go to a doctor's office or clinic because they do not have the money. One man who did go used up one-third of his entire month's Social Security check for just, Mr. Chairman, the transportation, the trip, to see the doctor, and he had it itemized this way: \$9.50 for the driving, \$1 for the driver's lunch because he had to wait all day at the doctor's office, \$11 for the doctor's examination and the laboratory test, \$9.35 for two prescriptions. Well, the total for the day was \$31.30.

Now, none of this, I say to my colleagues, was covered by Medicaid. The time was 10½ hours, after he had left home at 7:30, until he returned to where he lived. Of course, the doctor—and I am not critical of doctors—I remember a doctor testifying at this hearing who said that his door was never locked; it was open 24 hours a day and he constantly was seeing people. He is an elderly man. Very, very few doctors in that rural section of West Virginia.

This is not in the statement that I will place in the record but I hope it will be indicated now as I talk extemporaneously. He said, you know, the people who come to me, they have many problems but they have few complaints. I think if we read that through and through and ponder on it, we will recognize the strength of these people in the mountains. Their desire to do for themselves as much as they can and yet, the total for that day was \$31.30 and I repeat, not covered by Medicare, that elderly person had been away from home for 10½ hours. He was told by the physician to return in 2

weeks but, of course, that man knew that he could not afford to come in 2 weeks; it would be a month before he could return for that medication and the attention from the doctor.

I have mentioned these matters, provincial in a sense, to West Virginia and our hill country, because there is the added ingredient of difficulty from the standpoint of the very terrain itself in permitting persons the transportation which is necessary.

#### BALANCED TRANSPORTATION SYSTEM

I do want to add, and I will place in the record, comments that I have given in the formal presentation but I wish to mention that we have a special concern as we wrote the Federal Aid Highway Act of last year and that was for a balanced transportation system, one that takes the best of all of our resources and immobility and I think there is absolutely, Mr. Chairman and my colleagues, no way to consider any transportation network that is truly satisfactory if it is unsuitable and in fact sometimes it is even hostile, it seems, to the needs of our older and handicapped citizens.

I have that thought in mind, as I am sure my colleagues do, during these very important hearings.

I thank you, Mr. Chairman.

Senator GURNEY. I would like to add for the record we certainly welcome Senator Brock here this morning. He is a new member of the full committee, taking the place of Senator Saxbe, who is now Attorney General, and I understand this is the first time you have been able to attend one of the hearings, Senator, and we are glad to have you aboard.

Senator BROCK. I thank you for your welcome. I would like to say I have been listening with a great deal of interest to the Senator from West Virginia. Our hill country is really identical. We have the same mountains and the same kind of people, North Carolina, Tennessee, North Georgia, West Virginia.

I am very familiar with those problems and, as the Senator pointed out, there is no transportation at all back in the hills and hollows and yet, there are some of the proudest, finest people I know, anywhere on the face of our earth and I understand the problem.

Senator CHILES. Senator Stafford, do you have a statement you would like to make for the record?

Senator STAFFORD. Thank you, Mr. Chairman. I am pleased to be here at the opening of these hearings on transportation and the elderly.

As you know, Senator Williams and I were the prime sponsors of the provision in the Older Americans Act which called for study and demonstration projects and transportation for older Americans.

Senator RANDOLPH. Senator Chiles, has opened our hearing with an excellent statement and the statements from Senators Gurney and Brock are helpful as we begin to lay the background of the interest of the people, the Members here in the testimony that is to be given.

William R. Hutton is the executive director of the National Council of Senior Citizens. I know, Mr. Hutton, that you are accompanied

by Mrs. Kirkpatrick and she does represent West Virginia today. She comes from Marion County in our State, from the community of Fairview and is employed in our city, which is Fairmont.

Also there is a senior aide, Mrs. Anna E. Baker, from Denver, Colo., and I am sure she has the background and the actual case experience which will help us today, and then Elliot Conway, another senior aide, I feel, at home with seniors. I certainly do.

You gentlemen are much younger on the committee and I trust you understand my reference, not seniority of the committee but another kind that comes with twelve months added on to twelve months, but he is from Muscle Shoals, Ala.

We are gratified with the interest and experience that you will help the committee with your testimony today.

Mr. Hutton, you do as you care to do in connection with the testimony of yourself and the witnesses with you.

**STATEMENT OF WILLIAM R. HUTTON, EXECUTIVE DIRECTOR,  
NATIONAL COUNCIL OF SENIOR CITIZENS, INC.**

Mr. HUTTON. Thank you, Senator. As you say, my name is William Hutton. I am the executive director of the National Council of Senior Citizens.

With me today, is a project director and two senior aides of a program which we call "Senior Aides," a senior citizen's community service program, which operates in some 36 major cities across the country.

One of these programs is in the State of Tennessee, Senator Brock, another in Florida, and a third in West Virginia. We have programs in 11 other States across the land.

Perhaps, Mr. Chairman, if I may, it might be more useful if I could ask you to put my testimony into the record \* and I will seek to summarize this testimony, so we can have a little more time for the senior aides who are right on the spot in terms of the problems of older people.

Senator RANDOLPH. Your request will be granted and your statement will be included in full and you may proceed in your own way. I like the manner in which you approach us. You try not only to conserve time but you are making more meaningful testimony for your colleagues.

Mr. HUTTON. Thank you. Frankly, the burden of our testimony is that increasing numbers of older men and women are virtually prisoners in their own homes because of the lack of adequate transportation services. While we praise some of the efforts by Congress to improve the situation and, particularly, we cite last year's comprehensive services amendments to the Older Americans Act for a survey of community transportation systems and demonstration projects, looking to improve transportation services, the fact has been pointed out already by the chairman, the Nixon administration budget for the year ending June 30, 1975, proposes not one penny to implement this very important legislation.

\*See statement, p. 11.

We believe, in fact, that the energy crisis, as such, is just exacerbated for the elderly already impossible situation and any continued neglect of this situation, transportation for the older people of this country, by either the White House or by the Congress, is, in the opinion of our older people, going to lessen the level of opinion which these two arms of Government are now held by the general public.

#### ESSENTIAL TRIPS CAN BE MAJOR HURDLES

The fact is picking up a prescription, going to a doctor's office, or a hospital, cashing a Social Security check, shopping for food, for clothing, or other necessities, in fact, getting to work—if that is available . . . these essential trips can be major hurdles without dependable transportation. Simply providing funds for social service programs, without requiring that transportation be an integral part of such a transportation, only solve half of the problem.

Our testimony reports that in some areas local clubs affiliated with the National Council of Senior Citizens and other groups have tried to interest and initiate their own special transportation for the elderly and it is a very difficult proposition.

Where they have been able to get hold of some public funds, they have been able to make them work. One such project in New York State, is in Steuben County. Public transportation is provided by small station wagons providing transportation for needy older people, 55 years of age and over. The whole county area is about 1,500 square miles.

Older people are transported to the drugstore, markets, and public places. These little buses are called the "Elderberry Express." While some of these transportation ideas have been successful, the fact is there is no real major effort to fund and tackle the problem in the way this country can and should do. This great country can send men to the moon but that has not really done anything this past year to get old people out of the inadequate homes in which they are imprisoned. In essence, that is the burden of the testimony which I have tried to supply.

[The prepared statement of Mr. Hutton follows:]

#### PREPARED STATEMENT OF WILLIAM R. HUTTON

Mr. Chairman: Gentlemen, the National Council of Senior Citizens, representing over three million older Americans is pleased to be afforded the opportunity to testify on the state of transportation as seen through the eyes of older people.

The lack of transportation is like having a modern kitchen with all the latest appliances and no electricity. Lack of transportation is a barrier to obtaining necessities and necessary services, a barrier to socialization, a barrier to partaking in activities, a barrier to mental growth or even keeping one's sanity. Lack of transportation is a cause of stress and worry, a cause of loneliness, a cause of hunger, a cause of undue suffering and, in fact, might be a cause of death.

The elderly in this country are more dependent on transportation provided by other than themselves because of their decreased mobility and smaller incomes as compared to younger people. The change in our life styles, from the extended family to the immediate family, the closing of the corner neighborhood stores in favor of big shopping centers accessible only by autos, the

deterioration of public transportation as the auto became the means of getting about—all these movements have happened during the present elderly's lifetime and has now placed huge burdens and hardships on the older population. Moving oneself from place to place if you are elderly can consume a day's time and a previous day of worry and planning.

We can all think of the many services the elderly need, some of them costing little money, but unless the elderly have a way to get to them, these benefits are lost. If the elderly are kept prisoners in their homes, physical and mental deterioration is rapid which then demands more services. Just taking a small trip can be of therapeutic value. Stimuli is needed to keep any person functioning—we have all heard of putting prisoners in isolation cells to cool them off so to speak. Isolation is one of the cruelest forms of punishment and more and more older people are being subjected to this state.

The isolation and deprivation suffered by elderly people in rural areas is heart rending. The demise of the extended family concept, the younger people moving to urban areas for jobs, the fear of having an accident and having your insurance cut off forever keeps hundreds of rural elderly jailed in their homes. Their friends having the same problems can't really be of much help. Man, the social animal, trapped in solitude, loneliness, a life time of experiences and love, rocking away, back and forth worrying about the how of getting to the grocery store, the doctor's appointment next Thursday, knowing of the senior center in town, but no way to get there, waiting and hoping for what. What if a mini-bus was coming tomorrow morning so he could go to town and maybe just shop or teach a youngster how to bait a hook for fishing, or get a dentist to look at the tooth that prevents him from eating anything chewy.

In 1971 during the White House Conference on Aging, the National Council of Senior Citizens put forth the following as a goal: Transportation services in every community should be sufficient to enable older people to have access to the basic services of their community and to support their needs and their right to participate in social life.

Are we any closer to this goal now than we were three years ago?

If you have ever landed at an airport late at night with no ground transportation in sight to take you to your destination, you may well be able to empathize with the predicament many elderly have to deal with each time a routine errand needs to be made. As you stood in the airport trying to think of who you can dare call at 2:00 in the morning to come to get you, begrudging every taxi cab driver a good night's sleep because you'll be lucky if you make it to your hotel in time to get ready for tomorrow's appointment—that frenzied state is experienced constantly by thousands of older people each and every day.

Picking up a prescription, going to a doctor's office or hospital, cashing a social security check, shopping for food or clothes or other necessities, getting to work if you are lucky enough to find a job and are physically able to work—all these small but needed trips can become major hurdles if dependable transportation is not available.

Simply providing funds for social service programs without requiring that transportation be an integral part of such a project only solves half the problem. In some local areas our affiliated clubs or other groups have tried to initiate special transportation for the elderly.

One such project which is proving a great boon to senior citizens is in Steuben County, New York where there is no public transportation.

The "bus" service—it does not use buses, but small station wagons—one of the few of its kind in the country, provides needed transportation for any senior citizens, 55 and over, so that they can get to doctors, hospitals, nursing homes, drug stores, markets and public and private agencies to receive aid. It is amusingly called "The Elderberry Express" and is funded through an Office of Economic Opportunity grant of \$40,000 for one year. The sum of money being expended is very small considering the Elderberry Express is serving a client group of over 9,000 senior citizens, spread out over 1,400 miles of territory. The dedication and ability of Steuben County Economic Opportunity Program, directed by Ms. Patricia Eaton, is undoubtedly making the dollars go farther. Running on schedules which are distributed to all hospitals, physicians and public agencies and posted on all outside public notice sites, this program has brought needed services within reach of an otherwise isolated older population.



I have heard older people express hope that something will be done about the transportation dilemma because other people are now also experiencing difficulties in getting from one place to another during this energy crisis. Overall dependency on the private automobile will only be decreased when a desirable and dependable alternative method of getting where we need to go is developed. As less than 50% of the people 65 and over are licensed drivers cannot afford to maintain a car and pay the high insurance premiums, the elderly as a whole cannot depend on the luxury of a private car as their means of transportation. Last week while I was discussing my impatience of waiting in line for over an hour to get gas, one of the older people in the office whose only mode of transportation is a bus, spoke up and said, "Is that any different than having to wait in the cold or rain on the weekends for one-half to three-quarters of an hour for a bus and then have to wait again to come back? And that has not just happened in the last couple of months." Good transportation systems must be developed for everyone and as the elderly are more transit dependent than most other groups in our society, special emphasis should be placed on their needs.

Gentlemen, any country that has managed to develop a means of transportation to the moon should be able to take the problems of transportation facing the elderly and others and come up with workable solutions.

The need for more money for operating transit systems has been one of the National Council of Senior Citizens' efforts for some time. As you no doubt know, we recently compiled a voting record of Congress. In both the House and Senate we felt the votes on using Highway Trust Funds for mass transit were very important and therefore included in the Voting Record for each member of Congress.

Not only though do mass transit systems need operating support, they also need to become more flexible in serving their clients. If a person is slightly handicapped by age and the bus run is four blocks away with no weather shelter at the bus stop, the bus is really not a usable mode of transportation. However, moving bus routes closer to concentrations of the elderly, even if only during certain hours of the day, could be a feasible alternative or having mini-buses equipped with phones so buses could pick-up at certain houses where the person is handicapped could ease the situation.

Let me be more specific concerning some aspects of remedial legislation.

Again and again, this Congress has enacted legislation that could bring relief to our elderly citizens. But money must be authorized for these programs, and once authorized it must be appropriated and once appropriated it must be expended. Impoundment of funds to provide transportation to the elderly flouts the very conscience of American society.

As an example, last May, the Older Americans Comprehensive Services Amendments of 1973 were enacted. Section 412 provides for two major steps toward improving the transportation services of the elderly.

First, a study and survey of community transportation systems has been authorized. Such systems as those involving school buses and Department of Defense vehicles could be examined. Second, research and demonstration projects are provided for by law. These projects are designed to test alternatives and improvements of existing systems, to inquire into special subsystems developed for the elderly including portal to portal service and finally, to examine and provide a system of direct payments to the senior citizens so that they can obtain transportation.

In spite of the fact that the White House Conference on Aging as far back in time as 1971 made the statement that "Immediate action is needed. The transportation policy recommendations are a call for action now" and in spite of the legislation of May 3, 1973, the Administration's budget for FY-75 did not include a request for one penny to implement Section 412.

Let us turn our attention to the Urban Mass Transportation Act of 1964. Section 16b provides that private non-profit corporations and associations can qualify for grants and loans to plan, design and carry out projects that meet the needs of the elderly and handicapped. Formerly 1½% of the appropriation was available for these grants and loans. That percentage has been raised to 2%.

At present, the Department of Transportation is still developing regulations to implement section 16b—although the amendment was enacted as far back as October 15, 1970.

In fact, the entire amendment often called the Biaggi amendment, or Section 16, clearly states the national policy that the elderly and handicapped have access to mass transit services and facilities. Additionally, it provides for grants and loans to assure compliance. Of local interest was the case in which the Urban League participated as a party plaintiff in a suit against the Washington Metro Transit Authority. That law suit was based on District of Columbia law which required access for the handicapped. The ruling led to the installation of elevators and the enforcement of other local regulations designed to provide access to transportation to our less mobile population.

In short, we have a national policy expressed not only by virtue of the fact that Congress has legislated on this issue, but also explicitly stated in Section 16(a) that the intent of Congress is to provide access. A few pilot projects, tokens of one sort or another, do not effectuate the strong mandate of Congress. Access, in all forms, is a basic problem, as you will hear later this morning from other witnesses.

As a last example, let us examine the Federal-Aid Highway Act of 1973 enacted in August 1973. Section 147 provides for a demonstration program in rural areas, a program that will develop, improve and use transportation within rural areas. Only recently, has the Federal Highway Administration been designated the Agency responsible for administering this program.

In no way, is this sampling of current law and administrative inaction to be mistaken for an exhaustive discussion of the transportation problems of the elderly. It is merely an indication of the fine start made by the Congress in this direction. However, all the legislation on the books cannot remedy the unfilled needs of the senior citizens. Implementation of existing programs is a good beginning toward providing for the elderly. In short, the National Council of Senior Citizens stands before you today in part, seeking the implementation of the programs enacted into law by this Congress.

The hardships suffered by the elderly each day in trying to get where they need to go can better be learned through first-hand experience or by talking with those who have those experiences. Beside me today are people who must deal with these difficulties each day for themselves and others. Mrs. Anna Baker is here from Denver, Colorado. Mrs. Baker is a 70-year-old widow and a Senior Aide who helps upward of fifteen people a day during her four hour work period as a counselor. She helps senior citizens in Denver find housing and clothes, medical care and food. And Mrs. Kirkpatrick, another Senior Aide who works as a job developer in the Employment Service in Fairmont, West Virginia. She helps people on and off the program find full time work in the regular labor market and she has been cited by the Employment Service for her remarkable success.

In addition, I would like to introduce Elliott Conway, a Senior Aides Project Director from Muscle Shoals, Alabama. These people are representing over 2,000 Senior Aides—part-time community service workers in 34 locations across the country sponsored by the National Council of Senior Citizens on behalf of the U.S. Department of Labor.

Mr. HUTTON. Perhaps, if I may, I will turn to the first of our senior aides, who is Mrs. Mary Kirkpatrick of Fairmont, W. Va. She will tell you herself what she does and how she feels about transportation for the elderly.

#### STATEMENT OF MARY KIRKPATRICK, SENIOR AIDE, FAIRVIEW, W. VA.

Mrs. KIRKPATRICK. Thank you very much, Mr. Hutton.

Senator Randolph, one thing I would like to add, that I am from Marion County—almost Heaven—West Virginia.

Senator RANDOLPH. That is true.

Mrs. KIRKPATRICK. I can tell you about Marion County and I know it applies to many other counties in our State of West Virginia.

In Marion County, it has a population of about 64,000 people—of this, about one-fourth are 55 years old or older and these people

live in rural areas, that are very difficult to get into the shopping centers and to the hospitals and to the doctors' offices.

Fairmont has, at the present time—which is the county seat of Marion County—has four buses which can't possibly take care of the rural areas of the county.

Just to show you how little it would take to alleviate some of these problems, four more buses in Marion County would help to solve a lot of these problems. We need these buses in the rural areas, in the outlying communities and really, this is not a new problem with us.

We have not had any transportation to amount to anything out in the rural communities for a long time. It has been tried but for lack of funds, it has not succeeded, so many people in the rural areas are on Social Security. These people have to wait sometimes a week or 10 days before they can get their checks cashed and then they have to send somebody to the bank for them to get the checks cashed.

#### DEPEND ON VOLUNTEERS AND FRIENDS

We have elderly homes for Christians just barely 5 miles from Fairmont and the shopping centers and we have to depend on volunteers and friends to take them to the doctor and to the hospitals. We have two fine hospitals in Fairmont; we have two fine clinics in Fairmont and our elderly people cannot get there because they do not have transportation.

Senator RANDOLPH. By the way, you would not mind if I say you came to Washington from the airport, Clarksburg-Fairmont Field, it was your first airplane ride, is that right?

Mrs. KIRKPATRICK. Yes, it was, Senator.

Senator RANDOLPH. So, sometimes we have to take a new form of transportation. I am glad that you are here.

Mrs. KIRKPATRICK. It was delightful, I can assure you.

You mentioned that about the terrain of West Virginia and I am sure it does cause problems in many parts of West Virginia but I do not believe that is our problem in Marion County. We have good roads but we do not have the transportation to use these good roads.

If I may, I would like to insert just a little personal thing here, that so many senior citizens who, like myself, for the first time, are beginning to draw Social Security checks and for the first time in our lives, we do not have to worry about our children, about feeding them or clothing them and we can spend that money on ourselves if we want to, but if we cannot get to the shopping center, we cannot spend that money and I think it means a great deal to the independence of each elderly person to be able to do his own business and his own thing.

We have in Marion County a lot of retired coal miners. They have two fine clinics in Marion County and these coal miners just do not have transportation to get to these clinics to use them. Of course, I realize that anything that benefits the elderly in the transportation is going to benefit everybody.

I believe, in my opinion, that if Marion County could get just four more buses, that it would up the economy 20 to 30 percent, perhaps, because more people could get to the shopping centers.

For instance, I would like to tell you, at my work site, I work for the West Virginia Employment Service through the senior aide project. My job there has been to help the elderly people find suitable work, if possible, to supplement their income. Many times, I have found jobs that would just fit someone perfectly, but they could not take them because they had no way to get there. Just last week, before I came up here, I had found a job for a lady in Fairmont, that she needed a job badly and it was just 10 miles away from Fairmont to Fairview, which is my home town and it was a nice job, taking care of an elderly lady, and she could not take it because there was no way that we could get her there every day.

#### BUSES NEEDED IN RURAL AREAS

Sometimes I think, Senator, that Fairview and Fairmont are kind of forgotten in many ways and they have tried the bus to Fairview on Tuesday, once a week. Now, I realize that Marion County is doing the best they can with four buses, they must keep them in the town proper and that is why they cannot put them out on these rural country roads where they are needed so badly for the elderly people because our elderly people are farmers and they live in the outlying communities, but I have found in the employment office there are so many jobs right now, more odd jobs and things that the older people can do really than there are for younger people right now, but there is no need to call them because they cannot take them, they just cannot get there.

As I started to tell you, there is a bus that comes to Fairview on Tuesday, and if you know anything about farms, you know the farmers do not shop on Tuesday. They go to the shops on Fridays and Saturdays. That is when we do our shopping; that is the big day for the farmers.

If we could get enough buses to run on Fridays and Saturdays, or on the third or fourth day of the month when the Social Security checks come, it would alleviate our problems a great deal. I believe also that a bus to these rural areas early in the morning now, in view of the energy crisis, would allow workers to ride to work. As you know, Fairview is 10 miles from Fairmont and we have a lot of people working in Fairmont from the Fairview area. They are having to pool their cars right now and doing the best they can to get to work.

I believe, Senator, that a bus there in early morning and late evening would alleviate a great deal of our transportation. I helped canvass for the TRIP program which was to work something on the order of the food stamp program, that elderly, low income families would have reduced fares. I was one of the volunteers to get that data they want and we have not heard any more about that. I support that. I think it was a very good thing if it is carried through, but in conclusion, I would like to say that with Federal funding, Marion County can solve their transportation problem for the elderly.

I want to thank the Senators for letting me speak with you.

Mr. HUTTON. Thank you, Mr. Chairman, the next witness is Mrs. Anna E. Baker, who is here from Denver, Colo. Mrs. Baker is a 70-year-old widow and senior aide who helps upward of 15 people a day

during her 4-hour a day work period as a counselor to older people in Denver.

Mrs. Baker?

**STATEMENT OF ANNA E. BAKER, SENIOR AIDE, DENVER, COLO.**

Mrs. BAKER. Thank you.

Mr. Chairman and members of the Special Committee on Aging, I welcome this opportunity to appear before you. Since your committee is focusing its attention on the subject concerning, "Transportation for the Elderly".

Throughout the Nation, transportation has consistently and clearly been identified as the most pressing need of the elderly. The majority of senior citizens live on a fixed, limited income in the poverty areas. In particular, transportation to and from medical services, food stamp outlets, grocery stores, spiritual, cultural, and recreational facilities is inadequate for the elderly. Therefore, they are denied the benefits of full participation in meaningful community life.

In the northwestern part of our State, the population is made up of many ranchers, who have lived their entire lives in rural communities and are now in need of medical care. The only available transportation had been provided by a concerned citizen, residing in that area, who would drive these people over 400 miles (round trip) to Denver for their medical appointments. This 75-year-old woman was given only a minimal amount of assistance for her efforts, and now her program has been discontinued.

Many problems have developed as a result of elderly persons riding on buses. They have difficulty boarding the buses, due to physical handicaps, and the steps are much too high. In the metropolitan area of Denver, RTD is now in the process of setting up a special task force on the transit needs of the elderly. This task force will examine bus design, placement of route numbers for visual help. Suggestions as to route modifications and new service are being considered. We are, also, asking the task force to look into design of rapid transit system.

**AIDES TRAVEL 60,000 MILES A YEAR**

There are 10 senior aides working in Denver, providing transportation services to low income elderly, working 20 hours a week. These aides travel approximately 60,000 miles a year. The total budget allocated for senior aide transportation is \$800 per month, on a 9 month contract.

I might say now that I am affiliated with the Eastside Action Center and we used to be the target area but we are coming out of that now and I am sure you know I have many, many problems counselling with the seniors in that area.

So many time, I get calls on the phone—Mrs. Baker, as a member of my family promised to take me to the doctor's and they are overdoing their thing and I am still here by myself. Do you have any way you can send and get me because I must keep my doctor's appointment? I would like to go downtown and buy a pair of shoes but

nobody to take me. The other members of the house are busy doing things and they forget them. They are sitting there at home. They called—they called to certify people for food stamps. I would like to go and buy my stamps but I have no way of getting down there.

You know, we have some pretty rough weather in Colorado and this past winter has been an exceptionally bad winter for us and transportation for these people, we have none at our center. We have no means of transportation. They will try to call a cab for them and if the taxi driver drives up and sees an elderly person, he does not want to be bothered to do anything for the elderly. He feels it would take too much of his time and they may not have enough money to pay them; they are taking it for granted.

I have a lady—I can state an instance to you—she wanted to go to the grocery store. She walked five blocks to the store, purchased her groceries, and on her way back from the store, somebody came up behind her, knocked her down and snatched her pocketbook and we found her lying there on the street, which necessitated hospitalization for her, and the result was a broken limb and we felt very sorry because we had no means of picking her up and taking her to the grocery store and bringing her back. We feel this act would have never happened to her and so many cases where they have called up, they would like to go to church, they would like to become a part of the community, even though they have become a senior citizen, they do not want to be forgotten, they want to be a part but there is no way that I can get them out.

We had two conferences in Denver and I am now in the process of putting the third one together, known as the "Senior Citizens' Conferences for the Elderly," and my problem is getting some means of transportation to go into these homes and in the convalescent homes we have people who would like to dress up and come out and meet their older friends. They would like to shake hands and have an afternoon and listen to some speakers, tell them something because they have no means of getting any type of input, unless somebody goes and takes them to these different sessions.

At the last conference we had, it really did me good to see some friends there. I have a little '61 station wagon and I have nicknamed her the "Senior Citizen," and sometimes she will operate and sometimes she will not, but this one particular time, she was on good behavior and I just packed my car up with all of the senior citizens I could get, in wheel chairs, and I take them there and gave them their breakfast and had speakers and gave them a lunch and we had little "rap" sessions and at the close of the afternoon, I could just see the radiant smiles on their faces. I was able to put on a dress I had not worn for a long time, and I fixed my hair so I could get out and meet some of my friends and I would see so and so—I did not know what happened to her—because she is isolated away.

#### DOCTORS DON'T MAKE HOME VISITS

I have no way of contacting my friends and my doctor—they do not make any home visits—you either have to go to the office or the health center; they do not give that type of service and to get them

there, it is just a problem and I feel, within myself, that transportation for the elderly is something that definitely is needed in Denver.

Although we are a large city but everybody in the big city as I said before, is doing their thing; that is what they are doing, they think, and I do not have time to give, they say. They do not stop to realize that some day they, too, may become a senior citizen, and then what are they going to do.

I have asked some of the young people, what are you going to do? Oh, Miss Baker, I don't worry about that. When I get there, I will take care of it, like we are all trying to do now, and we have cases where there are members of their family, their husband or their wife is sick in the hospital or the rest home, and they would like to go visit them but we have no way of taking them and volunteers are getting to be something that you can almost count them on your fingers because people do not feel like they want to volunteer their services.

If we had some type of transportation method in Denver that would take care of them so they could pick up the 'phone and say, Miss Baker, could you have somebody come and pick me up and tell me what time they are coming and I will make a special effort to be ready because my work is definitely more with the senior problems, with counselling them and a lot of them have taken their TV's to shops to have them repaired and to cite a little instance, a man went to get his TV, he had somebody to take him to see about his TV and the owner of the shop had sold the man's TV.

Here is this elderly with no TV. We had to take it up with our district attorney's office, then he in turn made the man replace the TV. They do not know what is going on; they do not know what is happening. They have become isolated.

Just look at me. I am getting around but I feel that they should get out, provisions should be made in transportation to bring them out so they can know what is going on. They just say this is the end of my life. I am drawing Social Security benefits and this is it.

We do not want them to do that. If you go into that, you will soon die. It is just—I cannot do any more; all right, give me 6 feet of earth and let me go. As long as breath is in your body, let's get up and get with it.

#### URBAN RENEWAL DISPLACES FAMILY

This gentleman—I see the picture really from the human side of it, where they come to me, "Mrs. Baker, I would like somebody to come and get me because I have a problem. They are going to buy the house where I am living with my daughter. They are going to get a fabulous sum under urban renewal and what is going to become of me and where am I going to go?" So we have to try to help, to get them satisfied in some way so they can live happy the remaining days of their lives.

I thank you, gentlemen.

Senator CHILES. Mrs. Baker, you are not under oath but do you think it is fair for someone as young as you to pose being 70 years old?

Mrs. BAKER. What did you say? [Laughter.]

I am proud of it. I am really proud that I have been active.

Senator CHILES. You must be. You must be living what you say—about keeping on the move.

Mrs. BAKER. I say this to you, Senator Chiles. I have reared three children of my own and I said when I get through, when I am through, I am going to get me a house where there is a pushbutton and the water will go on for coffee. I just had a beautiful image of what my old days were going to be but through adverse circumstances, I had to go back and rear a 5-year-old granddaughter. She is here with me and she reached the age of 16 and I am telling you, when you live with a teenager of today, you do not have time to think about your aches and pains. She does not give me time, and at my age.

They elected me president of the PTA in the school. Can you imagine that, for last year and I enjoyed every minute of it.

Thank you.

Mrs. HUTTON. Our next witness on this panel, Mr. Chairman, is Elliot Conway. He is a project director and handles a group of 40 to 60 senior aides in Muscle Shoals, Ala. He is employed by the local nonprofit group to be project director of this program which is part of our National Senior Aide program.

#### STATEMENT OF ELLIOT CONWAY, SENIOR AIDE, MUSCLE SHOALS, ALA.

Mr. CONWAY. There have been thousands of words and many pages of testimony from people attempting to determine the needs of our elderly. However, the proof of their plight is in evidence every day. There have also been offered any number of proposed plans and solutions. But the elderly need action now. This paper will deal with a transportation solution for our elderly that is practical, economical, and simple, utilizing the public school transportation system and it will be equally applicable in all areas of the Nation as well as in northwest Alabama.

First, let's look at the present situation. The following information was furnished by the State Director, Emmett Eaton, Commissioner of Aging, as of February 7, 1974: Federal funding for programs designed to aid the elderly is in excess of \$4.6 million. An indication of the dedication this State has for use of Federal funds is that as of January 24, 1974, Alabama led all 50 States in delivering 102.8 percent of State's goals for the elderly. What does this mean? It means that 10,000 older Alabamians are receiving such services as one hot meal a day, health and welfare counseling, nutrition, education, shopping assistance, recreation, and transportation. As stated, 10,000 older Americans in Alabama are receiving these types of assistance, however, there are more than 140,000 persons age 65 and older in Alabama receiving less than poverty level income. This includes over 50,000 members of minority groups. The State is doing a good job with the money available, in fact, less than 10 percent of that \$4.6 million is being spent on administration overhead. There are only 15 organizations involved in providing some form of transportation specifically funded for the elderly and these organizations are travel-



ing 1 million miles a year touching less than 10 percent of those requiring this type of service. On a local county level 50 percent of those receiving old age pensions not only have no transportation of their own, but have no access to any form of transportation.

#### SENIOR AIDES PROGRAM SUCCESSFUL

The senior citizen has much to offer America if we would but ask. We have proved this in any number of demonstration projects and volunteer programs. But we have hardly scratched the surface. A good example is our highly successful senior aides demonstration program in our five county region. Fifty-five elderly are every day proving their worth in various public agencies. Fifty-five people—out of 26,261. What are the other 26,206 elderly doing? And what could they be doing if they had the means to contribute their years of knowledge to our present day society. You might be interested to know that over 8,000 of those 26,000 are also living on incomes below the poverty level. That is the equivalent of more people than the total population of Muscle Shoals City. These are not uneducated or handicapped people. They are surviving on small pensions, Social Security or by the graciousness of sons and daughters who care.

The problem has been stated on the State level, the regional level and the county level. I don't have the answer to a problem of this magnitude and I know you gentlemen will be faced with finding the answer to this problem multiplied by 50. May I present a thought which might lead to a nationwide solution and at a lesser cost to the taxpayer than a mammoth new program. Everyone is aware that schoolbuses travel Monday through Friday on almost every rural and suburban road in America and most people are also aware that these buses sit in school yards for up to 7 hours each schoolday. Each bus represents a taxpayer's investment of \$6,000 to \$8,000 that is utilized on the average of 2 hours a day. Our elderly citizens have helped pay for this investment and now is the time to repay their sweat, blood and tears with an opportunity to enrich their remaining years by giving them the means to remain a part of the society they helped build.

Everyone speaks of the hardship of their particular special interest group. No one, however, can imagine what the current energy crisis has done to the elderly. For 14 days this month, northwest Alabama was literally strangled by the independent trucker's strike. TV, radio and the newspapers echoed with the pitiful cries of elected officials, industry managers, hospitals and service agencies. They spoke of the reduced garbage collection, absenteeism, and empty food shelves. But not one voice was raised for the elderly who couldn't visit the food stores or hospitals or city halls—they didn't have the necessary transportation to give them the right to complain. Each day passes like the one before—lonely, forgotten and sick at heart. We can make their life have some meaning, not only to themselves, but to all of us, if we but give them the means to give.

Please take particular note of an unsolicited letter and the comments written on the back of a travel form.\*

\*Retained in committee files.

The No. 1 priority of the Lauderdale County Department of Pensions and Security is transportation. I would like to submit for the record the list of unmet needs and a letter from the Director of the Muscle Shoals Health Planning Council.

[The material referred to follows:]

UNMET NEEDS OF PEOPLE SERVED BY THE LAUDERDALE COUNTY DEPARTMENT OF PENSIONS AND SECURITY

1. Client transportation to resources such as clinics, food stamps, etc.
2. Emergency fund for special needs.
3. Resource for new shoes for children.
4. Organized recreation for adults and children, including bus tours.
5. Friendly visitors to home of clients and friendly telephone visits.
6. Congregate meals and Meals-on-Wheels for adults and handicapped.
7. Volunteer bureau.
8. Resource people for emergent materials and used equipment such as electric blankets, furniture, sheets, towels, baby items (furniture and clothing), etc.
9. Resource church families to sponsor public welfare families and meet their special needs throughout the year.
10. Craftsmen for home repairs and improvements.
11. Teenage boarding homes.
12. Adult foster homes.
13. Tutors for slow learners.
14. Sewing teachers for mothers.
15. Used sewing machines.
16. Sewing volunteers.
17. Sick room supplies such as walkers, wheel chairs, commodes, hospital beds, etc.
18. Loan of truck for delivery of large items.
19. Youth Employment Service.
20. Public day care center for children.
21. Play equipment for licensed family day care homes.
22. Big Brother-Big Sister program.
23. Senior citizen clubs.

MUSCLE SHOALS COMPREHENSIVE HEALTH PLANNING COUNCIL,  
Muscle Shoals, Ala., February 21, 1974.

MR. ELLIOT CONWAY,  
Project Director, Senior Aides Program, Muscle Shoals Council of Local Governments, Muscle Shoals, Ala.

DEAR MR. CONWAY: I have become much interested in your proposal to transport the elderly to central locations by sharing school bus transportation. This not only solves an immediate problem for many of these citizens, but also presents an opportunity for the elderly and the school aged youngsters to interrelate, for the benefit of both.

Most of the funded health programs exclude funds for transportation, and this has proved to be a major barrier to serving parts of the population, such as the elderly and the indigent, so this proposal could have an impact on the delivery of health services.

Thank you.

ROBERT W. PLOWDEN,  
Executive Director.

MR. CONWAY. As project director of the first senior aides program in Alabama and the first regional program in the United States covering both a rural and urban environment, I have gained some knowledge and understanding of the basic problems. While I cannot claim to be an expert, I would like to offer to your committee any support you may think would help in providing a solution to needs of the elderly. I also would like to thank this committee, Senator Lawton Chiles and the National Council of Senior Citizens for this

opportunity to appear before you and perhaps help in some small way the senior citizens of this great country.

Senator CHILES. Thank you very much. Senator Randolph, do you have any questions?

Senator RANDOLPH. Mr. Chairman, I am appreciative that you allow me to have a couple of questions for a minute or two before I go to a commitment in the Public Works Committee and I only wish I could stay with you and the other members of this committee to be present for the testimony which will come from both this side of the table and those who are sitting there.

I look on this as a very productive hearing. I again compliment you.

#### TRIP PROGRAM IN WEST VIRGINIA

Mrs. Kirkpatrick, you spoke of the program called "TRIP" to my colleagues. That is transportation remuneration incentive program and we have been working on that in the State of West Virginia. Dr. Gerard is director of the West Virginia Commission on Aging, and Mr. Flowers, is commissioner of our State Department on Welfare.

I will not take the time to say what that program is, except that it is an important one which we have discussed here in Washington with the Transportation Secretary, Mr. Brinegar, and we hope when Dr. Gerard and Commissioner Flowers come to testify on Wednesday, that we will have some further expression from Mr. Brinegar of support for this type of program.

It is not too intricate but I will not take the time to do it.

You were one of those, Mrs. Kirkpatrick, who made the survey which has helped to bring together the facts as we know them in connection with these matters and, of course, you come from a county where one-fourth of our population is over 55 years of age. Is that correct?

Mrs. KIRKPATRICK. Yes, sir.

Senator RANDOLPH. And this final comment, Mr. Conway. You have spoken of the schoolbuses that could be used—they are idle for many hours each day. Is that correct—Monday through Friday?

Mr. CONWAY. That is correct and I have spoken with three school superintendents in three counties of northwest Alabama, and they expressed some interest in my proposed method. Hopefully, something can be done this way.

Senator RANDOLPH. Thank you, Mr. Conway and again, I would agree with you that this is an important area for prompt consideration.

In the West Virginia Legislature, which is now in session, there is Senate bill No. 42. It is presented by two Senators, Neeley and Leonard; one a Democrat and one a Republican. There is also pending House bill 701, by Delegates Queen and Towers and that legislation goes exactly to the point you are making for the use of these schoolbuses, county by county, throughout West Virginia.

We are hopeful that this legislation, if not enacted—and I hope it can be—will be the subject of the hearings in our respective committees on education in the Senate and the House of Delegates so

that we can produce a background of information which will bring this into being. It takes some doing, as it were, but it can be done and these idle buses certainly can be used and I commend you for your attention to this problem in your area.

Mr. CONWAY. Thank you, sir. The cost of schoolbuses in Alabama per mile is 44 cents. We have some buses in our county school system that date back to 1957.

We hopefully, by some kind of cooperative funding, through the Federal Government and the State and county school systems, we could provide some additional new buses and take care of the expense per mile so that at least a large number of our elderly throughout the rural area would be touched.

Thank you very much.

#### FACILITIES NEED TO BE UTILIZED

Senator RANDOLPH. Thank you, Mr. Conway and, Mr. Chairman, I think that more and more, in America, we need to utilize those facilities and those—let's say items—that go into our economy that are good, serve specific purposes but for many hours each day are not used, just as you have indicated here, Mr. Conway, the buses stand idle. I commend you, Mr. Conway, and thank you again, Mr. Chairman.

Mrs. BAKER. Mr. Chairman, to Senator Randolph: In my presentation. I just overlooked—I brought a copy of it and I would like to have it made a part of the record,\* the act that was passed by our legislature, House bill No. 1364, was to the use of schoolbuses by residents, at times to be specified by the board, motor vehicles to be used for transportation of pupils pursuant to provisions of section 123-B, available to groups of five or more residents of the district who are 65 years of age or older, for use within or without the district. The board of education of each school district of a State adopt policies regarding the reasonable use of such vehicle. A person with special consideration, given those residents who are 65 years or older. Such motor vehicle will be covered by insurance and policy similar to but not less than insurance company coverage.

I might say this bill was acted on and went into effect as of January of this year but we have been advised there is another bill in the Senate that will have some reaction upon this. I think they are going to make some type of changes because since this gasoline shortage, they have told us you can have the use of the bus providing you hire a driver and furnish your own gas and that is the thing that has confronted us now.

Senator CHILES. Thank you, Senator Randolph.

Senator GURNEY?

Senator GURNEY. I wish to congratulate each one of the witnesses for giving these very dramatic and effective facts on this problem of transportation. They have been extremely helpful.

This schoolbus idea ought to be probed much more widely. I think we could make greater use of the buses than we are doing. I would like to ask you, Mrs. Baker, how many calls do you have a day for transportation for the elderly?

\*Retained in committee files.

Mrs. BAKER. Senator Gurney, it varies. Generally, it is around the time of Social Security and old age pensions, they receive their checks. The Social Security will be on the third and old age benefit is on the 30th, and those people have experienced going out alone, without anybody, and somebody standing in the grocery store sees them cash their check and rip them off. They just do that.

Senator GURNEY. Have you been able to handle it at all with volunteer help?

#### SECURITY GUARDS ASSIST ELDERLY

Mrs. BAKER. We have to some extent, yes, and the large grocery stores have put in the security guards to watch and assist the elderly in and out of the store and go along with them and see that they put their money in their pocketbook or on their person somewhere. We have had to do that because it was really pitiful in our supermarkets.

Senator GURNEY. I wonder—do any of the witnesses—do you have any experience and knowledge about the minibus thing? I know one of the communities in Florida has done this on its own, they financed it on a volunteer basis and this has helped out tremendously. I wonder if any of you have had practical experience?

Mrs. BAKER. We had one in Denver when the supermarkets were on strike, we were able to call out to the field—one of our government agencies out there—and we asked them to loan us a bus to go to the highrise and pick up those people and take them around to the store to buy their food and stuff and we had to watch them very carefully because they were waiting, they have got money and we are afraid.

Mrs. KIRKPATRICK. I would like to mention, in the senior aide project, they have another project they call the "Dial-And-Do Program" and one of the senior aides stand by the telephone 4 hours a day, taking calls from elderly people who need help and many of them cannot get to the shopping center, so when they call the senior aide, who is taking care of the telephone, then she, in turn, calls hopefully until she gets somebody to go to take them to the doctor and I, myself, have taken some of them to the doctor and I have gone and driven 20 miles to get prescriptions filled for them at drugstores but in view of the gasoline shortage, that is going to stop, I am afraid, because many people do not have the gasoline now to make these extra trips, even though they need—even though they would like to very much—but the Dial-And-Do program is working very well.

I think we have four communities: Mannington, Farmington, Reemsville, and in Fairview, W. Va., which is all in Marion County and they are doing the best they can for the elderly and the handicapped.

Senator GURNEY. I thank you all very much.

Mr. CONWAY. Senator Gurney, in my section of northwest Alabama, we have no public transportation and we have no minibuses. Our senior aides who are involved in working with people, getting them to the doctors, in places like this, are having to utilize their own vehicles, which we reimburse them at 11 cents a mile.

What concerns me most, we are wearing these elderly citizens' vehicles out and they are not going to be able to replace them when they are gone and this is of deep concern to me and I know we are

furnishing a tremendous service to the other elderly throughout our five-county region but it is of real concern.

Mr. HUTTON. Senator Chiles, if you do not have any further questions, I do have one short sentence I would like to leave you with.

Senator CHILES. I think we have some further statements.

Mr. HUTTON. It is just a one sentence thing. It is that the National Council of Senior Citizens realize that all the legislation on the books right now can remedy the unfilled needs of the elderly regarding transportation.

#### IMPLEMENTING EXISTING PROGRAMS

What we need is new ideas but nevertheless implementation of existing programs will go a long way to help and so that these two areas in which we have to move, one is implementation of things which are on the books now and, of course, funding for them and I want to see that reflected in the residential budget and then two, grabbing ideas like really looking at the schoolbus situation and others, to see if we cannot have dial-a-bus and minibuses to get the older people out of the prisons in which they are living.

Senator CHILES. Thank you.

Senator Brock?

Senator BROCK. I wanted to follow up with specific questions. First of all, to Mr. Conway, on the figure that you have of 44 cents per mile. Does that include the capitalization costs or is that direct operating cost?

Mr. CONWAY. That is the total cost.

Senator BROCK. I am intruding with that, as I guess everybody is. I know I have seen some communities trying to do this, just one here and there, on occasions, on their own. They run into two or three problems.

First of all, certainly in our rural areas, I am sure this is true in others, as in Tennessee. The schoolbus driver quite often is a teacher at school or she is a mother that is a volunteer. She is not what you would call an employed busdriver, sometimes not even paid but if they are teachers, you have to find somebody else to do the driving because she has to go into the classroom when she gets the kids to school. It seems to me you have an enormous capital outlay that has already been made that is not being properly utilized, just as in our own communities, we have urged time and again that the schools be made available in nonschool hours for community meetings, for recreational facilities for our children. In a lot of places, I know they not only close the school doors, they lock up the school grounds so that the playgrounds are not available to the children but the classrooms, the auditoriums could be used for community meetings and we just do not utilize our investment in this country to its maximum potential and I think it is crazy, I really do.

I am absolutely fascinated by the thought maybe we could come up with legislation on a shared basis and allow us, at the Federal level, to participate in enhancing the utilization of these investments. I am sure Mr. Conway, in your area, as in mine, we could find volunteers to drive those schoolbuses.

I am a little distressed by Mrs. Baker about the lack of participation of people in the community. If we do not have volunteers, then there is not going to be enough money in the whole world to do what we have to do and I do not have any answer to that.

#### VOLUNTEER PARTICIPATION NECESSARY

I know before I came into this particular occupation, if you can call it that, my wife and I were involved. We started an adult literacy program in Chattanooga. We used to teach a class at 5:30 in the morning. Most of the people who came were elderly, who never learned to read or write. They were functional illiterates but to see those people when they did learn was, I think, one of the most rewarding experiences I have ever had in anything I have done, and to see the volunteers and what it did for them and to see this happen, I don't know how we can communicate to the people of this country the thrill that comes from volunteering in community service but there is no work in the world more rewarding than that and somehow we have got to restore that kind of thing.

I do not know if any of you have any suggestions that do not come with Federal dollars. As a matter of fact, Mr. Hutton, I have seen our Federal programs killed for lack of volunteer participation and that is one thing that we cannot afford to do. That is one thing that we must enhance.

I very much appreciate your testimony. As Mr. Gurney pointed out, this is my first meeting with this committee. I have just been fortunate enough to be a Senator and I have a lot to learn, I have learned much this morning and I thank you for your testimony.

Mr. HUTTON. Thank you, Senator.

Senator CHILES. Mr. Hutton, are you now satisfied with the Metro system, with the elevators installed, that they are going to serve the elderly adequately in Washington, D.C.?

Mr. HUTTON. I hope so. It took a court case to do it, as you know. The testimony which I submitted did not include the details on the local law suit. We have too many physically handicapped persons not getting sufficient transportation—even if we utilize schoolbuses for the elderly. We have to provide ways for the elderly to get into those schoolbuses. The steps are much too high for the elderly at the moment and we need to provide some kind of system to get them aboard. Not enough buses are provided, even today. A busdriver that does not come to the curb but who stands in the middle of the street, makes it almost impossible for an elderly person to get aboard a regular bus even if they happen to be near one. There are very real problems—but they are not the kind of problems which a great Nation like this can solve if it puts its heart to it. We are going to watch the Metro services very, very carefully and when those doors are open and we find physical handicaps that will stop the elderly, we will try to do something about it.

Senator CHILES. I hope that court case proves to be one that says anybody designing a system will follow the law to start with. It will certainly cost them more money now that they have to go back and take care of things that they should have taken care of beforehand.

Mr. HUTTON. We hope it is a warning to them, Senator.

Senator CHILES. Thank you very much.

Mr. HUTTON. Thank you.

Senator CHILES. Our next panel, Mr. Jack Ossofsky, executive director, National Council on the Aging, Inc., Miss Frieda Gorrecht, executive director, United Auto Workers, Retired Workers Center, Detroit, and Mrs. Victorina Peralta, administrator, Department of Community Services on Aging, Philadelphia.

#### **STATEMENT OF JACK OSSOFSKY, EXECUTIVE DIRECTOR, NATIONAL COUNCIL ON AGING, INC.**

Mr. OSSOFSKY. Thank you, Mr. Chairman. My name is Jack Ossofsky. I am executive director of the National Council on the Aging, a private nonprofit organization which for the past 23 years has provided continuing leadership and training to public and private agencies at the national, State, and local levels in the field of aging. We have been a national resource for planning, information, and service in the many areas—such as nutrition, housing, and transportation—affecting the lives of our Nation's elderly population.

One NCOA program with a particular interest in the subject of this hearing is our National Institute of Senior Centers, which coordinates the senior center movement at the national level and acts as a conduit for information exchange among its center members. I am fortunate to have accompanying me today the chairman-elect of NCOA's National Institute of Senior Centers, Miss Freida Gorrecht, and one of its delegate council members, Mrs. Victorina Peralta. Miss Gorrecht is also executive director of the UAW Retired Workers Centers of Detroit, and Mrs. Peralta is administrator of Philadelphia's Catholic Social Services Department of Community Services on Aging.

We welcome this opportunity to appear before your committee and commend your efforts to focus on a subject for which legislative and administrative action is long overdue and increasingly needed: transportation for the elderly.

I understand that several witnesses who will come before you in these 3 days of hearings will address themselves to the progress made in meeting the transportation needs of the elderly in their respective communities. NCOA well appreciates the significance of what their projects have demonstrated in terms of improving transportation for the elderly. We want to emphasize, however, that innovative and significant as these may be, they are scattered and fragmented demonstrations only. They need to be given permanence in their communities, replicated in other communities, and built into a national policy on transportation. NCOA urges, therefore, that the Federal Government commit an increased amount of its moneys and resources to this end if we are ever to realize more than a few scattered successes in elderly transportation services.

#### **HIGH HOPES FOR FEDERAL COMMITMENT**

Those of us working in the field of aging back in 1970 had high hopes of getting such a Federal commitment when the so-called



Biaggi amendment was passed into law as part of the Urban Mass Transportation Assistance Act, which, for the first time, gave recognition to and enunciated national policy for the special transportation needs of the elderly. The amendment authorized \$46.5 million to modify existing transit systems to take into account the special needs of the elderly and handicapped. Unfortunately, it was enacted as a totally discretionary amendment, stating only that the Secretary "may" appropriate any portion of these funds if he so wishes, but he was not required to do so.

Thus, in the following fiscal year, a total of only \$2.5 million—instead of the expected \$46.5 million—was appropriated for the Department of Transportation's Service Development Branch to test out new ways of serving all "transit-deprived" groups, a term which includes not only the elderly, but also the handicapped, youth, and low-income persons of all ages. It can safely be assumed then that only a fraction of the \$2.5 million was specifically directed at the elderly population. For fiscal year 1974, demonstrations thus far approved or planned for approval which are specifically designed to serve the aged and handicapped total a mere \$1.077 million, although the Department of Transportation budget officer who provided us with this sad figure last week did add that he was not including in this figure other ongoing projects with elderly components contained within them or serving the aged in a less direct way. In any event, it is clear from these expenditure figures that the discretionary clause is not working as we had hoped.

The latest amendments to the Urban Mass Transportation Act, enacted as title III of the Federal-Aid Highway Act last August—Public Law 93-87—repeats the mistake. Although it included the promising provision that 2 percent of the total \$6.1 billion be earmarked for financing programs designed to meet the needs of the elderly and handicapped, the language read only that the Secretary "may" set this enormous amount aside—perpetrating a cruel hoax on the many persons whose hopes have again been raised by falsely believing the dollars are required to be set aside.

NCOA is certain that Congress acted with the best of intentions when it included this provision into the landmark measure. But we have seen, time and time again, that without specific legislative mandates the elderly will not get their fair share. This is as true at the local level, where less than 1 percent of local general revenue sharing funds are being expended on programs for the elderly, as it is at the Federal level.

For this reason, Mr. Chairman, we strongly urge that the discretionary language pertaining to the elderly and handicapped in the Urban Mass Transit Act be revised so that specific allocations are mandated and funding assured for elderly transportation programs.

This committee is very well acquainted with the myriad of transportation problems affecting our Nation's older population and has taken an active role throughout the years in exploring solutions for those problems. While we do not want to reexamine all of the issues involved in elderly transportation, we do wish to direct the remainder of our testimony to one transportation problem of ever-growing proportions: The energy crisis, its impact on older persons as individuals and on the agencies which serve them.

## CABS, BUSES FORCED TO RAISE FARES

Before the energy crisis hit, transportation accounted for between 7 and 11 percent of a retired couple's budget according to the 1973 Bureau of Labor Statistics figures. But as gasoline costs soar, taxicabs and public buses have been forced to raise fares, making it more difficult for those on a fixed income to continue an adequate transportation allowance. A report of the International Taxicab Association as it appeared in the January 31 Wall Street Journal found, for example, that at least 20 rate increases are pending in the Nation's 50 largest cities with many other increases already granted as a result of higher fuel costs. In Detroit, area cab rates were boosted by about 28 percent last month, and in Athens, Ga., riders experienced a 50-percent raise; other cities—such as those in Pennsylvania—are allowing cab operators to raise rates by 5 cents each time gasoline costs rise 10 cents a gallon or more.

At a time when the cost of food and home heating fuel is also escalating at recordbreaking rates, the increase in public transit fares places yet another strain on the elderly's already flattened pocketbooks. In effect, there simply may not be enough money in their budgets to pay for all these items any more—and we fear that transportation, which is thought of as the most expendable item, will be omitted.

It is true, of course, that more fortunate elderly have not had to spend a great deal of their limited funds on transportation, because free or low-cost transportation has been made available to them in a few communities. But even in these places, with the gasoline shortage reaching critical proportions, NCOA believes that the older person faces a real danger of being left not only without transportation services but without a whole host of other services as well, such as nutrition, health, employment and recreation.

In New York, for example, the State legislature last year passed a law allowing schoolbuses to be used by senior citizen groups in an effort to maximize utilization of the equipment and provide needed daytime transportation service to the State's elderly population. However, now the bus companies and school districts are unable to make the vehicles available in off-school hours because they are experiencing difficulties in getting enough gas to transport the children to and from school. We wonder how many public and private agencies serving the elderly must now let their minibuses stand idle for the same reason.

But perhaps the most critical and far-reaching effect of the energy crunch on service agencies has been their loss of volunteer drivers. The loss has stemmed from two factors: The inability of the drivers to get gasoline or, if available, its high cost. Both have contributed to a crippling of the many elderly services programs which depend on volunteers for their survival.

## RSVP PROGRAM HELPFUL

Let us take, for example, the Retired Senior Volunteer Program (RSVP), administered federally by the new ACTION agency which has done an outstanding job of finding volunteer roles for older

people. The RSVP volunteers are 60 years of age or older, and many are placed in outreach positions where a considerable amount of driving is called for. There are 100 such volunteers in the rural city of Watertown, N.Y., where taxicabs cost \$1.50 for a one-half mile ride within city limits, do not travel beyond city limits, and serve as the area's only form of "public" transportation. The 100 older RSVP volunteers perform for Watertown the critical function of transporting other elderly to and from the city's health clinic, meal programs, welfare offices, et cetera. Without these volunteers, the Watertown elderly on fixed incomes are, simply put, prisoners in their own homes.

But the RSVP program as it currently operates in Watertown reimburses volunteers for driving only to and from their assigned site at the rate of 10 cents per mile; picking up the many elderly who use the clinic and taking them back home afterwards is not reimbursed, although this additional driving is the volunteer's primary function at the site. Thus, according to the chairman of the Watertown RSVP Advisory Committee, Carl Eberhart, his 100 volunteers are now losing money and a large proportion of them are expected to drop out because it is becoming financially impossible for them to continue participating.

Hopefully, this situation will soon be corrected. The latest draft of the proposed national regulations for implementing the RSVP program stipulates that the station to which the volunteer is assigned—such as a health clinic—must bear the responsibility for reimbursing the volunteer for all on-the-job travel expenses—although the RSVP person must first request such reimbursement. RSVP will continue to reimburse travel only to and from the site. It should also be noted here that RSVP does not set a national mileage rate of reimbursement; the 10 or 15-cents-per-mile standard is wholly established by the local grantee.

We are hearing similar reports about loss of volunteers in other program areas as well. One person working with a church-operated Meals-on-Wheels project in Pennsylvania wrote:

The prospect of 70 cents a gallon gasoline threatens to deprive the Meals-on-Wheels program of the volunteer services of those who deliver these meals daily. Many of these volunteers are retired, older Americans with limited incomes. Many others will find the expense of volunteer services too great to continue, or in the event of rationing, will simply not have the gasoline.

The value of such volunteer service to that particular Meals-on-Wheels program has literally been in the millions of dollars. In 1972, the agency logged nearly 45,000 volunteer hours; when costed at \$2 an hour, this totals nearly \$100,000 without considering driving costs at all. At the same time, costs have grown at such a rate that private agencies could never assume these additional expenses. A survey of the routes from the agency's kitchens showed that the drivers drove over 9,000 miles a week to make the Meals-on-Wheels program work.

Those working in homemaker-health aide projects, escort service programs, senior centers, and other service delivery systems have all expressed a common fear: The loss of volunteer drivers will eventually cripple their respective programs. Whether or not the agency reimburses the volunteer at 10 cents per mile, the cost of driving has evidently become too prohibitive for many volunteers to bear. Even if the driver can afford to pay, he simply cannot obtain the gasoline or is, understandably, unwilling to wait for an hour in line to get it.

## HARD PRESSED TO CONTINUE SERVICES

Agencies which have the money can make some line item adjustments in their budgets to accommodate the increase in gasoline costs. But agencies working on a bare-bones budget, or those restricted by regulation on line item changes, are finding themselves hard pressed to continue providing their services.

A prime example of this critical situation is found in the new title VII nutrition program. By Federal regulations, States are forbidden to spend more than 10 percent of their title VII budgets on transportation. As a result, many States have relied on volunteer drivers. The original intention of this restriction was a sound one: To insure that 90 percent of the moneys was spent for nutritional services. The unforeseen gasoline shortage, however, has played havoc with the program, and the 10-percent restriction—in light of the limited budgets—has become an untenable one. Although many title VII meal sites are located within walking distance of many older persons, other sites—especially in rural areas—depend on some type of transportation system to bring the elderly in for the meals. In addition to the congregate meal settings, almost all title VII projects include a home-delivered meal component; current Administration on Aging statistics estimate that 15 percent of all meals provided under title VII are home-delivered, which obviously necessitate a vehicle and driver.

How are these title VII programs coping with the crisis? Unfortunately, many are unable to cope and others are making last-ditch efforts at salvaging their projects. In the Texarkana, Tex. title VII project, all but 2 of the original 20 volunteer drivers have dropped out. The sponsoring agency, Senior Citizen Services, is now utilizing its staff to perform the transportation function to make up for the loss of volunteers. The staff is spending its own money for gas, its own cars, and their normal job tasks are suffering. Surely, this is not an answer.

Even more tragic was the closing down of two title VII meal sites in Garrett County, Md., for the week of February 4. This rural county faced acute shortages of gasoline and food that week as a result of the trucker's work stoppage and an 8-inch snowstorm. Once the National Guard was called to bring in food and fuel, the sites were reopened. At the same time, the county's home nursing services for the elderly were reduced by half and its medical personnel did not have enough gas to get to work. Although Garrett's sites are back in operation, the problem of getting drivers is still acute and meal counts remain low.

The task of solving the many problems we have outlined here this morning is a monumental one. While NCOA does not have any energy experts on its staff and cannot provide this committee with any answers, we would like to briefly share with you our thoughts in this regard.

## PROGRAMS MUST BE SAVED

Our starting point is that these programs must be saved. If the Government and the Congress agree with this premise, then as one

elderly gentleman recently told us, "they will find a way to get those programs some gas." He recalled his World War II experiences when he transported riders to and from defense plants. "The Government considered my job important enough to give me a good supply of gas rations, so I never had a problem." The real question then remains: Is the well-being of our Nation's elderly important enough?

If Congress and the administration answer affirmatively, several measures can be initiated immediately:

- (1) Government program regulations which restrict reimbursements of drivers at a 10-cents-per-mile rate should be changed to reflect the higher costs of gasoline;
- (2) Extra gasoline allocations should be given to agencies who operate elderly transportation services programs;
- (3) In those States which have established odd-even days of gasoline distribution, a special permit system should be developed for volunteer agency drivers to allow them to purchase gas any day of the week;
- (4) Current Federal Energy Office, FEO, allocation rules for motor gasoline should define "services to the elderly" as "emergency services"—a first priority service entitled to the amount of gasoline they need without restriction;
- (5) Title VII nutrition authorizations for fiscal year 1975 should be increased to at least \$150 million to take into account higher food and fuel costs as well as a reasonable increase in program participants;
- (6) If rationing eventually takes place, extra rations should be provided to service delivery agencies for distribution to its volunteer drivers and transportation staff;
- (7) Finally, in creating State and local fuel allocation boards, consideration must be given to consumer involvement with an ample number of consumers represented in each such body—it will not do to have the board comprised only of oil or other business executives.

NCOA realizes that the Federal Energy Office is newly established and could not be expected to solve all problems in its first weeks of operation. We were pleased to note the recent creation of the Special Impact Office under FEO which will review and act upon the concerns of low-income consumers affected by the energy crisis; the new Office will provide a research and policy base for the FEO to determine whether Federal regulations and programs work undue hardships on these groups, including the elderly. Surely this is a step in the right direction.

We would all agree, however, that more must be done. And it must be done quickly if we are to save our elderly, their dwindling budgets, and the programs designed to serve them.

Thank you.

#### RSVP VOLUNTEERS PAY FOR PERFORMING FUNCTIONS

Mr. ORIOL [presiding]. Mr. Ossofsky, Senator Chiles had to leave for a quorum call, but we will continue, without objection.

It seems to me the whole congressional history of RSVP was to provide volunteers with the wherewithal to perform essential tasks without cost to themselves.

Now, where did this requirement, or this decision, or whatever it is to require that the RSVP volunteers pay for what it costs them while performing these functions, where was that decision made, do you personally know where there is anything in the law that said that?

Mr. OSSOFSKY. As far as I know, it is not in the law, and is contrary to the intent of the law. This is an administrative procedure.

Mr. ORIOL. Do you happen to have the directive, whatever it is?

Mr. OSSOFSKY. No, but I think it could probably be found in the guidelines for the funding of projects.

The effect is that RSVP reimburses only for travel to and from the volunteer's jobsite. The responsibility for on-the-job travel reimbursement is the jobsite's, not RSVP's. It is my understanding that such reimbursement is mandatory, not optional, by regulation.

Mr. ORIOL. For the record. I would like to note that at the Senate Committee on Aging, or at least across my desk, we have received no notification of this change on the fundamental principle of the RSVP program, and we would like additional information, and we will seek that when we have the administration witnesses on Thursday.

Mr. OSSOFSKY. My recollection, Mr. Oriol, of the origins of the RSVP program was that it was directed to the goal of encouraging older people to participate in volunteerism, but would take into account at the same time the limited resources of most older people have, and therefore, that it would try to meet the out-of-pocket expenses of older people in that purpose; while it did not pay a salary for the work done, it did seek to encourage volunteerism without any cost to the person who so volunteered.

Mr. ORIOL. In other words, the role performed by the volunteer should not cost the volunteer anything out of his own pocket?

Mr. OSSOFSKY. Yes, absolutely.

Mr. ORIOL. And you are saying it now does?

Mr. OSSOFSKY. It definitely does—in those places where the jobsite has chosen not to abide by the regulations.

I would like to underscore a point raised earlier by witnesses who urged that volunteers be sought and encouraged to participate in programs wherever possible with the notion being that by having volunteers, no expenses are incurred.

I think we need to understand that volunteerism requires dollars to be expended, either by the volunteers who are traveling to and from a project, or the services that they are rendering are most important in the recruiting of volunteers, the organizations and maintenance of good volunteer programs, and the administration generally of those kind of programs.

#### VOLUNTEER PROGRAMS COST MONEY

There would be few volunteer programs today in such things as RSVP, for example, if there had not been a Federal seeding of money to encourage those volunteer programs, and I urge that the

concern that is being raised about the importance of volunteer programs with the notion they do not cost money be clarified.

They do cost money. They do not cost as much as paid programs.

On the other hand, in response to the question of what do we do about finding drivers for some of the buses, it might be worth underscoring that there are many older people who would welcome the opportunity who have the capacities to drive buses, and who could use the funds as pay.

There are those indeed who can and should be encouraged to volunteer, but there are others who need the inducement of the economic means of working on a job as a busdriver or some other task would provide them.

The senior aides program is a similar program as we operate, such as the ones you heard earlier today, shows that older people need the income and can perform valuable functions if provided that income, and if indeed we are considering ways of providing school-buses for use by older people, one source of drivers can very well be older people.

Those working in homemaker health aid projects, escort service programs, et cetera, all need this help.

Senator CHILES [presiding]. Thank you, Mr. Ossofsky.

Your comments about the RSVP policies of transportation reimbursement concern me.

As I understand. RSVP was established to encourage volunteer workers to donate their services on the clear assurance their expenses would be paid.

In your statement, it appears the volunteers are not covered for what is the bulk of their travels.

I do not see why the station in which the volunteers are assigned should have to pay these volunteer expenses.

Mr. OSSOFSKY. I could not agree with you more, Senator, and as we discussed in the colloquy before, we were told that there would be some movement in that direction, but we do not think it is sufficient, and it is our opinion the program was designed to encourage volunteerism, and to do so without incurring additional costs on the volunteer.

It seems to me this is something that must be taken into account if the program is to succeed.

Senator CHILES. Your statement mentioned Special Impact Office of the Energy Office. Have you had some contact with that office?

Mr. OSSOFSKY. The National Council on Aging sent Administrator Simon a letter early in his appointment to that office, listing a number of problems that concern us regarding the fuel crisis at the time as it affects older people.

We took particular pains to talk in that communication with him about the fuel oil problem as it affects heating oil problems as it affects heating for individual residences and sites for nutrition and other programs.

I regret to say, Senator, we are still awaiting a response.

Either it never reached him or he did not think it important enough to respond to a concern about older people.

I do not know what answer to choose in that regard. Regrettably, we have no way of determining what is in his mind.

If he would have responded, we might have been in a better position to tell you.

#### CHAOTIC CONDITIONS IN OFFICE

Senator CHILES. Not knowing exactly when you sent that letter, but having visited Mr. Simon's offices in some of the early days and seen the correspondence that was in cardboard boxes that were just piled up and realizing they are really trying to create a new bureaucracy there, I think you might follow him up on that letter today.

You may get some response today, where you would not have gotten one then.

I do happen to know that some of the real chaos they were in, in trying to open that agency up, and I would not be surprised if somebody did not just throw away a few bushel baskets of some of those letters.

Mr. OSSOFSKY. That may be.

Senator CHILES. Do you think it is a good public policy to rely heavily on volunteer drivers for a national nutrition project such as the nutrition program?

Mr. OSSOFSKY. Senator, I believe there is a major role for volunteers, and I would like to see encouragement of volunteers, particularly for those older people who choose to, who want to, who are financially in a position to serve as volunteers.

However, I believe that there is tremendous evidence that great numbers of older people who would like to fulfill those roles need income in the process of fulfilling those roles, and while I see no problem in encouraging older people to serve as volunteer drivers whatsoever. I am more concerned about the fact that we are precluding or excluding the opportunity for many older people to earn some supplemental livelihood by doing so not as a volunteer, but as a paid aide.

There is no way to differentiate between the roles that are fulfilled by volunteers, and those fulfilled by paid staff.

The only ultimate difference that one gets paid and the other does not, and I am more concerned at this point with meeting the economic needs of great numbers of older people who remain economically deprived than the psychic needs of those who perhaps will again benefit by serving as volunteers.

I do not minimize the value to the community or to the individual member who volunteers.

I think we ought to find more for both.

Senator CHILES. Miss Gorrecht, do you have anything to add?

#### **STATEMENT OF MISS FRIEDA GORRECHT, EXECUTIVE DIRECTOR, UNITED AUTO WORKERS, RETIRED WORKERS CENTER, DETROIT, MICH.**

Miss GORRECHT. I am from Detroit, Mich. Early in the 1950's, the UAW and the Junior League of Detroit—

Senator CHILES. That is where they used to make automobiles.

Miss GORRECHT. That is right. The experimentation with senior centers was developed early in Detroit. One of the first things we



found in the auto capital of the Nation was that not all older people drove cars. If we offered services, we had to get people to the centers.

It was not a door-to-door service, so we became interested in reduced bus fares.

Senator CHILES. What year was that?

Miss GORRECHT. I think it was 1954.

And every year we had to go down to the city council with our best efforts, because every year the bus company decided to do away with it.

This became a trip that I think we got to enjoy. However, that is stamped progress in today's problems.

If I were to say what our greatest progress is in the Detroit area in terms of transportation for people, I would say that it would be the establishment of the Southeastern Michigan Transportation Authority. I am very happy to report that they have some concern about the special problems of the older person.

That does not mean they have done anything much yet. They have done a little, but it does mean that I think for the first time we have seen some evidence of planning to include the special needs of older people in transportation, and just as we begin to say, oh, isn't this nice, maybe some of our problems will be solved, we have the energy crisis.

I would like to support what Mr. Ossofsky has said about its effect on older people. We have heard a great deal here today about the problems of people in small towns and in rural areas.

The services that people get in large cities are not much better. It is just as difficult to walk three or four blocks because you might not have the energy, or you might get mugged, in trying to catch a bus.

In Detroit, we did a study in 1970, a group of people who served older people through senior centers, got together to try to assess the use they made of the bus system.

This was to put some facts into the hands of the powers that be who regularly heard our yelling about the price of the bus for older people.

We interviewed 299 older people. We selected them rather carefully from senior centers, people who were sitting on park benches, people who were in the lobbies, in the big stores in town, and we came up with some rather interesting data.

We found that 23.7 percent of those interviewed did drive their own cars.

We also found that 5.6 percent of them relied on neighbors or family members to take them wherever they needed to go.

#### HANDICAPPED BY ENERGY CRISIS

This meant that this was an appreciable number of people who were not dependent on the bus system. What it means to me now, however, is that it is an appreciable number of people who will be handicapped by the energy crisis.

They will find their neighbors and their friends not quite so helpful when the cost of gasoline rises, and when it becomes scarce.

Recently I was involved in helping to plan for the SSI ALERT, which is the program that funded through the Red Cross to help people know about the Social Security payments that they may or may not be eligible for.

I was absolutely shocked to find out that the Detroit chapter of the Red Cross had allowed no money in its budget for transportation for volunteers.

At the same time, it admitted it had no appreciable number, or practically no volunteers in the inner city area, which meant those of us helping would have to probably rely on retired people to do the volunteer work, but there was no money at-all for any expenses.

I really was shocked at this. It seems to me it was a lack of knowing what in the world is going on in our world today.

We have two programs that I am concerned about in the Detroit area.

One, Mr. Ossofsky has talked about, which is the nutrition program.

We are a little late in getting ourselves started, and I head up a committee of senior citizens, who are trying to figure out how to divide up \$35,000 in 1 year among 36 sites to provide transportation.

We know that this is not enough, we know that some of our programs where they did use volunteers has dropped off because they do not wish to spend that much money.

The other is a program where we rely on taxis to bring people to our centers for programs designed for the blind handicapped older people.

We are now including other kinds of physical handicapped. Our program was written 2 years ago, and the money that we allowed there for transportation has dwindled in terms of the market place.

We do not know what we are going to do, but we do know that the energy crisis plus the fact we have had a problem to begin with, is going to threaten the program's design to help the older person.

I think, considering the fact, I picked up some information from a report that was put out in 1965, that any home that has an average of one driver in it drives 4.3 times a day on errands, and if there are two cars in the family, it raises it to 7.6.

For the older person, it is probably zero. We have millions of older people who are victims of immobility in a society that is designed for the wheels, and it seems to me that we need to look very closely at some of the recommendations Jack Ossofsky has made.

I think they are practical, and I think they must be looked at if we are to continue to progress on the services we have already designed for our older people.

The cities are suffering just as the rural areas are.

Senator CHILES. Mrs. Peralta.

**STATEMENT OF VICTORINA PERALTA, ADMINISTRATOR, DEPARTMENT OF COMMUNITY SERVICES ON AGING, PHILADELPHIA, PA.**

Mrs. PERALTA. First of all, I would like as a prologue to my testimony, to give some background, but I would like to request that the prepared statement I have submitted be made a part of the record.\*

Senator CHILES. Without objection, it will be made part of the record of this hearing.

\* See prepared statement, p. 41.

Mrs. PERALTA. It is so nice to see you in person, Senator Chiles. Senator CHILES. Thank you. We are delighted to have you all here, and I thank you very much for your statements.

Mrs. PERALTA. I am sure it is common knowledge that we have in our society 21 million senior citizens, 5 percent are in institutions, and 95 percent are in the community.

Perhaps my being an Asian, raised up in a culture where filial piety is second nature to us, that I see some things my fellow Americans do not see, and that is in this highly developed, very powerful country, which is among the richest countries of the world, the elderly have no place in its social structure.

#### DISLOCATED IN FOUR AREAS

The elderly of this country are dislocated in four areas; namely, familiarly, socially, emotionally, and financially.

Senator Gurney made the statement before, that transportation is a two-fold issue.

I would like to point out it is a four-fold issue, because through transportation, the elderly can find location within the four areas of these dislocations we have put them into; namely, socially, financially, familiarly, and emotionally.

Because of mandatory retirement, our elderly live on fixed limited income, and because of the high mobility of society, our elderly live alone, so that most of them die not because of heart disease nor because of arteriosclerosis, but they die of a broken heart.

Emotionally, they are dislocated, because of all of the forces that are placed against them. Socially, they are displaced because of the limited, inadequate, and insufficient means of transportation that we provide for our elderly.

Mr. Ossofsky, Miss Gorrecht, and those who have testified before me, have given some statistics.

If I may, I would like with your permission, to illustrate by some true human stories that have happened, because of the lack of transportation.

For instance, in Philadelphia, we have what we call Project HEAD. It stands for Help Elderly Adults Direct.

It is a self-help program, the goal of which is to maximize the self care of the elderly within the mainstream of life.

I am sure you will all agree that keeping the elderly within the mainstream of life makes for a better society, and economically it is cheaper.

It costs at least \$20 to keep an elderly in an institution, but it costs at most \$7.50 to keep an elderly within the mainstream of life.

Now, one of the programs we have initiated through project HEAD is to mobilize the senior citizens themselves into helping one another. They get in touch with each other; we put them in touch with one another, so they can be supportive of each other.

We have the program where senior citizens telephone one another. At one time a senior citizen called her partner and said, "I am so depressed, I am getting ready to commit suicide."

The partner has a car, and usually could go there right away.

At that time, however, she did not have enough gasoline, so she called our office. I sent out one of our outreach workers to go to this person. She did not have enough gas in her car, so she lined up for 2 hours before she could get enough gas to go to the place where this person was calling, threatening that she would commit suicide.

In the meantime we called the police and the police car arrived before our outreach worker did. After 2 hours, our outreach worker was able to secure gasoline for her car.

When she reached the place, there was commotion. There was the police car. It was found out that the lady had jumped out of her window, hit her head, and she was bleeding. The police car arriving before our outreach worker frightened her so much that she made good her threat.

The police car brought her to the hospital, where she is now, with some stitches in her head, and a cracked hip bone.

If there was enough gasoline in the car of our outreach worker this could have been prevented. This should not have happened. Likewise, if there is a busline where this elderly person lives, this could not have happened.

#### HOT MEALS PROGRAM HARD HIT

At another instance, in our hot meal program, we provide hot meals for shut-ins, the same thing . . .

Our volunteers no longer can deliver these meals, because there is not enough gasoline.

Our professional staff, our case workers, our outreach workers, and incidentally, we also have senior aides, they find it very hard to secure gasoline also. So that in our hot meal programs, by the time the meals are delivered, they are no longer hot, they are cold, and sometimes the shut-in is also cold.

These are just a few instances, and I could go on, and relate more stories about how it is affecting our services to the elderly.

Now, a question was asked by Senator Gurney, how many times, or on the average how many times do you get calls for request for transportation.

The question, if I remember right, was addressed to Mrs. Baker.

I would like to put in the record that our agency receives on the average 10 to 15 calls a day asking for transportation.

Now, this is only in the Philadelphia County—10 to 15 calls a day, asking for transportation to go to hospitals for their clinic appointments, escort services to go shopping, or to visit people who are sick and shut in, and a variety of other important reasons. This means a lot; the impact it has in the lives of the elderly is very dehumanizing.

I would like to support all of the recommendations given by Mr. Ossofsky, but I would like to add something else.

I would highly recommend, perhaps it is a crazy wild idea, but I would like to recommend it. I would like to recommend a 30 percent cut on the military budget. We have militarized our society so much. It is about time we humanize it, and put the 30 percent cut from the military budget into a network of federally funded

transportation which is subsidized transportation for all elderly, particularly to agencies who are providing services to the elderly. And among these, I would like to recommend a high priority to multiservice senior citizen centers, because multiservice senior service centers in this country are doing a great job in keeping the elderly out of institutions. Through multiservice centers, the elderly are able to remain within the mainstream of life, so that they are enabled to live with dignity in order that they may be able to die with their "boots on."

Thank you very much.

Senator CHILES. Thank you. We appreciate your testimony and your prepared statement will be printed at this point in the record.

[The prepared statement of Mrs. Peralta follows.]

#### PREPARED STATEMENT OF MRS. VICTORINA PERALTA

##### STATEMENT OF THE PROBLEM

I stand before you this morning in behalf of the 20 million senior citizens we have in our country today. 5% of them are institutionalized and 95% are in the community.

These are our fellow Americans who have no place in our social and economic structure simply because they are old. This is so because our production-oriented, highly mobile, youth-cultured and dollar-equated society denies them that place! Thus the aging in our country are dislocated in four areas, namely: financially, socially, familially, and emotionally.

Financially, because mandatory retirement forces them into a life of fixed limited income. . . .

Socially, because their circle of friends and loved ones keep diminishing through the years and also due to their fixed limited income, they cannot afford to attend social functions they used to attend prior to their retirement.

Familially, because of the high mobility of our society, their children and the younger generations move to "greener pastures," thus the great majority of our elderly live alone and are lonely.

Emotionally, because they have suffered a series of losses: loss of a job; loss of status; loss of loved ones; loss of mobility, etc.

Thus multi-service senior citizen centers become a sort of a "Gibraltar" for them. But, to get to these centers, transportation is a vital aspect that affects their lives in particular and the total society in general. Because what affects the lives of a segment of our society affects the total society. Because, if the elderly cannot go to multi-service senior centers, they become isolated in more than one way. Isolation leads to depression, depression to frustration, frustration to institutionalization!

##### FINDINGS

Multi-service senior citizen centers then are the "bridges of hope" to a life of human dignity and human worth for our elderly. Because such centers provide them the opportunity to create a place for, by and with the community, so that they can find location in the 4 areas of dislocations I have just enumerated.

Allow me to illustrate by relating some human interest true stories to document my statement.

Agnes, age 84, was beaten up and robbed when she answered her doorbell. Agnes belongs to the Star Harbor Senior Citizen Center in Philadelphia. It was found out that Agnes had no way of checking who rings her doorbell because she is only 4 feet tall and her peephole is 5 feet high.

In Star Harbor Senior Citizen Center, the senior citizens, because of their fixed limited income, have developed an innovative program, called SWAP. They have a Bulletin Board where they place the things and/or services they need. Thus, Agnes put on their SWAP Bulletin Board her need for a step stool on which she can safely climb to peep through her apartment's peephole.

John, age 74, placed his need for some alterations on his pants—they needed tightening, because he has lost weight.

John happened to be a retired carpenter, so he built Agnes the step stool and Agnes happened to be a retired seamstress, so she repaired John's pants \* \* \* financially they were able to help one another, not through the dollars, but through exchange of services. Thus, they find financial relocation in the multi-service center, not only through programs like SWAP, but also through group rates on trips, cooperative buying, hot meal programs, etc.

Familially and socially the elderly also find location in multi-service center because it is a place where they meet and make new friends. Through the social programs at senior citizen centers, they are helped to become a big, happy family, so, in a way, they are no longer alone \* \* \* because someone cares!

John, age 86, is a member of the St. Theresa's Senior Citizen Center in Houston, Texas. One Wednesday, he was to go visit Peter, age 79, whom he met and became friends with at the Center. John did not show up for the date and so Peter went to John's apartment and rang his doorbell. John's radio was on, his lights were on and Peter could hear the water in the bathroom running. So Peter called the superintendent of the apartment to open John's door and, when they opened the door, they found John unconscious in the bath tub! While taking a bath, he had slipped, hit his head and was knocked out!

Right away, they called the rescue squad and John was rushed to the hospital, where he was revived. After he was examined, it was found out that he had a broken hip. Thus, he was put in a cast. While John was hospitalized, members of the Center visited him, sent him cards, letters, candies, flowers—now John is back at the Center teaching wood work. Just think what could have happened to John, if there was no senior citizen center in Houston, Texas! He could have died in that bath tub so alone—and not be discovered, perhaps, until after a week!

Emotionally therefore, they become supportive of one another; thus it is safe to conclude that multi-service senior citizen centers are very instrumental in maximizing self-care and independent living of the elderly within the mainstream of life. Because multi-service senior citizens centers provide preventive, rehabilitative and supportive services.

However, transportation is a vital aspect in this worthwhile endeavor, because the elderly need it to go to these centers and the centers need transportation likewise to deliver their services.

#### DIAGNOSTIC THINKING

Keeping the elderly within the mainstream of life is better and cheaper. It makes a healthier society without draining the country's dollar reserve.

It costs approximately \$20 a day to keep an elderly in a nursing home, but it costs approximately \$7.50 a day to keep an elderly within the mainstream of life.

Further, we can never build enough nursing homes and, with the new Life Safety Code, nursing homes almost become prohibitive! Further, 95% of the elderly are in the community.

Multi-service senior citizen centers provide the 95% of the 20 million elderly in our country today with meaningful involvements. Several scientific studies have proven that, if the elderly have meaningful involvements, they are given something to live for—a reason to live and not merely exist, then the breakdown that will necessitate their institutionalization does not occur. They are therefore afforded the opportunity not only to live in dignity but also to "die with their boots on!" But, with the present energy crisis, multi-service senior citizen centers and those they served are being greatly handicapped. Just to name a few examples:

(1) To deliver hot meals to shut-ins, staff and volunteers have to line up for hours to get gasoline. The lines are oftentimes too long; one worker took a full hour during the height of a snow storm last February 8th to get \$2.00 worth of gasoline—the meal was cold when delivered and our 76 year old shut-in was also dead cold when the worker finally arrived at her place!

(2) Our escort services are greatly affected—shut-ins have to be escorted to keep their doctors' appointments. The gasoline shortage hampers this service to a frightening degree.

(3) In urban areas, the distances are blocks, but in rural areas, the distances are acres \* \* \* but blocks in the cities can also mean being robbed, molested, beaten up or killed! Thus transportation is greatly needed both in urban and rural areas for the elderly to go to senior citizen centers.

(4) Friendly Visiting Programs, social and recreational programs, health services, the SSI alert, the property tax rebate program, the homemaker services, the protective services and a variety of interdependent and inter-related preventive, rehabilitative, supportive and therapeutic services to the aging are greatly crippled due to the lack of an adequate system of transportation.

Again, I repeat transportation that is adequate is the key to a life of human dignity and human worth for any individual but more so to the 20 million senior citizens of our country today.

#### RECOMMENDATIONS

I, therefore, respectfully submit the following recommendations:

(1) A Federally funded network of adequate system of transportation for all multi-service centers all throughout the United States.

(2) A high priority rating be given to all multi-service agencies, particularly those serving our elderly population, in the rationing of oil and gasoline.

(3) Transportation services to the elderly be made mandatory as part of the state responsibility with some federal fundings (State and Federal).

(4) Reduce the military budget by at least 30% to mandatory transportation services—It is about time we stop "militarizing" our society; let us humanize it! An adequate and safe network of transportation which is federally funded is one of the ways! In making these recommendations, allow me to conclude by calling your kind attention to three important factors.

#### CONCLUSIONS

The United States of America is one of the most highly developed countries of the world. It is also one of the most powerful and one of the richest—there is no excuse for the lack of adequate transportation, especially for our elderly population.

Further, kindly note that one out of every 3 voters in our country is a senior citizen—thus they have a high bargaining leverage. All over the United States "Senior Power" is beginning to emerge—history is in the making and advocacy is the present name of the game! Our senior citizens of today have reached a level of sophistication so that they can advocate effectively!

Last, but not least, all of us cannot go any other way—we will all grow old and gray; you and I \* \* \* thus what we do now will also benefit us, as well as our children and our children's children!

An adequate transportation system for our elderly today also means a happier future for our elderly of tomorrow.

I thank each of you for the opportunity you have given me to make this presentation in behalf of our 20 million senior citizens and I request you to kindly work for the mandatory provisions for an adequate federally funded system of transportation services for all older Americans—this is their hope, their dream and their prayers—and we who toil in the vineyard of the aging join them in their hopes, in their dreams and in their prayers \* \* \* we welcome you in the team—join us and do something about it because it is not only your duty to do so, it is also your privilege \* \* \*.

Senator CHILES. Senator Pell is with us, and I understand you are interested in seeing if we can hear Mrs. Eleanor F. Slater next.

Senator PELL. I would be very pleased indeed if you could take her out of order.

Senator CHILES. We will now hear from Mrs. Eleanor F. Slater, division coordinator, Rhode Island Division of Services for Aging.

Mrs. Slater, I see that you are accompanied by Mrs. Cathy Collette, program planner, RIDSA.

Senator PELL. I thank the chairman indeed for his courtesy in helping me out, but I did want to hear the witness from my own State.

**STATEMENT OF ELEANOR F. SLATER, DIVISION COORDINATOR,  
RHODE ISLAND DIVISION OF SERVICES FOR AGING; ACCOMPANIED BY CATHY COLLETTE, PROGRAM PLANNER, RIDSA**

Mrs. SLATER. Thank you, Senator Chiles, We have a formal statement which has been filed with the committee, and may be made a part of the record.\*

Senator CHILES. Yes, it will be, without objection.

Mrs. SLATER. Senator, I will not go over what is in our formal statement, because it is part of the record, but to bring the uniqueness of the system we have in Rhode Island to the attention of this committee.

Based on what we think are rather successful efforts, we have a demand response system in our State for transportation.

We have been able to coordinate various agencies, and particularly the community action agencies that had ten vehicles, and then we were able through OEO acquire seven more vehicles.

These are minibuses, and with the utilization of the vehicles that were already out there, plus the ones that we had money to buy from model project funds, from title III of the Older Americans Act, we were able to coordinate the efforts of the various vehicles and agencies that had been in the State, and put it in this demand response system.

**EFFICIENT USE OF VEHICLES**

All of the vehicles incidentally are equipped with radio telephones, and we have two dispatching stations at various different areas of the State.

Through this, we are utilizing and getting much more efficient use of these vehicles, and now we are for your particular information, Senator Pell, up to about 14,000 trips a month on our system.

One of the vehicles in our system was bought by the community through revenue sharing funds, and they requested, this particular community requested that this vehicle be put in our system.

Now we understand that there are five communities in our State that are considering buying vehicles with revenue sharing funds, because of the example that was set by this one community.

Our office is used as the center of information on the part of some of the elderly people who live in these various communities, and some of the town council people who are interested in possibly appropriating part of their particular revenue sharing funds for a vehicle for their area, but put in the system so that the vehicles are not confined within the boundaries of a particular community, but could go from a community in a rather rural area into Providence if need be.

Incidentally, we do have in all our vehicles, a system of priorities, with health being first, and then we do try to have some socializing.

As to the demand we have on the use of these vehicles, in the city of Providence, R.I., unless one had a reservation made during the month of January, it was impossible to use the system during

\* See prepared statement, p. 50.



the month of February, because the demand was so great, because all of the time, each individual time was taken from the utilization in the city of Providence of all vehicles that were available there.

Senator CHILES. Could you estimate how many people were not served?

Mrs. SLATER. Yes, there were about 550 calls that categorically we could not accommodate at all because of the great demand that was already taken up by those whose reservations were filed.

Is this the kind of thing you mean, Senator?

Senator CHILES. Yes.

Mrs. SLATER. There is another item that I would like to bring out, and that is the matter of courtesy on the part of the drivers and of the dispatchers.

I think this was brought out this morning by Senator Randolph in his opening statement about the hostility that is sometimes displayed toward the older people in some of our public transportation systems, and this is true.

Older people feel a great put down, and really psychologically to me, have an inferiority complex because of the way they are so often treated.

I observed it when I have gone to the supermarkets, and I have seen them going through the cash register, and unless they hurry through, they are made to feel that they are in the way.

We have had some training for the drivers and the dispatchers, and I might say that is displayed in the State of Rhode Island on the part of the drivers, and this sort of becomes infectious, and is displayed by the riders themselves.

I go out and actually ride on the vehicles, and I know that Cathy Collette has, and the older people get to know each other, particularly on shopping trips where they are taken to the market, and they take very good care of each other and take another seat or give up a seat for someone else when it is crowded, and it becomes a rather socializing kind of experience as well as one of necessity.

Getting to the title VII meal projects, incidentally, Senator Pell, for your information too, we are now feeding under our program, and it will increase about 5,000 people a week in our meals project, so that the utilization of these vehicles is used a great deal for the groups going to the meals.

#### DOOR-TO-DOOR BUS SYSTEM

I would like to also say this is a door-to-door bus system. It is a system that serves the elderly, and go where they need to be taken, and taken from their home and delivered back to their home.

This is terribly important. I think that so many of the public transportation systems have set up rules, and use it or not, that is the way we go, and this is our timing.

I think what we have demonstrated in Rhode Island, that our system really takes the people when and where and back to their homes when they need the transportation most.

Senator, Cathy, she might have something to answer for you.

Senator PELL. Thank you.

Mrs. Slater, as the coordinator of aging in our State, you have done this for several years now?

Mrs. SLATER. I am in my 6th year.

Senator PELL. And she really has the respect of everybody.

Our State has the problem that the chairman's State has, we have more than our share of older people.

Those who are less prosperous and cannot get to Florida, stay in Rhode Island, so we have a larger share than in many other States.

In connection with the regular transportation system, what is the present status with regard to rates for older citizens?

Mrs. SLATER. At the present time there is no charge for these services. It is completely subsidized. However, we do have a senior citizens transportation nonprofit corporation, and they have an advisory group.

Cathy, I know you might have something to say about them, considering charging for this, and what their reaction might be.

Senator PELL. My question is on regular buses.

Mrs. SLATER. About 20 cents, Senator.

Senator PELL. They pay a special rate?

Mrs. SLATER. They do.

Senator PELL. What is the percentage—if an older person takes a bus from my home city of Newport to Providence, does he pay a regular rate or a reduced rate?

Mrs. SLATER. In that kind of trip, there is not a special rate.

On the Rhode Island Public Transit Authority, which does not cover from Newport to Providence, there is a special rate of 20 cents, however, this was administrative on the part of our former Governor that this had taken place, but on our system, the demand response system that is financed through our office, and through the funds that come from the Federal level, there is no charge for this at the present time, however, it is being considered that there should be some charge, and many of the older people want to pay a fee for this.

Senator PELL. You have a toll-free telephone for them to call in?

Mrs. SLATER. The calling into the two dispatching services, the two dispatching stations is also a free telephone call.

Mrs. COLLETTE. They can reverse the charges if they wish.

Senator PELL. How about the local calls, they would have to pay for them?

Mrs. COLLETTE. That would be on their regular, within the regular bill, but if it is across lines where there would be a toll call, the charges may be reversed.

#### SMALLER VEHICLES ENJOYED MOST

Senator PELL. Do you find the minibuses do a better job than any other kind of vehicle?

Mrs. SLATER. We have found through our questionnaires and evaluations that the smaller vehicle, we have 15 passenger vehicles, it is the type of vehicle that is most enjoyed by the older persons.

Senator PELL. I recently had a letter from a constituent in North Scituate, saying he had problems getting transportation to buy food. Is this a common occurrence?

Mrs. SLATER. It is indeed, Senator.

The system is excellent as far as it goes, but it does not go far enough.

We would be happy to accommodate this man, and I am aware of this request that was made. I believe he was also blind, and he had to get to the market.

His wife is ill and unable to do this kind of thing anymore, and they are rather aged, and the demand was just so great with other health calls, we just could not stretch the system far enough to take care of them.

Senator PELL. Do you have any VISTA volunteers doing the driving?

Mrs. SLATER. No, no VISTA volunteers.

Senator PELL. Would not that be a good idea?

Mrs. SLATER. Well, we believe heartily in volunteerism, but it can only go so far.

I would like to echo what Jack Ossofsky said, we would agree entirely with his testimony, yes, in some cases it is good, but when you need a driver, and that driver has to be there, then he should, he or she should be a paid driver, because when they are paid, then they are there.

A volunteer has a sense of responsibility, but it is not a requirement to the extent that someone being paid a fee is.

I do not know whether I said this while I was talking, but we have found that women make excellent drivers. Drivers of this type of vehicle for the elderly, it should not be only a male kind of job.

Senator PELL. My wife is a much better driver than I am, and I think very often women are, but VISTA salaries, as you know, the VISTA volunteers can receive a regular salary, not a great salary, but they do receive a salary.

Mrs. COLLETTE. Senator, as we have brought the cost of our regular system down and increased the efficiency of the system, one of the things we would like to do is have volunteers, particularly the medical trips.

We are increasing the number of regular routes we have now, organized shopping trips and group meal functions.

As this efficiency improves, we would utilize our 12 and 15 passenger minibuses toward that, and use the volunteers more as medical single passenger trips.

Senator PELL. You now have about 15 buses in use, minibuses?

Mrs. COLLETTE. Twenty-seven.

Senator PELL. And how many do you think you would need to cover the State and fulfill the demand?

Mrs. COLLETTE. Forty-five.

We have had a consultant firm come into Rhode Island, Carstenson Associates of Washington, D.C., and they made a complete study of the system.

#### ONLY STATEWIDE SYSTEM IN COUNTRY

They found it to be an excellent system, the only one that is statewide in the country, but the great lack it does have is 45 buses are needed at the present time, where 27 exist.

Senator PELL. I notice reference in the reports to your testimony, in that regard.

What is the present dollar cost of the service you render?

Mrs. SLATER. Approximately \$1.28 per trip.

Senator PELL. To the taxpayer?

Mrs. SLATER. The system right now costs about \$200,000 a year, of contributed resources from various agencies.

Senator PELL. And what you would need really is about \$350,000 to do the job?

Mrs. SLATER. Almost exactly, Senator.

Senator PELL. Thank you very much, and thank you, Mr. Chairman, for your courtesies in letting the witness be heard out of turn.

Senator CHILES. You are welcome.

Mrs. Slater, the program limits the amount for transportation to social services.

Should this be increased to cover the extra cost to gasoline?

Mrs. SLATER. I don't know, Senator.

At the present time, it is 10 percent. You see, I do not want to take money away from the food program, because I find that we are utilizing in our State every cent that we have now, and we can certainly use more because of the demands on our meals.

I think if it were kept at 10 percent in my opinion, this would be sufficient, if we had other sources to support a transportation system.

Mrs. COLLETTE. What we have had to do in Rhode Island is to use some of our administrative money allowable on the nutrition grant to supplement the amount going into transportation.

Senator CHILES. We find one of the prime transportation needs arises when older citizens find it necessary to cash their Social Security checks and to bank them.

Now, we know that beneficiaries who want their checks sent directly to their banks can sign a power of attorney for that purpose, and this card can be obtained from the Social Security District Office or most banks.

However, both the beneficiary and the bank must sign the card, which must then be presented to the Social Security Administration.

In your judgment, is this practice sufficient for the elderly Social Security beneficiary, who cannot take his check down to the bank, or who fears about his monthly check, that it would be stolen, and, if not, what additional steps do you think should be taken, and do you think that most of our elderly citizens are sufficiently aware of this practice, that they could do this?

Mrs. SLATER. Senator, to answer your last question first, I think that the elderly people who are receiving Social Security are completely unaware that this practice is being considered to be shortly implemented.

I think it is going to take a bit of education, but in principle, I think it is a wonderful idea.

#### USING CHECKS TO PAY BILLS

I think that if the banks, if the check, not the check, but the amount is deposited to an older person's bank directly, that it would mean that they would be able to use, perhaps through some

education for many of them, using checks to pay many of their bills, would be a great idea, because I think that we certainly know that older people are afraid to carry a substantial amount of cash, in fact, in my opinion, they should carry but very little cash, only that which is necessary for a very short time.

As I also understand it, Senator, and I only know this from a verbal statement that was made, possibly in about a year from now, all Social Security checks are going to be, for all people are going to have the option—I was thinking about the SSI in the beginning, but they are going to be given this option. I think for the higher income group that are accustomed to dealing with banks, this would be something that would be a plus for them.

I am concerned about the poor elderly who are unaccustomed to dealing with banks to any great extent, being very fearful of it, but I think an educational kind of orientation through senior centers, this would be very good.

Senator CHILES. Do you have any idea what percentage of your elderly citizens just do not bank, just cash the check and deal with cash, as opposed to using a checking system?

Mrs. SLATER. No, I do not have any idea.

Perhaps, Cathy, you may know.

Senator CHILES. There have been no surveys taken?

Mrs. SLATER. No, but I know that the vast majority of the lower income elderly do just cash their checks and have the cash on them, and they are very concerned about where they pay their rent, and how they can pay their rent.

Senator CHILES. As far as the transportation needs of the elderly in your particular State, do you think it can primarily be served by a separate subsystem, and that would be better than striving for an integrated system within the total community?

Mrs. SLATER. It is difficult unless I gave that a little more depth of thought, Senator.

My own feeling is that I would like to see it be a subsystem of perhaps in my State, in our State, the Rhode Island Transit Authority.

I would not like to see it integrated at all, because there are special needs of the elderly, that the younger people, generally speaking, people who run a transportation system do not consider some of the very basic needs that are so necessary. Even the elderly who can get around, many are frail, they are hesitant, they become insecure physically, and I think these are the kind of needs that are most important.

If they do not have this kind of consideration, you are going to find them turned off and not use the transportation at all.

They get so fearful and so hesitant, that after a time they have two or three bad experiences, they are going to say I will not bother, and you are going to put them back into isolation.

Senator CHILES. Mr. Miller, the minority staff director, has a question.

#### SOCIAL SECURITY OFFICES SYMPATHETIC

Mr. MILLER. Mrs. Slater, referring for a moment to the question the chairman asked about the deposit of Social Security checks in banks, do you feel that the Social Security Administration has in

the District Offices been cooperative with older people that may have wanted to set up this kind of arrangement or has there been a tendency to complicate it for older people by reason of excessive red tape?

Mrs. SLATER. I think the Social Security offices in our State have been most sympathetic, and very good, and again, I do not want to seem like a liberationist, but I find women in the Social Security offices have made it very much more easy for older women to go in to talk with them and have shown sympathy and a feeling of being very, very helpful.

No, that has been fine. I think in our State, working with the SSI, and one of the ladies referred to it, I think it was the lady from Detroit, we have found in working with the Red Cross, in trying to work with their volunteers to try to reach many of the older people that need to be reached, to let them know their rights. I know in our State, again, Senator Pell, we have about 11,000 elderly people we should find to get on Social Security that have no income at all, and we are trying to dig these people out and find them, and we find through RSVP we have been much more successful in getting volunteers.

I will be very frank, we had a meeting trying to set up getting volunteers to do this SSI ALERT, and the Red Cross produced 17 volunteers, and we produced over 90 through our RSVP program, so that we would be able to do a better job with the money we had, if we did not go through Red Cross.

Senator CHILES. I thank you both for your testimony.

[The prepared statement of Mrs. Slater follows:]

PREPARED STATEMENT OF ELEANOR F. SLATER

A DEMAND-RESPONSE TRANSPORTATION SYSTEM (DESIGNED FOR RHODE ISLAND'S OLDER POPULATION)

**A. General Statement.**—Older people would like to be more mobile than they are—to get about outside their homes more freely in order to take care of their own needs and contribute to their communities.<sup>1</sup>

There is a nationwide upsurge in senior citizen groups expressing needs for transportation. Rhode Island is no exception. Senior citizens in Rhode Island depend on Public Transportation. Figures from the R. I. Senior Citizen's Transportation, Inc. (SCT, Inc.), funded with Model Project funds from Administration on Aging (AoA), show that over 2,000 calls for transportation will have been turned down during this year of operation ending June 30, 1974.<sup>2</sup>

**B. Public Transit.**—Getting to health services and group meals is a great problem for many senior citizens because many elderly households no longer own or operate personal cars. Public Transportation is not meeting this need. The Rhode Island Transit Authority is presently limited to radiating routes out of the City of Providence. Richard Andryshak of the Urban Mass Transportation Administration (UMTA) has spelled out why transportation has become a major concern for the elderly. He states that it is a threefold problem: 1. physical—many older persons have physical limitations in their ability to walk, climb, see, hear, and open doors; 2. economic—over half of the persons over 65 live in poverty or "near" poverty; 3. service—present transit systems are designed for the work trip and the school trip, not to the patterns of the elderly.

<sup>1</sup> Frances M. Carn, Ph.D. "Transportation and Later Maturity," a keynote address at the Conference on Public Transportation and the Elderly, Florida Department of Transportation & Florida State University, Tampa, September 7, 1971.

<sup>2</sup> Based on 515 calls where transportation could not be provided during the months of August, September and October of 1973.

Other limitations of the public transit system are:

1. Infrequent service.
2. Routes running in and out of the city but not "cross town."
3. In off hours, or areas of small population—no service at all.
4. High rates.
5. Steps which are too high.
6. In inner cities—fear of waiting at bus stop unprotected from muggers.<sup>3</sup>

C. *Demand-Response Transportation*.—A portal-to-portal minibus system can provide the service necessary to increase the mobility of the elderly. John L. Crain, in a Department of Transportation report, says that a demand actuated or dial-a-ride system that provides on-call, door-to-door service gives "excellent service particularly for older or handicapped persons who have difficulty walking to or standing at bus stops. It has proven to be highly attractive to the residents and no more costly (per trip) than the conventional bus service."<sup>4</sup>

Carstenson & Associates, a consulting firm from Washington, D.C., conducted a survey of over 100 senior citizen groups and organization leaders, and agency directors or staff working with the elderly in Rhode Island, as part of a study of the transportation system. This group indicated that of the elderly they know, an average of 57% had transportation problems.

D. *Target Population*.—Since Rhode Island has 147,000 people over 60 this indicates a target population of 83,790 senior citizens. The rising cost of gas, car ownership, maintenance and insurance, coupled with reduced income and increased disabilities inherent with old age contribute to the decline in the use of a car as a major form of transportation for the elderly. This is especially true among those of 75 years of age and older. Estimates indicate that only about 20%-30% of the elderly can rely on their own car for their transportation needs. These figures will undoubtedly become even less favorable as the price of gas goes up and getting enough gasoline becomes more difficult.

E. *The Present System*.—The present transportation system for the elderly in Rhode Island is operated by Senior Citizen's Transportation, Inc., a non-profit corporation funded by Model Project funds from the Administration on Aging. Services to the Aging Project (ASTA), a unit of the Division on Aging, administered this program. It is presently providing over 10,000 rides per month.

A total of 27 minibuses are in operation in the system administered by SCT, Inc. Seven new vehicles were purchased by the State Division on Aging in August, 1972.

Ten minibuses were contributed by the different Community Action Program agencies (OEO) in the State. In December, 1973 ten new 15-passenger vehicles were added to the system from a grant from OEO—2 of which were equipped to handle wheelchair patients. Operating expenses on these vehicles is contributed by the Nutrition Program (Title VII of the Older Americans Act).

Radio-dispatching of the vehicles is done through two dispatch stations—one in the Northern part of the State and the other in the Southern part. The vehicle radios are operated under a Federal Communication Commission license. The Newport area is still operated by telephone dispatch from the local Community Action Program.

F. *Priorities*.—Rhode Island's Transportation System has the following priorities:

1. *Medical Emergencies*.—To bring the elderly to hospitals in case of minor medical emergencies. (Major medical emergencies are referred at once to Rhode Island's Emergency Fire/Rescue System.)

2. *Medical Appointments*.—To bring the elderly to health maintenance appointments in the community, including physician visits, health centers, physical therapy and other medical treatments.

3. *Health Screenings*.—To provide transportation for large numbers of elderly persons to group health screenings throughout the State.

4. *Meals, Shopping & Food Stamp Pick-up*.—To bring older persons to group meals (sponsored by the AoA under Title VII of the Older Americans Act)

<sup>3</sup> From the 1971 White House Conference on Aging: The End of a Beginning? Published by the National Retired Teachers Association and AARP, 1971, p. 35. A speech to the National Conference on Social Welfare at Dallas in May, 1971.

<sup>4</sup> John L. Crain, "Transportation Problems of Transit Dependent Persons—A Status Report from The Second Phase: Conference on Transportation and Human Needs in the 70's, June 19-21, 1972. D.O.T. Contract #DOT-UT-746, pg. 8.

and the events associated with these meals. The intention of these groups meals is to help improve nutrition in support of better physical and mental health. To provide transportation for food stamp purchase and food shopping, and assistance in carrying heavy bundles of food to their homes.

5. *Social Events.*—To support both physical and mental health by enabling the elderly to participate in social events.

G. *Evaluation.*—During the Summer of 1973, SCT, Inc. appointed a Personnel & Evaluation Committee from the Board of Directors. This committee began intensive evaluation of the service for the purpose of improving operational efficiency by studying vehicle use, personnel policies, and the organizational structure of the corporation.

H. *Consultant Report.*—In addition to this, the Division on Aging hired the Consulting Firm of Carstenson & Associates of Washington, D.C. during the Summer of 1973 to do a study of the transportation system, report on its effectiveness, and make recommendations for change. (Copies of this report are available on request.) The objectives of the study were:

1. To develop a plan for a statewide system of transportation for the elderly based on present availability of the vehicles.

2. To evaluate existing transportation systems and make the necessary recommendations for improvement and expansion.

3. To investigate anticipated transportation needs for the elderly and to explore the means through which these needs can be met in the near future.

4. To identify long-range planning, and to recommend to the Division on Aging the priorities and sequences for implementation.

The following data were evaluated and included in the study:

a. Evaluation of present staffing, duties and responsibilities, plotting and dispatching systems.

b. Analysis of the factual information relating to the location of the elderly, their needs that could affect transportation planning, concentration of lower income or older persons with disability or transportation problems, relative location of services to the elderly, the public transportation systems, and other factors that affect the planning for the system.

c. Exploration of the possibilities for additional vehicles and personnel.

d. Analysis of the present system in light of the plans for the implementation of the new Nutrition Programs under Title VII of the Older Americans Act.

e. Exploration of fee systems.

f. Development of the plan that the State and local communities would be able to carry on without the extraordinarily heavy expenditure of State and/or local funds.

I. *Survey of Senior Citizen Leaders.*—Carstenson & Associates did a survey of over 100 senior citizen leaders and group presidents with the following results:

The senior leaders indicated overwhelmingly their satisfaction with and gratitude for the senior citizen transportation program. They indicated that there would be hardships if the service was not available. The general consensus of the senior leaders was that the service was good, but inadequate in relation to the need because it lacked sufficient buses.

J. *Survey of Riders.*—During the Summer of 1973, the Division on Aging in conjunction with the University of Rhode Island had an independent survey made of the ASTA Program with the following results in transportation:

The survey of a sample of 100 SCT, Inc. riders made by ASTA this Summer indicated that riders were pleased with driver courtesy (99%), punctuality (92%), and cleanliness of buses (99%), and were generally satisfied with the service.

Of all riders surveyed, 6 out of 10 have used the bus more than 10 times, and another 1 of the 10 has used the bus between 5 and 10 times. Twenty percent of the riders in the Cumberland (North) area indicated that they could not get a ride (at all) the last time they called. This is partly due to the shortage of buses, but it also reflects the nature of the rides. Seventy percent of the Cumberland riders were going to get medical care, and 42% of the Coventry (Southern) area riders were medical trips. This high percentage of medical trips would make it difficult for clients to get a reservation for other types of rides.

Group meals accounted for 80% of the Coventry riders. About 25% of the riders from both station areas were for shopping, food stamps, check cashing, etc.



The Consulting Firm of Carstenson & Associates was enthusiastic about Rhode Island's minibus system. They felt that in comparison to the rest of the country:

"Rhode Island stands out \* \* \* not in the technology but in developing the first system that includes an entire state, including a major metropolitan city, suburban areas, small cities, towns and rural areas. It is truly unique and far-sighted in its concept and scope. It is far ahead in its time, and from the experience thus far it is working and working well. Its primary problem is lack of vehicles and operating funds to provide a thorough dial-a-ride system, or as it is technically called a "demand/response system."

**K. Cost Analysis.**—The efficiency of Rhode Island's minibus system has increased steadily since its inception. Because of increased ridership, operational costs are going down. As more senior citizens utilize the system, the cost per trip decreases.

One year ago the cost per trip was over \$2. Six months later the cost was \$1.50 per trip. This has been reduced to \$1.28 per trip (Fall 1973) and it is expected that with increased efficiency, the cost could go down to \$1 per trip.<sup>5</sup>

"These costs per passenger trip compare very favorably with other systems providing similar services. In general a cost per trip of approximately \$1.50 is an objective which is rarely achieved for similar services or for that matter, more limited loop systems. The addition of more new vehicles and new drivers and dispatchers show the efficiency curve of cost per passenger mile and cost per mile down for a period, the nutrition program swinging into operation with group riding will bring up the efficiency."<sup>6</sup>

**L. Operational Statistics.**—Usage of the transportation service has increased steadily. This is demonstrated by passenger trip<sup>7</sup> figures for the last six months: 1973—August, 9,612; September, 9,553; October, 10,170; November, 11,208; December, 11,394; 1974—January, 14,556.

Medical appointments represent 17.4% of the total passenger trips. The continuing expansion of group meal programs for the elderly has resulted in more trips for group meals and food shopping (33.4% and 29.6% respectively).

Medical figures are lower than the nutrition category because medical trips usually involve one or two persons per vehicle trip. Most health screenings are taking place in elderly Public Housing Developments where transportation is not needed. Group meals and food shopping trips are more efficient because they have an average of 6 to 11 persons per vehicle per trip.

The typical client using this service can be described as a widow, 70-79 years of age, living alone, in public housing, and taking a trip late in the morning for 3 to 5 miles. The clients ages are: 55-59, 0.8%; 60-64, 16.7%; 65-69, 29.9%; 70-97, 40.1%; 80-over, 12.5%.

35.4% of the clients were married, and 64.6% were single, widowed, or divorced.

Of the total client group, 12.5% were male and 87.5% were female.

**Trip Time.**—Most trips are made early in the day with 25.2% between 8:00 and 10:00 a.m., 36.1% more before noon.

**Living Conditions Of Clients.**—Living conditions of clients are as follows: 49.2% are living alone while the remaining 50.8% are living with spouse, other relative, or nonrelative.

Probably because of "word of mouth" communication 43.7% of the transportation clients came from public housing. Of the remaining 56.3%, 20.9% live in single family dwellings, while 57.4% reside in multi-family dwellings.

**Trip Lengths.**—The average trip is approximately 5 miles in length. The length of trip varies based on the area which the vehicle serves, whether city bound, suburban, or rural: 17.8% made trips of 0-3 miles, 42.0% made trips of 3-5 miles, 19.5% made trips of 5-10 miles, 7.0% made trips of 10-15 miles, 13.7% made trips of more than 15 miles.

**Conclusion.**—Rhode Island Division on Aging operates a Statewide, demand-

<sup>5</sup> Cost projection of \$1 per trip was made before the upsurge in the price of gasoline. Although this figure is still a goal, it may not be attainable unless the "gasoline crisis" subsides.

<sup>6</sup> Carstenson & Associates, "Rhode Island Senior Citizens Transportation Study," Fall, 1973.

<sup>7</sup> A passenger trip is defined as a one-way trip either from point of origin to point of destination or vice-versa. Approximately 98% of all trips required round trip accommodation of senior citizens.

response, minibus system for older citizens. The goal of this service is to assist the elderly in remaining independent by enabling them to meet their basic needs in health and nutrition.

We are continuing our efforts to expand the system in order to meet the growing transportation needs of our older Americans. As the cost of operating a private automobile rises, and as the number of persons over 60 increases, the "transportation crisis" in our society is becoming more acute.

In less than two years, local and Federal resources have come together to produce a system of twenty-seven vehicles. Carstenson and Associates' consultant report has said that "Rhode Island stands out \* \* \* in developing the first system that includes an entire state \* \* \* it is working and working well. Its primary problem is lack of vehicles and operating funds to provide a thorough dial-a-ride system." The report states that forty-five vehicles are necessary to meet the need.

We are justifiably proud of our accomplishment in developing this unique minibus system, and have applied for continuing Federal support.

We urge your endorsement of specialized Transportation services for older Americans as part of National policy on Transportation.

We thank the Special Committee on Aging for this opportunity to report our experiences in Transportation.

Senator CHILES. Our next witness is Mrs. Margaret H. Jacks, director, Division on Aging, State of Florida.

#### STATEMENT OF MARGARET H. JACKS, DIRECTOR, DIVISION ON AGING, STATE OF FLORIDA

Mrs. JACKS. I do have a prepared statement, and the time is short, I know there are other people that have had a great deal to say.

Senator CHILES. Without objection, your prepared statement will be included in full in the record.\*

Mrs. JACKS. I particularly want to thank you for letting me have the opportunity to share with you some of the experiences that I have had in the 32 years that I have been working in this field.

Since 1951, I spent most of my time working with the elderly, so that I feel very close to the problems, and a very sincere concern over everything that has been said here today.

I would hope that one thing that comes very clear, out of all of these discussions of problems of the elderly and particularly the problems of transportation for the elderly, cannot be solved by looking at the elderly as a mass.

Somehow, out of all our experiences in all of the States, we should be able to pull out those particular things we know about the elderly, so that any plan that is developed will meet their needs.

I was interested in the last question that was asked about whether or not programs should be integrated, and I would like to say in the beginning, I do not think transportation for the elderly can ever be a simple part of an integrated mass transportation system.

For one thing, if there is to be adequate transportation for older people, it must have three, and possible four elements.

One, mass transportation lines must be so established that the older people can get to them, and there are not many of the older people that can do this.

They simply cannot get to the main lines of transportation, so there will have to be some system of feeder lines, if you please, that would go from the mass transportation line out into the places where the older people live.

\* See prepared statement, p. 60

## PORTAL TO PORTAL TRANSPORTATION

Second, many of the older people, who because of disabilities, arthritis, other limiting conditions, cannot even walk the short distance to a feeder line, and it means if you must have some way of portal to portal transportation, for this elderly person, if the needs are to be met.

Also in some way we must have a way of meeting emergency needs.

There are so many older people now who are alone, who really have no one who even knows they are alive.

This is particularly true in Florida, where people have come from all of the States to live.

Their families are not living. They have not made close friends. Emergencies arise, and they have no one to whom to turn to.

There must be some way to meet this emergency need, and many times, when this kind of situation arises, there must also be an escort service, because one person, going in a car, a minibus, or in any kind of transportation, cannot handle the problem of the older person by himself. It is not a simple problem, but somehow through all of the things being done in all of the States, some pattern should emerge. There are many experiments going on in Florida, and I am sure there are in many other States. We ought to be able to identify these particular needs, and take these into consideration in planning the mass transportation.

I had not intended to say all that. From all that has been said, I felt I must say it. I would like to talk primarily about Florida, since that is the place I know best.

We now have 1.5 million people in Florida 60 years of age and older.

Many of these live along the coastal lines, on the east coast, down from Jacksonville to Key West, and up the west coast to Pasco County, which happens to be north of St. Petersburg, a community which most people know about.

That is where your mass of older people live, but in thinking about the needs of older people, I want to point out to you that in central Florida, from the very tip of the State up through the middle of the State, and over through what we call the "panhandle" to the Alabama border, there are numbers of counties with numerous older people. They do not have the concentration that they have on the coastal lines, but these are the people where the resources are very, very scarce, and practically nonexistent.

Incidentally, I would also like to share with you that in these rural counties, particularly up in the Panhandle, the income is alarmingly low.

## INCOME BELOW POVERTY LINE

I checked the number of people whose income was below the poverty line, and in the majority of those rural counties the number of elderly people's income was below the poverty line ranging from 25 to 63 percent, with the large majority of them running from 40 to 50 percent.

This in itself says a great deal about their ability to purchase transportation.

This also ties in with the ability to get the kind of care they need. I almost hang my head in shame, when I mention to you that there are three counties in Florida where there is no doctor.

There are 20 counties where there is no nursing home, and 8 counties where there is no hospital.

Many of these counties overlap, so that the problem of getting medical care to the people who live in these counties, in Florida, is extreme.

It happens in these counties, transportation is practically non-existent, except for one small group where there is a project going on that does help in some ways.

There is also division of family service workers, who try to do their best to help. I think there is a common misconception about the extent to which neighbors out in rural areas, and relatives can be helpful.

To begin with, a lot of the younger relatives have moved away. The percentage of older people in these rural areas will speak to this end, and many of the neighbors that you might think the older persons can depend on are in the same position themselves. They, too, need these services, and they simply do not have the income to be able to make these trips without being reimbursed, and these costs in Florida range anywhere from \$2 to \$10 a trip.

I refer particularly to one 81-year-old man who lives in one of the rural areas. Everytime he goes to the store, or to get his prescriptions filled, it costs him \$5 to get there and \$5 to get back home.

Another problem in Florida, and while it has its positive aspects it does cause problems, is the fact we now have a new driver's license law. The older person must pass an examination, and this includes an eye examination.

I was startled when I called the State agency that handles the issuance of driver's licenses just before I left, and I asked them how many people had lost their licenses, and he said, "I am sorry, I cannot tell you how many were denied their license, but you will be interested in knowing that since this law was put into effect, on the average of 900 older people have turned in their licenses voluntarily every month, because they know they cannot pass the driver's test."

I was chatting before this meeting with someone, they said they believed the last time they were in St. Pete was 3 or 4 years ago, they thought they were going to get run down while crossing the street. I think this has improved somewhat, so this law is a positive factor as far as the general population is concerned, but it certainly has added to the complexities of the older people in Pinellas County, where there are so many older people. It has had the same effect statewide.

I was a little afraid when I went in to get my own test the last time, but I did pass it.

#### NO WORRY OF POPULATION EXPLOSION

We have tried to do something about transportation. We are concerned about it. You know, Florida is a big State. It is a very big

State. I was surprised to learn that from Key West to Jacksonville to Pensacola, it is farther than from Jacksonville to New York,

There are long distances in Florida. I do not worry too much about the population explosion when I drive over Florida, because you can drive for miles and miles and miles and see no habitation. There are many miles running between orange groves in the central part of the State, there are miles that go between vegetable farms in the southern part of the State. Up in the west and northwest counties, there are miles that go between tobacco farms.

I am not talking about people that run these farms. I am talking about people that formerly ran their own little farm, or their own little orange grove, and when they could do this work themselves they got along pretty well, but now that they are so old, they must hire help, it simply is not economically feasible for them to continue to run the farm or the little orange grove, so they lease the land to somebody else, to some of the big farmers, but they want to continue to live where they are comfortable, and where they are used to living. They find it difficult to do so, primarily because of the lack of transportation.

I would like to share with you one project we have been running under title III. It is in Brevard County. That happens to be where the space center is located. For a while, 3 years back, the elderly in Brevard County were only 8 percent of the population, but the space industry moved, and the property values dropped down, and in came the retirees.

It was a good bargain, so the older people moved in. The population of people over 60 in Brevard County is now close to 30 percent. This has happened in just the past 18 months to 2 years. We started a transportation program there, because there was no transportation in Brevard County except a jitney service that took the domestics over to Merritt Island.

We have been funding this project for nearly 2 years. They transport 3,700 people. This is the number of people they serve a year.

Of those 3,700, about 230 are transported each day on the main lines that go from the north to the south of the county. This county is 75 miles long, and 30 miles wide. Some go on the feeder lines. Some are transported as a result of a phone system where the bus can be called, and will go to the home in case of an emergency.

Senator CHILES. It is interesting. I was at Patrick Air Force Base about a week or so ago. They tell me that at the base hospital over half of the patients now are retirees as opposed to active duty military personnel.

The same thing is true of the commissary, the same thing is true of the PX. I think 56 percent of the purchases in the commissary are by retired personnel.

Mrs. JACKS. It is amazing what has happened in one county.

The same thing has happened in Hernando County. The number of older people have doubled. In a few sections the increase is sometimes as much as 200 percent in the last couple of years. We do not have transportation there, unfortunately.

I am going to give a figure which I am afraid of. The project figures show the cost of that project in Brevard County is only \$6.95

a year per person. It seems incredibly low, but I checked it out before I left Florida. It is not going to last at that rate much longer, because the buses are beginning to break down. This figure does not include the capital outlay for new buses. That is just for operating costs, but the figure sounds wonderful. However, I think we must watch these costs to be sure there are no hidden factors we have not accounted for.

#### MEALS PROGRAM USES 1,000 VOLUNTEERS

I would particularly like to share with you what is happening because of the energy crisis. Florida, I think, is probably as hard hit as any State in the Union. We too have used many volunteers. One of our home delivered meal programs uses 1,000 volunteers. This happens to be one in Pinellas County. In our title VII programs, because of the limitation of expenditures for social services, we have also used many volunteers.

For the last 3 weeks I have been deluged with telephone calls every day from these projects, because the people, not only the volunteers, but the staff cannot get gas to take the meals, either to be home delivered in regions, called "Meals-on-Wheels," or to the sites where there is a congregate feeding program.

I particularly worry about the home delivered meals, because, as you know, these are delivered to people who are homebound, or who are ill. Many have just come home from the hospital, and the vision of those older people sitting there waiting for a meal to be delivered, and it not coming, is a little bit hard to take. This is exactly what is happening because of the lack of gasoline.

In many of our title VII programs with a number of the congregate serving sites, we have to have buses to take the food from the place where it is prepared to the sites.

We have to provide the gas for these buses so that the food can be gotten there. In some places, the people have waited to no avail because the food could not be transported because of lack of gas. This cannot go on.

If we really believe in what is supposed to be done under the Older Americans Act in the way of providing services, to help maintain the independence of older people, to help them stay in their own homes as long as possible, to stay out of nursing homes, to stay out of institutions, then something has got to be done, and it has got to be done in a hurry.

Our homemakers cannot go out to the homes. The visiting nurses cannot get out to the homes. The older people cannot be brought into the senior centers. If they need this kind of transportation, I really feel very strongly that we must stand up and be counted in our belief in what should be done for older people.

I happen to have called Venice, Fla., the other day, because I have a relative who lives there, and she told me that one day there was not one drop of gasoline to be had in Venice. That as a rule when gas was available, people waited in lines for 1 to 3 hours to get 3 gallons of gas. This is true over most of the communities that are south of the middle part of the State.

We are not having such a hard time in the northern part as yet, but the situation is very serious.

## TRANSPORTATION—LIFELINE OF OLDER PEOPLE

Transportation is literally the lifeline of older people. If they are going to get to the place where they can get medical care, if they are going to get to the places, particularly in the rural areas where they can buy the food which they can no longer raise, get the clothing and the other necessities to live in comfort, there must be forms of transportation developed.

We all talk about the cost of mental deterioration, the rising cost of people in mental institutions, and I say to you, unless we can give these services, unless we can step in and help the older person to maintain his independence, to stay in his home, what this Nation is facing in the future years from the increased number of older persons who will need care is frightening. I do not think any of us can move too fast.

I would put in a plea to this committee with all of the consideration and concern that you have shown in the past, which I know is appreciated, we all appreciate it, but I think that this is the time that something must be done and done quickly, otherwise most of the programs for the aging are frankly going to go "down the drain."

Thank you so much.

Senator CHILES. Thank you so much, Mrs. Jacks.

Florida has many title III community services programs under the Older Americans Act.

I understand you insist every title III project has a transportation component built into it, a sound principle where services are not of much help if people cannot get to them.

Mrs. JACKS. We have been doing this for over a year.

Senator CHILES. I wonder if in so doing this, do you think we are running the risk of establishing a large number of small fragmented transportation systems serving small numbers of citizens?

How do we tie them into an overall State effort to meet the transportation needs?

Mrs. JACKS. Well, so far we have done it on a community by community basis.

For example, in Miami, where they do have a fairly good transportation system, a response system to the older people, this is funded partly by title XVI funds, partly by some title IV funds under a project we have there, and partially by the county.

In Brevard County, title XVI funds, and title III funds, were both being used for this, and when a cap was put on title XVI, we got the county to pick up that other part of the cost while we continued the title III funding to assume services to the elderly.

We have been very aware of the necessity for tying whatever we are doing with what is being done by other agencies in the same community.

We are trying very hard to work closely with the Department of Transportation.

You will hear some more about this later in the week, I understand.

## SPECIAL NEEDS OF THE AGING

I think planning transportation for the elderly must be part of the entire planning for transportation. I do not mean to say it should be planned in an isolated situation. Certainly it would be very foolish

not to maximize all of the resources, but as I tried to say earlier, I would reemphasize it, you cannot lose sight of the special needs of the aging, and sometimes I think when we try to develop a mass transportation plan, we lose sight of that fact. I was very interested in what was said by the individual from Rhode Island, who spoke just before I did, when she said that the physical feebleness of many older people make it hard for them to use mass transportation, the quick stops and starts are a hazard to them. The tall steps to get on to the bus and this usual bus design makes it difficult for the elderly to use them, so if you are going to have transportation for the elderly as part of the total planning for mass transportation, we should not forget those special needs.

Senator CHILES. Mrs. Jacks, has your office attempted to obtain from Federal sources a specific ruling that would permit emergency allocation of gasoline for nutritional or other essential service programs for the elderly?

Mrs. JACKS. I have been trying to work with the person who is heading this up in the State.

We have also written to the Regional Office of Aging, and expressed our concern about this.

Senator CHILES This is one of the things that the Governor with his set-aside provisions felt.

Mrs. JACKS. This is what we are trying to do at the present time. I was so desperate the day before I left, I started to take it upon myself to write a letter over my own signature to the gasoline stations, but I thought better of it.

Frankly, we have to do something. We did put in a report about 6 weeks or 2 months ago through the Office of Aging. They requested information from us on how many miles our volunteers and staff were driving in Florida.

I judge they are attempting to use this for this purpose. In one report, we reported that our volunteers drive 89,000 miles a month.

Senator CHILES. 89,000?

Mrs. JACKS. 89,000 miles a month in Florida.

Senator CHILES. I wish you would keep me informed on what is happening to these programs, because of the energy crunch, the Meals-on-Wheels, and all of these programs.

Mrs. JACKS. I would be delighted to. Lack of transportation results in a waste of money for one thing. When you are prepared to feed, for example, in Pinellas County, 1,100 people in 1 day, and you cannot deliver it, and you still have to pay for those meals, this is a waste of money.

Senator CHILES. We thank you for your testimony today, and we also thank you for the excellent job you are doing as head of our new division.

Mrs. JACKS. Thank you.

[The prepared statement of Mrs. Jacks follows:]

#### PREPARED STATEMENT OF MARGARET H. JACKS

I am Margaret Jacks, Director of the Division of Aging, a Division within the Department of Health and Rehabilitative Services of the State of Florida. I first wish to express my appreciation to each of you for the opportunity of appearing before you to share with you my concern and the concern of



others in Florida about the welfare of the elderly citizens of our nation, particularly with respect to their need for transportation. Florida is well-known as a "Mecca" for retirees. In many ways, it is an ideal place for the elderly to spend the latter years of their lives because of our warm climate and the opportunity of year-round outdoor activities which appeal to many. The elderly in Florida, however, are also faced with many problems just as they are in other parts of the nation. Fixed retirement income in a time of inflation such as we are now experiencing and a lack of resources, particularly in rural areas, poses many real problems to the older citizen. I applaud the efforts of this committee through hearings such as this to bring before the nation their day to day affairs in today's very complicated society.

For over 32 years, I have worked in various capacities in the field of social services. Since 1951, my experience has been confined largely to work with older or disabled adults. I have watched with some impatience the slowness with which the pendulum has swung from a very broad, almost impersonal consideration of the socio-economic factors affecting the life of the elderly as a group in such areas as housing, leisure-time activities, economic need, employment educational opportunities, and transportation to a clearer recognition that we must approach these factors in a more definitive manner, relating them to the needs of the elderly as individuals, not simply as a group. After the potential variety of situations and factors have been considered, only then can sound planning for meeting needs be completed.

Just as any age person, an elderly individual has many strengths and many weaknesses. He has positive factors in his situation and negative factors. Unfortunately, because of society's attitude toward the elderly as a whole, many of the older people feel rejected and that they are almost a forgotten group. This certainly is not true as evidenced by the passage of the legislation establishing Medicare, Medicaid, and recently, the attempt at establishing a floor below which basic income would not fall through the implementation of the SSI program. The problem seems to be that the numbers of older people have increased so rapidly that all that is being done still falls short of meeting the need and gives the older person whose needs are not being met, the feeling that people in general really do not care about his particular welfare.

I will be confining my remarks to the Florida situation since that is the area where I work and about which I am most familiar, although I feel sure similar situations occur in other states with large rural areas and long distances between urban communities.

Florida's elderly population which has now reached the total of 1,500,000 persons 60 years of age or older, tends to concentrate along the entire east coast of the state down to the tip of the state and up the west coast to the counties just north of Hillsborough and Pinellas Counties. However, there are still numbers of older people who live in the counties located in the central part of the state from the tip of the state all the way to the northern state line and westward through what is commonly known as the "panhandle" section. Of the 67 counties in Florida, 15 are entirely rural with 11 additional counties with individual population of less than 15,000. There are only 5 counties where public transportation is, universally available. In 40 counties there is no transportation except for an occasional small taxi service in some of the rural towns. In 22 counties there is limited transportation consisting of taxi service of a limited bus service which in several communities is a part of a demonstration project. There are several of these in Florida counties. It is my understanding that these will be discussed by other persons who will not go into those in detail.

In a number of the counties where there is no transportation, the Division of Aging has established projects which have in them a small transportation component. This, in no way, meets the total needs of the elderly, but does make it possible for them to participate in the activities which are provided in the projects supported under the funds made available through the Older American's Act. Unfortunately, in a number of these projects we have been using volunteers and the energy crisis is having a serious effect on the ability of such individuals to continue to be of service, even though they are willing to do so.

In preparing for appearing before you I tried to pull together some of the factors in the lives of the elderly in rural areas which affect their well-being. Since transportation is of primary interest to you in this day's deliberation

and for the next few days, I want to identify those needs of the individuals that are greatly affected by a need for or lack of transportation.

I learned, for example, that in three counties in Florida we have no doctors and no hospitals or nursing homes. Two of these counties are adjacent to each other and, fortunately, are adjacent to another county where there is an exceptionally good University Medical Center so that you cannot say that there is no medical care available. The question does arise, however, as to how those elderly in the other counties can get to the source of care. There is no public transportation in either of these counties. Between the two counties there are nearly 1,200 people 60 years of age or over. The distance from the closest county to the Medical Center is 37 miles. The distance from the next county is 65 miles. There is a doctor in another community 25 miles distant, but there is only one back country road from the edge of that county to that other community. There is no road from the other side of that county which makes this care inaccessible. Some people might say, "But there are only 1,200 older people out of 1,500,000 in the State, why be concerned when there is so much going on for the older people in those areas where large concentrations of them live? You can't do everything." But if you could talk with one 81-year-old gentleman with whom I talked and who is determined to live his remaining years on his small farm in that county, the need for transportation to a place where he can receive medical care or to any community where his need for groceries, clothing, and heating fuel can be bought, his situation becomes very real and very important.

In the other county where there is no doctor, the individual must travel approximately 50 miles in the only direction toward which medical care is available.

There are four counties in Florida in which there is neither a nursing home nor a hospital. There are, additionally, 13 counties with a hospital and physicians' services but no nursing home, so that if any of the older people in those counties become chronically ill and need long-time care they must be transported anywhere from 50 to 100 miles—far from their families and friends—with little likelihood of continuing any close personal relationships because of the distance and the lack of public transportation from their home town to the community where they are receiving care. In those counties, a total of 38,281 individuals sixty years of age and older face, potentially, this kind of situation.

It is true that we have Medicare. It is also true in Florida we have a limited Medicaid program but to what avail for these people when accessibility and lack of transportation are barriers which nullify the existence of such medical resources.

I asked individuals who have lived in these counties where the older people go for their groceries and other necessities. How far apart were the communities which provided a source of necessities which most of these people must buy? I am well aware of the stereotyped attitude that most people have about individuals who live in rural areas: That they can raise their own food; that they do not have to depend upon going to grocery stores; that neighbors will always step in and help; that people in rural areas feel so close to each other that they rarely have to worry about anything. The answers that I received from my inquiries quickly dispelled the validity of these attitudes.

I do not mean to imply that a sense of neighborliness does not exist in our rural areas. In times of emergency, help is frequently available. This help, however, becomes less and less available when it becomes a continuing necessity. In many rural areas, the younger family members have moved away. The neighbor, to whom the elderly must turn, may not be able to provide the needed service—may, in fact, be in need of the same service himself. Also, the income in many of Florida's rural areas is extremely low. Our State's fairly high per capita income is certainly not a result of cash income of the small farmer or the persons living in or around the many small communities scattered throughout the State. Because of low income the cost of operating a car is out of the economic reach of many.

Distances in Florida are long. For the person living in an isolated farming area, help is not as readily available as one might assume. As I ride over the northern and central counties of the State, I am continually amazed at the miles that go by without a sign of human habitation. Roads wind through miles of orange groves in the central counties and tremendous company-owned

farms in the south Everglades area; there are even some fairly large tobacco farms in the northwest counties, but the owners of these industries are not the people about whom we are concerned. The ones for whom we must plan are the elderly who once ran a small farm or a small orange grove when such was economically feasible because the owner was physically able to do a great deal of the work himself, and now is no longer able to do so. The elderly who live in and around small towns who must now depend upon purchasing his food, clothing, and other necessities must have some way of getting from where he lives to that source of supply. Very frankly, in our State this need for transportation for these particular groups of elderly is almost non-existent.

In one county where there are 2,459 individuals sixty years of age or older, no public transportation is available. Some live within a 15-mile radius of several small communities in that county, but for most the distance they must go is up to 40 miles for shopping and medical services. Three Divisions of Family Services workers in that county attempt to transport as many of the elderly to needed services as possible. Many of the older people depend on relatives or friends, but even when transportation is provided through this service, charges are made ranging from \$2 to \$8 depending on the distance. While there is a doctor in this particular county he will accept no Medicaid cases; therefore, the really needy older people must go the distance to another county, a distance ranging from 21 to 45 miles. The energy crisis in this county, as in many similar counties, is adding to the plight of these individuals since the prices of gasoline have gone up to as much as 60 cents a gallon and the charges for transportation have increased accordingly.

In another community I found that an elderly man who is trying to live on Social Security has to pay \$10 for a round trip each time he has to go to the nearby community to have his prescriptions refilled and to buy his needed groceries. I questioned whether or not there were neighbors who could take him. The reply was that the neighbors made the same charge that was made by the very small taxicab company who operates the only transportation in the entire county. I would like to quote from one or two of the reports which I received when I made inquiries into the availability of transportation in various counties. In one county the reply was, "There is a limited bus service with three routes but there is up to a five-hour wait for the return run from one community to another. There are no feeder lines available." In another county where transportation is indicated as being a limited service, the reply was, "There is a very limited private bus system which follows three main routes but there is no feeder system and the cost is 40 cents." In still another, "Mass transit is available after a fashion through a Volks Jitney Bus system. The buses run every half hour but follow only one highway between two communities." In still another, "There is a limited private bus system but no feeder lines. Taxi rates are out of the reach of those elderly who need it. Volunteers are used quite widely but recently they have found that they have to wait in long lines for gasoline and this is affecting their availability." Similar reports were received from a majority of the counties where there was any type of limited service.

As I reviewed information on the various rural counties in Florida, I found that the distances people have to travel to receive medical services, to buy their food stamps, and to do their shopping vary from 15 to 30 miles, some going as high as 35 to 40 miles, and in one instance, 52 miles. I do not want to paint the picture too gray, and I must point out that we in Florida are trying to do something about this. Our Division of Aging for the past two years has been funding as a demonstration project a transportation system in Brevard County. Brevard County, which incidentally is the county in which the Kennedy Space Center is located, is a long, narrow county—75 miles in length and 30 miles wide. For years there has been no transportation in that county except a small jitney company that transported domestics over to Merritt Island. Recently a public transportation company has been started in the very south end of the county. With the exception of these two facilities, no public transportation exists. As the space activities have been reduced, the aerospace industry has reduced its activity. Personnel employed by that industry have left Brevard County in large numbers and have been replaced by an ever-increasing number of older retirees. A recent evaluation of the project which we operate to serve the elderly gave me the following information: An unduplicated count of 3700 people are served by this bus system. While the bus has a fairly regular route, there is an arrangement for it to

provide portal-to-portal transportation for those elderly who need this particular service, with approximately 235 being served daily. The cost per individual served is \$6.95 per year. We are fearful of the results of the energy crisis and the effect it may have on our continuation of this program. Gas is becoming very difficult to obtain, particularly in the lower part of the state.

I would like to call your particular attention to the result which the energy crisis is having on the projects funded under both Title III and Title VII. Through the efforts of the grantee agencies, in many of these projects the transportation of the individual to the project site is provided by volunteers and in some instances in small mini-buses. For the home-delivered meals programs, commonly called "Meals-On-Wheels," delivery has been almost entirely by volunteers. The Title VII projects, where the individual must come to a congregate site to receive one hot meal a day and additional social services, volunteers are used in transporting the recipients. There is the additional problem in many instances of transporting the meals by bus from the preparation site to the various serving sites located in areas close to the homes of the elderly. Even with the brief time we have had with the Title VII programs, we are experiencing a tremendous demand for this service with many people being denied because of the limited number of meals that can be served.

In the past week my office has been deluged with calls from the majority of the projects threatened with inability to continue serving meals unless something can be done about providing them with a way of obtaining gasoline, both for the use of the volunteers and for the buses that transport the food. The situation is critical. The last telephone call that I received just before I left my office indicated that in the southern end of the state some towns were completely without gasoline. For the past several weeks all individuals have had to wait in long lines to receive as little as three gallons of gas. It is quite apparent that with this type of situation occurring the volunteers who have previously given generously of their time are failing to appear and in some instances prepared food has had to be disposed of because of the inability to get it to the serving sites. Fortunately, these situations have been rare, but unless something is done in the very near future to give recognition to the need for some special consideration to be given to the programs for the aged, including the Title III and the Title VII programs, the elderly individuals who have been benefitting from these programs are going to suffer. I think it is important to remember that the home delivered meals go to those individuals who are housebound, usually chronically ill and sometimes acutely so, and who without this service will be denied the very food that keeps them alive. The picture of an older person waiting with expectation for the one hot meal a day that he has been receiving and having no one appear is not a very pleasant one.

One of the situations which compounds the transportation difficulties of the older people in Florida is a very desirable but restrictive law which requires the reexamination of individuals when they apply for renewal of their drivers' license. This includes an examination of their vision. I inquired of the State Agency that has control of the issuing of the drivers' licenses and was interested to learn that since the implementation of that law in November 1971, they have had approximately 900 drivers' licenses voluntarily turned in each month by senior citizens usually accompanied by a letter explaining that they know that their vision has deteriorated and they believe that they should not continue to drive. Another interesting factor is that in the last two months since the energy crisis has become so acute, this figure of 900 has dropped down to less than 100 a month.

I would also like to share with you some of the more obvious factors which must be considered in planning transportation for the elderly. Mass transportation, as such, travelling on fixed routes and with traditional busses or other type vehicles being considered, is the answer to only a limited number of older people's needs. The distance from the place of their residence to the established routes provides the first barrier, particularly when there is any involvement of a disabling condition such as arthritis or other conditions which limit the mobility of the individual. The simple act of stepping up to the high step of most of the vehicles is in itself a hazard if the older person is able to get to the established bus route. The quick stops and starts of the

vehicle for a person who is not too steady on his feet can frequently result in disastrous falls or other types of accidents. The use of feeder lines covered by mini-busses is one way of overcoming the barrier of getting the older person from his home to the main routes of transportation. Many of the older people, however, have a need for emergency service which should be readily available for him. The special mini-busses and the vehicles used for emergency calls do not have to be elaborate but should be so constructed that boarding and exiting from the bus is achieved with a minimum of difficulty. There should also be arrangements for a lift, preferably on the rear of the bus, to provide for the wheel-chair and badly disabled individual to board the bus.

I do not pretend to know all the answers to all the problems of the elderly; and I must share with you the knowledge that while there are many older people who are still managing to live happily and in a fair degree of comfort on their retirement income in Florida, this is not true for approximately 23 percent of the elderly people in our state whose income is below the poverty level.

Transportation needs, however, are not limited just to the needy. It is my understanding that the Urban Mass Transit Act of 1970 called for action on behalf of the elderly which was not too effective. It is hoped that the provisions in the Federal Aid to Highways Act of 1973, which I understand provides more opportunities for action on behalf of the elderly, will result in more enthusiastic and constructive response. It is acknowledged that the cost of transportation can be high but compared with the cost of providing institutional care for the elderly who cannot receive proper medical care or needed food, clothing, and utilities because of a lack of transportation, makes the cost of transportation shrink by comparison. Care in a nursing home varies in Florida from \$450 to as much as \$800 to \$900 a month. The State and Federal Government will spend \$41,993,888 for the year 1973-74 in meeting the cost of care in such facilities. How much of this is a result of lack of care due to lack of transportation cannot be determined, but I would suggest to you it is one of the facets of the problem of providing care to elderly individuals which should be examined.

Being realistic, I am aware of the many demands made on government at the Federal, state, and local levels for desirable services for persons of all ages. I would like to close, however, with a plea that thoughtful evaluation be made of the potential problems which will face our nation in the coming years if the present growth in the percentage of aged continues without services of a preventive nature being provided to preserve the independent functioning of the elder citizen.

Senator CHILES. Our next witness will be Mrs. Frances M. Carp, Ph. D., project director, the Wright Institute, Berkeley; the Gerontological Society, accompanied by Mr. Harold L. Sheppard, Ph. D., chairman, Public Information Committee, the Gerontological Society; and employed as staff social scientist, Upjohn Institute, Washington, D.C.

**STATEMENT OF FRANCES M. CARP, PH. D., PROJECT DIRECTOR, THE WRIGHT INSTITUTE, BERKELEY, CALIF., THE GERONTOLOGICAL SOCIETY; ACCOMPANIED BY HAROLD L. SHEPPARD, PH. D., CHAIRMAN, PUBLIC INFORMATION COMMITTEE, THE GERONTOLOGICAL SOCIETY, STAFF SOCIAL SCIENTIST, UPJOHN INSTITUTE, WASHINGTON, D.C.**

Dr. SHEPPARD. Mr. Chairman, I am here to introduce Dr. Carp, on problems of transportation.

I only want to make a few remarks about what is the Gerontological Society, and quickly introduce Dr. Carp to you, because of the problem of time.

The Gerontological Society, unlike the other organizations here today, is a society of researchers encompassing the disciplines of biology, physiology, microbiology, people who study, for example, the processes to aging of cells, and all the way up through the social sciences.

The economists, the psychologists, are all concerned with this subject, and it is our major contribution, we think, to show the role of the research findings in the solution of problems of the aged.

I would like to go back for the committee's benefit and remind them of certain recommendations on transportation, research recommendations, made by the Committee on Transportation for the White House Conference on Aging, way back in 1971, mainly to indicate that very little has been done to implement these research recommendations.

First, there is a broad need for increased information about the characteristics, the problems, and the needs of the elderly, and the recommendation refers to the demographic distribution; the potential use of time in relation to latent demand for transportation and pedestrian behavior, and problems including those which the elderly share with other groups, the poor, the handicapped, and the similarities and differences of problems between the elderly and younger age groups.

Certainly, a set of recommendations calling for developing a more precise definition of aging, for specific purposes.

These definitions include mobility limitations and elderly group norms for design applications, and finally, it was recommended for consideration by the White House Conference, and this to me is the important one, that greater application and utilization of knowledge be made with respect to the needs of the aged and the handicapped.

This application should be directed toward quantifying behavior so it may be introduced in transportation planning, improving urban design and transportation planning to accommodate the needs of the elderly, and to improving existing transportation systems, including signs, timetables, and mapping.

It is our concern, Senator, that many ideas coming out of a crisis, of trying to put out fires, should not be really implemented until there is a careful look through some research effort and some use of existing knowledge which people do not know about, but these should first be looked at before jumping into the solution fray and possibly creating more problems that we solve.

Now, Dr. Carp has a statement she would like to introduce for the record, and she will probably want to summarize her presentation, and I hope she will discuss, to give one example, what does it mean to say let us use the schoolbuses when the kids are not using them.

This sounds good at first sight.

Is it really good when you try to implement it?

That is all I want to say at this time.

Senator CHILES. Thank you very much.

Dr. Carp?

Mrs. CARP. Mr. Chairman and members of the committee, it is a privilege to take part in these hearings. My remarks will be based on research data about which I have firsthand knowledge. They will focus

around two points: (1) What do we know about transportation and the urban elderly? and (2) what do we need to know and do?

Transportation only recently has been recognized as a central problem for older Americans. It was the "sleeper" issue of the 1971 White House Conference on Aging, surprising most people by ranking third in importance to the delegates, preceded only by income and health.

At present, nearly three-fourths of elderly Americans live in urban areas (U.S. Bureau of Census, 1973), and the tendency for old people to congregate in cities probably will persist (Gibbs and Davis, 1958). Therefore, the situation of the urban elderly—which I understood to be the topic for this hearing—is an important focus for coordinate research and planning.

### TRANSPORTATION AND THE URBAN ELDERLY

Limited mobility is a serious problem for the urban elderly who, like those of all ages, must go out of their homes and into the community in order to meet their basic life-support needs as well as for companionship, personal enrichment and community service. Evidence suggests that the limited mobility of older people is largely due to situational constraints, not to age-related changes in the desire to go out into the community.

The frequency of excursions out of the home, or indeed the possibility of making them at all, is highly dependent upon the availability of transportation. In order to view the trip-taking behavior of oldsters in context, to see the extent to which it does vary from that of younger adults, table 1 compares San Francisco Bay Area residents aged 65 plus with those 35-44. This table does not show frequency of trips, but only whether the person ever goes out of his home to various types of destination and, for those who do go, what means of transportation they usually use. Several things are immediately apparent.

TABLE 1.—PERCENTAGE DISTRIBUTION OF TRANSPORTATION MODES BY TRIP PURPOSES FOR TWO AGE GROUPS<sup>1</sup>

Trip purpose		Do not go	Transportation Used			
			Drive	Driven	Public Tr.	Walk
Food.....	65+	13	33	14	11	31
	35-44	15	60	7	5	15
Other shopping.....	65+	18	32	11	20	20
	35-44	10	61	7	13	11
Friends nearby.....	65+	32	22	5	5	36
	35-44	24	43	3	3	30
Other friends.....	65+	29	35	17	18	2
	35-44	17	61	8	11	1
Religious.....	65+	42	21	10	7	18
	35-44	50	30	4	2	14
Doctor/Dentist.....	65+	14	33	13	30	9
	35-44	14	59	5	16	4
Out to eat.....	65+	46	25	11	5	11
	35-44	21	59	9	3	9
Entertainment.....	65+	71	12	5	4	7
	35-44	27	53	9	6	5
To the country.....	65+	52	25	16	7	1
	35-44	29	54	11	5	0
To the city.....	65+	50	17	9	20	3
	35-44	38	42	6	12	38
Parks.....	65+	76	8	4	8	6
	35-44	28	48	5	6	13

<sup>1</sup> The rows do not total 100% because a few respondents used taxis or cycles, and a few who no longer took such trips named the mode they formerly used.

N=717.  
Bay Area 1972.

For most types of trip, far more old than young-adults "never" go. The exceptions are food shopping (which other data show that many old people would prefer to do less often but cannot, because of the size of the load), medical-dental care (which is probably more greatly needed among the old), and attendance at religious services. Far fewer old people "ever" go outside their homes to eat, to go to places of entertainment, to the country, to the downtown area or to parks. Somewhat fewer old people go out to see friends in the local area, and the discrepancy between age groups is greater in regard to going farther from home to see friends who live elsewhere in the metropolitan area. Without doubt, the old are less mobile than the younger adult.

Evidence suggests that this restriction of movement into the community is not due to lack of interest, but rather to lack of transportation. Table 2 shows the response of a group of old people in San Antonio when they were asked to evaluate their transportation to various destinations and whether they would go to those places more or less often, or about the same as at present, if transportation was not a problem. Roughly 10-20 percent were sharply dissatisfied with their transportation to various destinations, and the proportions who said they would go to those places more often if transportation was not a problem ran much higher—86 percent in the case of senior centers and 68 percent in that of sports events. Generally, the places to which they would like to go more often are those to which they are, at present less likely to go than are young adults.

TABLE 2.—EVALUATION OF THEIR TRANSPORTATION

Destination	Evaluation of Transportation	
	Percent dissatisfied	Percent would go more if transportation
Friends.....	11	25
Children.....	14	30
Other kin.....	15	25
Doctor.....	20	6
Church.....	13	21
Grocery.....	20	20
Other Stores.....	15	15
Meetings.....	9	25
Entertainment.....	10	37
Senior center.....	9	86
Library.....	11	45
Sports.....	11	68
Travel.....	21	50

<sup>1</sup> An additional 20% would go less often.

N varies with destination.

SA 1968-1969.

These responses underestimate the problem, because the questions were asked only of those old people who made each type of trip—the travelers. Table 3 shows the responses of a group of elderly San Franciscans, all of whom were queried, so that it includes those for whom lack of appropriate transportation made some types of trips impossible. When the entire group is included, nongosers as well as goers, the percentages of dissatisfaction with transportation are much larger, ranging from 16-41 percent for various types of destination. This evidence from two metropolitan areas suggests that transportation is a strong



constraint upon the mobility of older people: That necessary trips into the community are difficult and that, not infrequently, problems with transportation make trips impossible.

TABLE 3.—DIFFICULTY WITH TRANSPORTATION

Destination	Percent very difficult, impossible	Destination	Percent very difficult, impossible
Doctor.....	32	Grocery.....	16
Religious services.....	37	Other stores.....	19
Children.....	1 25	Out to eat.....	25
Other relatives.....	1 27	Park.....	41
Friends.....	20	Other recreation.....	25

<sup>1</sup> Of those with children, other relatives in the area.

N=899.

San Francisco, 1970.

Table 1 also shows that for both younger and older adults, most trips into the community are made by automobile and the largest proportion of them, as driver. It also shows that trips as driver are much more common among young adults than among the old, for every destination.

In view of the preeminence of automobile transportation, and the differential driving rates of old and young, it is instructive to look at the availability of cars across age groups (see table 4). The old are far less likely to be drivers themselves (45 to 73 percent) or to live in households which include a driver (25 to 57 percent). Car ownership is less likely (51 to 76 percent), and multiple-car households were less common among the old. Their opportunities for automobile transportation are, therefore, much less than those of younger adults.

TABLE 4.—PERCENTAGE DISTRIBUTION OF AUTOMOBILE TRANSPORTATION OPTIONS

Transportation	Total	By age group					
		18-24	24-34	35-44	45-54	55-64	65+
Drives.....	73	77	82	80	74	64	45
Others in family drive.....	57	69	61	64	59	52	25
Number of cars in household:							
None.....	24	21	19	18	21	28	49
1.....	49	52	53	50	46	46	42
2.....	22	20	23	27	27	22	8
3+.....	5	6	4	5	7	3	5

N=2541.

San Francisco Bay Area 1972.

This evidence further supports the view that mobility is limited by the situation rather than by preference; and, specifically, that lack of an automobile or of the ability to drive is a severe constraint. The higher incidence of "never" going places among the old is probably due to lack of transportation as convenient as an automobile to take them there, not to lack of interest in going.

Is this situation likely to change? Stated reasons for giving up driving are financial status, insurance and health problems, and loss of license. Problems experienced by older people still driving are attributed by them as due to age-related changes in people (such as vision,

slowing, nervousness, and crippling or stiffness) and as due to changes in conditions of driving (such as traffic speed and congestion, and confusion of freeways and interchanges) (see table 5). Considering the reasons for nondriver status among the old, and the problems experienced by older drivers, it seems unlikely that drivership status will increase among the elderly. To the contrary, if traffic continues to increase in speed and complexity, retirement from driving may occur even earlier; or, if the energy shortage increases gasoline prices and/or environmental considerations reduce driving rates for the population as a whole, the reduction is likely to be greatest among the old.

TABLE 5.—Reasons Older People are Less Secure About Driving

Reason:	Percent
Age-changes in people:	
Vision.....	82
Slowness in responding.....	79
Nervousness.....	75
Crippling.....	62
Lack of confidence.....	58
Difficulty in adjusting to new things.....	55
Changes in driving conditions:	
Speed of traffic.....	60
Number of cars on road.....	51
Freeways and interchanges.....	51
Streets and roads.....	23
Design of cars.....	17
Traffic signals.....	14
Other drivers.....	3

N=443

Percents do not add to 100 because categories are not mutually exclusive.

San Antonio, 1968-69

As a consequence of the lesser availability of automobile transportation which seems to come with age, elderly urban residents tend to be dependent upon public transit and their feet to take them places. Table 1 reflects this tendency, also. While for both old and young, public transit is used far less than the automobile, transit accounts for a larger proportion of the trips of those 65 plus. Because of the centralization of community facilities, many destinations lie beyond walking distance for most urban residents, so that vehicular transport is necessary or the trip cannot be taken.

#### EXISTING PUBLIC TRANSIT PROBLEMS

Older people experience a number of serious problems with public transit. Often it does not go to the places they want to go, or by circuitous routes. Schedules tend to be infrequent during nonrush (and special rate) hours, and vehicles are crowded at others.

The trip itself tends to be a trying experience. Table 6 summarizes the report of San Francisco elderly regarding problems during the course of a typical trip by pre-BART public transit. These problems were defined as sufficiently serious so that thought of them often caused the person to decide not to go. At each phase of the trip from home and back again, large proportions reported problems. It should be emphasized that San Francisco had fairly good public transit, even prior to BART. More of the elderly residents there rode the bus, and they were more favorable in their evaluations than were, for example, the older residents of San Antonio. It should also be pointed out that their apprehensions were not entirely without foundation. While 77 percent

were afraid of falling when getting off the bus, nearly 20 percent of them had actually had such a fall, and the majority had witnessed one or more.

TABLE 6.—*Problems with bus trips*

Problem:	Percent who reported it
Walk to transit.....	38
Tiring wait for vehicle.....	80
Lack of shelter while waiting.....	88
Afraid at bus stop.....	66
Fear of falling while boarding.....	65
Fear of being late.....	63
Fear of doors.....	59
Keeping footing on vehicle.....	70
Missing the right stop.....	58
Drivers rude, unhelpful.....	39
Transferring.....	36
Fear falling, getting off.....	77
Too tired to walk home.....	52
Afraid to walk home.....	72

N=899.

San Francisco, 1970.

The recent move toward new mass-transit systems in this country therefore has particular relevance as a possible solution to many problems of its older citizens. The Urban Mass Transit Act of 1970 specifically calls for action on behalf of the elderly. Once built, fixed route systems will be around for a long time. It is therefore essential to insure that they meet the needs and support the capabilities of old persons.

The first experience with a new fixed route rapid transit system in recent years will come from the Bay Area Rapid Transit (BART), the first of its kind to be built in the United States in over 50 years. BART is a regional rail-type system that connects San Francisco with cities in Alameda and Contra Costa Counties. It has 34 stations, 9 at ground level, 14 elevated on aerial structures, and the remainder underground. Nearly one-third of the 75 miles of track are elevated on a concrete structure, another third are at grade level, and the remainder underground. The system's right-of-way was designed to follow existing transportation channels as much as possible. Thus, while sections of BART stand alone, much of the track runs down the median of a freeway, parallels railroad tracks, or runs along arterial streets.

To enlighten planning decisions in other urban areas as well as in the San Francisco Bay Area, this new system should be carefully evaluated. A "package" of BART impact studies is underway, through contracts administered by the San Francisco Bay Area Metropolitan Transportation Commission, and funded by the U.S. Departments of Transportation, and of Housing and Urban Development. It is essential that these studies include adequate attention to the older segment of the population and/or that they be supplemented by studies focused directly upon the elderly.

To date, only "pre-BART" data have been collected, which will provide a baseline of conditions before the new system became operational, and which provide some information regarding expectations.

## TWO TYPES OF IMPACT

Any transportation system has two types of effect. One, which might be called "internal," is exerted upon the traveler; the other,

which might be called "external," is exerted upon the area through which the system runs.

Traveler.—Data regarding expectations of BART as a travel mode are available from a study conducted in San Francisco in 1970\* and from one study in the BART impact studies "package." The former included 899 residents of San Francisco aged 65 and over, and the latter included 47 persons aged 65 and older augmented by 5 retired persons under the age of 65 to comprise a total panel of 52 residents of one part of the east bay.

In 1970, the San Franciscan residents were about equally divided regarding BART's expected impact upon their travel. About a third thought they would benefit, about a third thought BART would have negative effects upon their ability to get about, and the other third thought BART would make no difference to them. Most of those who expected BART to assist their travel also expected it to be a subway system similar to that in New York or Chicago, which would have stations in residential areas of San Francisco. In actuality, BART's San Francisco stations lie along Market Street, and its configuration, in general, resembles that of a commuter train rather than that of a subway system. Those who expected BART to have no effect on their travel behavior generally held this view because they knew something about the system and realized that it would be irrelevant to their transportation needs. The remaining third, who expected BART to have a negative effect upon their ability to get about, anticipated some reduction in other public transit, such as buses, when the rapid-transit system went into operation. (Early experience in some areas suggest that this anticipation may have been realistic.)

Table 7 is taken from the BART impact study "package" and summarizes projected use of BART to reach various destinations. Anticipated regular use of BART was small, ranging from 0-6 percent for most types of trip, and up to 14 percent for shopping. Even occasional use was expected by relatively few. For most types of trips, less than 10 percent expected to use BART even occasionally; occasional use was expected to be greatest for shopping (31 percent), sightseeing (21 percent) and to visit friends (19 percent).

TABLE 7.—ANTICIPATED BART USE

Trip purpose	Frequency of BART Use	
	Regularly	Occasionally
Shopping.....	13.5	30.8
Visit friends.....	3.8	19.2
Religious services.....	0.0	3.8
Meetings.....	3.8	5.8
Doctor.....	5.8	5.8
Dentist.....	1.9	5.8
Government offices.....	0.0	11.5
Movies, plays, concerts.....	1.9	15.4
Spectator sports.....	3.8	9.6
Participant sports.....	0.0	1.9
Restaurant.....	3.8	9.6
Sightseeing.....	3.8	21.2

N=52.  
East Bay 1972.

The most common reason given for expecting not to use BART was the location of the stations. They were too far from home and/or from

\*Supported by DHEW Administration on Aging research grant No. AA-4-70-087.

the desired destination to walk, and vehicular feeder-distributor transportation was not available.

These older respondents anticipated some problems during the BART trip. They were concerned about the type of people who would use the system (65 percent), expected to have difficulty keeping their footing on the BART vehicle (33 percent), expected the BART cars soon to be in bad shape (50 percent), anticipated that the system would be too big and confusing to them (31 percent), and that crime would be a problem around the stations (29 percent).

Only 17 percent said they expected to have "no problem" in using the BART system. However, they also expressed favorable anticipations: That the BART cars would be nicely decorated (67 percent), and well ventilated (79 percent), that it would be possible to find a seat (62 percent), that the ride would be comfortable (85 percent), and that it would provide a good opportunity for sightseeing (62 percent).

Fifty-two is a small group of people from which to draw generalizations, and all were from one part of the east bay. Nevertheless, their reactions suggest some reservations and some favorable expectations about the new system on the part of old people.

Special design features.—One of the unique characteristics of BART is its inclusion of special design features intended to remove or reduce barriers for the physically handicapped. These factors should, of course, prove especially advantageous to the old, among whom physical disabilities tend to be more common. Since this is the first attempt to build a system which is barrier-free, it is particularly important that the design features be carefully assessed, in order that future systems can benefit from the BART experience.

The need for study, prior to copying in other cities is accentuated by the fact that the special design features were introduced late in the design process, when construction was underway. It must be anticipated, then, that experience with the system can suggest improvements for others and even, perhaps, modifications in BART itself. In housing for the elderly, it has been demonstrated that special design features intended to assure safety and convenience may actually prove to be unusually inconvenient and even dangerous.\* The same may well be true for transportation systems. No matter how well intentioned the designer, an environment must be evaluated in use and by users to validate its appropriateness for the intended clientele.

#### EFFECTS UPON THE ENVIRONMENT

Freeways, arterials, railroads, and rapid transit systems affect residents not only as travelers but also through their influences upon the quality of the environment in terms of such factors as noise, air quality traffic congestion, safety, and convenience. These effects upon the local residential area may be of particular importance to older people. They tend to remain, more than persons in other age groups, within their own neighborhoods, and so have greater exposure to conditions there. Also, they tend to be more vulnerable to negative features such as noise and air pollution, and to dangerous conditions on local streets. With 75 miles of track and 34 stations, BART is a feature of many neighborhoods. In fact, over a third of a five-county

\*Carp, Frances M. *A Future for the Aged*, 1966.

bay area population lives within 1 mile of the system. A second study in the BART "package" deals with the impact of BART upon the residential areas through which the system runs. In it, a sample of 2,541 persons aged 18 and older who live within 1 mile of BART were asked about the effects they expect the new system to have on their local areas.

As table 8 shows, there are positive expectations, the most important of them mediated through an anticipated reduction in automobile travel due to ridership on BART. As a result of BART, people expect less traffic on freeways (65 percent) and less air pollution. BART increases their pride in the modernity of their city (49 percent), will make their local area look better (33 percent), and will make it quieter (28 percent). It will allow them to enjoy the outdoors more (24 percent), will make the local area safer (22 percent), will provide a better area for children to play (19 percent), and for the neighbors to get together (17 percent).

TABLE 8.—*Anticipated effects of BART*

	Percent
Less traffic on freeways.....	65
Less air pollution/less cars on road.....	62
More pride in modern city.....	49
Better looking area.....	33
Quieter.....	28
More walks, exercise—enjoy outdoors more.....	24
Area safer than now.....	22
Better area for children to play.....	19
Neighbors—better place to get together.....	17

N=2541.

San Francisco Bay Area 1972.

However, as table 9 indicates, there are also negative anticipations. The most prevalent is that taxes in the local area will increase (69 percent). Other concerns stem from anticipated commercial and high-density residential development, loss of open space, and more facilities to accommodate the automobile. If these expectations come true, some will have especially deleterious effects upon the older residents, with their restricted financial resources.

TABLE 9.—*Anticipated effects of BART*

	Percent
Taxes go up.....	69
More apartment buildings.....	56
More parking lots, garages.....	47
Less open space.....	46
More stores.....	44
More high rises.....	42
Property bought by people with money.....	42
More offices and industry.....	38
More subdivisions.....	36
BART stations provide hiding places for "shady characters".....	35
Stores will lose customers.....	34
Increased parking problems for residents.....	34
More salesmen.....	31
Danger of children, adults straying into BART tracks.....	28
More auto traffic.....	26
Danger of BART going off tracks.....	24
Homes up for sale.....	22
Undesirable people.....	21
More trash or litter on streets.....	18
More dirt or dust in air.....	14

N=2541.

San Francisco Bay Area 1972.

Around the BART stations, land-use experts expect commercial and highrise, high-cost residential development. One likely result will be the squeezing out of most older people from present dwellings from which BART is accessible for travel. Old people are likely to become more concentrated in areas through which the tracks run. In these areas, any negative effects such as noise and light from the BART cars, danger, or interruption of access routes will be felt, unalleviated by the utility of the system for purposes of mobility into the community.

Even before BART trains began to run, there was an observable tendency for older people to be concentrated close to it, as they are also to other transportation systems such as freeways, arterials, and railroads. The "transportation corridor" is not a highly desirable place of residence. Those who can, move elsewhere; those who cannot, such as the old, the poor, and members of ethnic minorities, tend to accumulate within it.

### BART RELATIVELY QUIET

The rapid-transit line may prove to be a "better neighbor" than the freeway, arterial, or railroad, in terms of direct effects upon the quality of the environment. BART creates no emissions into the air along the route, but only at the powerplant. It is relatively quiet. It may have favorable secondary effects if there is a significant general shift from the automobile. However, local secondary effects mediated through automobile traffic on local streets and especially through changes in land-use and land-value may prove problematic for the old. Monitoring of the impacts of BART upon older residents of the bay area is essential in order that the unique advantages of rapid transit for the older resident can be maximized in the bay area and elsewhere, and its disadvantages for them moderated.

Attention to transportation—on the part of both services and research programs—has focused on vehicles. Walking, an alternative for getting from place to place and a necessary adjunct to public transit, has been largely ignored. A long history of medical research documents the health benefits of walking; more recently, ecologists urge its use to reduce environmental pollution. Despite these values, pedestrianism remains a minor transportation theme in the United States.

However, certain population subgroups in this country, including the old, are highly dependent upon their feet to take them places they need and want to go. Their use of the automobile is limited and public transit entails problems. Therefore, the old are forced to walk.

Unfortunately, this dependence upon pedestrianism is accompanied by vulnerability to its hazards. People aged 65 and over contribute a quarter of the Nation's pedestrian deaths, while they comprise only about 10 percent of its population. It is not clear to what extent the high fatality rate is due to sensory-motor and other age changes, and to what extent it reflects the higher incidence of walking among older people. Attention to the plight of this group, among whom walking is both necessary and problematic, is overdue. Investigations using older respondents may cast light also upon the lack of enthusiasm for walk-

ing among the nonaged, for whom other options are more commonly available.

Studies in San Antonio and San Francisco\* document the dependence of older people upon their feet and emphasize the need for attention to the problems of the older pedestrian. The consistency of findings in the two quite different cities lends credence to the wider applicability of the conclusions and their generalization to other urban areas.

Walking is a common form of transportation for old people in both cities. In San Francisco, nearly 60 percent used their feet to take them some place every day, and over 80 percent made several walking trips each week. Less than 5 percent "never" used their feet for transportation, and nearly 40 percent said they walked to all or most of the places they went.

Though walking was common, it was not well liked as a means of transportation. In both cities, the more dependent a person was upon pedestrianism, the less he liked it. The sanguine evaluations of walking came from people who generally went places in cars.

TABLE 10.—*Problems with walking*

Problem:	Percentage of respondents <sup>1</sup>
Destinations too far.....	83
Depends on weather.....	78
Hills.....	72
Fears.....	65
Tired, feet hurt.....	55
Takes too long.....	52
Health problem.....	37
Traffic confusing.....	36

<sup>1</sup> Does not add to 100% because categories are not mutually exclusive.  
N=899

With the exception of the hills, which were unique to San Francisco, the specific difficulties encountered were very similar between the two cities. Those voiced in San Francisco are shown in table 10. In both cities, the most commonly mentioned problem was that places they needed to go to were too far from home to walk. Some desired destinations were at such distances that no attempt was made to go to them. Others were at sufficient distances that the trip was overly time-consuming and the walkers became weary and footsore. Fears were prevalent—fear of falling, being hit by a car, being attacked, becoming lost. Traffic is confusing to many. The inconvenience and hazards of going on foot are intensified by poor health, inclement weather, hilly terrain, and bulky or heavy packages. The old are not alone in expressing fears regarding conditions of walking in their residential areas. Table 11 shows the responses of bay area residents aged 18 and over to questions about conditions in their local residential areas which "bother" them. Among that general adult population, 78 percent were concerned about being hurt in traffic or hit by a car in the local area, 74 percent about being attacked on local streets, 55 percent with having to walk where there was no sidewalk or walkway, and 48 percent about being injured in a construction zone.

\*Supported by DHEW Administration on Aging research grant No. AA-4-70-087.



TABLE 11.—*Pedestrian concerns*

	<i>Percent "concerned"</i>
Being hurt in traffic, hit by car.....	78
Being attacked on street.....	74
Having to walk where no sidewalk, walkway.....	55
Being injured in construction zone.....	48

N=2541.

San Francisco Bay Area, 1972.

Despite the serious disadvantages, walking was seen by older people in both San Antonio and San Francisco to have significant potential values. For destinations within a reasonable distance, and when walkways are reasonably secure and safe, walking is often preferred. The elderly people pointed out not only that it is good for health (92 percent) and inexpensive (90 percent), but also that it allows the older person to maintain his independence (85 percent)—not be a burden on others, and to come and go as he pleases—it provides him an opportunity to be among other people (81 percent) and, under favorable conditions, walking is convenient (82 percent) in the sense that there is no waiting, no parking, no traffic problems.

#### MANY OLDER PEOPLE PREFER WALKING

Even in such a hilly city as San Francisco, most older people look with favor upon walking when conditions are favorable: that is, when distances are not too great and walkways are safe. The strongly negative reaction to walking is against dependence upon it as a means of getting places under existing conditions: many destinations are beyond comfortable walking range and walkways are not safe, particularly from vehicles. Furthermore, the necessity to go on foot, even when the weather is bad, even if bundles must be carried home, and even when one is not well, is onerous. Some older people have health problems which make walking inadvisable. However, the problem for most older people is not that they dislike walking, but they have no alternatives for some trip purposes and in certain situations.

Two types of action are called for: Conditions for the pedestrian must be improved, so that he has good footing on walkways that are safe from intrusion by vehicles. Where vehicles and walkers must share territory, directions should be clear and unambiguous. When timing is involved at crossings, intervals must be adequate to allow slower pedestrians to feel they can get across safely. Generally, decisions regarding the design and management of city streets and sidewalks should be influenced by the needs of the pedestrian as well as those of the automobile driver. City planning should take into account the possibility of providing access, by foot, from residences to services. Walking, then, would better serve the needs of old people and quite possibly also those of other age groups.

Even with such improvements in pedestrian facilities, it is unreasonable to expect older people to depend upon their feet for all trip purposes and at all times. Vehicular transportation must be provided for medical visits; and either vehicular transportation to drug, grocery and other stores, or delivery of necessary commodities. Hopefully,

both will be developed. People enjoy exercising options, and needs vary. For example, when one is ill, delivery service is appropriate. However, many old people suffer loneliness and, when they feel well, the opportunity to be among other people in the course of a pedestrian or public transit expedition may be an important benefit.

The issue is sometimes raised whether it is justified to spend public money to benefit about 10 percent of the population. The essence of this issue is whether actions to benefit the old are adverse to the interest of other population segments or whether they also benefit the general population.

Some evidence bearing upon this issue is available in the baseline data from the BART impact study in which people aged 18 and over were asked about facilities they considered important to have in their residential areas. The interesting observation, in terms of the present discussion, is the high degree of similarity between the old and the total group in assessing the relative importance of the various transportation facilities (see table 12).

TABLE 12.—PERCENTAGE DISTRIBUTIONS OF RESPONSES TO: IMPORTANCE OF HAVING FACILITIES CLOSE TO HOME<sup>1</sup>

Facility	Total <sup>2</sup>	Facility	65+ <sup>3</sup>
Good walking conditions.....	60(1)	Good walking conditions.....	60(1)
Food stores/supermarkets.....	50(2)	Food stores/supermarkets.....	58(2)
Bus stop.....	41(3)	Bus stop.....	54(3)
School.....	33(4)	Friends/relatives.....	19(4)
Work.....	21(5)	Theatres/restaurants.....	11(5)
Friends/relatives.....	12(6)	BART station.....	9(6)
Theatres/restaurants.....	8(7)	Work.....	8(7)
BART station.....	7(8)	School.....	6(8)
Access to freeway.....	6(9)	Access to freeway.....	5(9)

<sup>1</sup> Percentage responding "very important".

<sup>2</sup> Rank order is given in parentheses.

N=2541

San Francisco Bay Area 1972

### WALKING CONDITIONS STRESSED

Good walking conditions were stressed as the item of greatest importance not only by those 65 plus but also by the total group. Convenient food stores was second, and convenient bus stops was third in both cases. Having a BART station in the neighborhood was much less important, ranking eighth for the total group and sixth for the old. It may not be surprising that access to a freeway was last in importance for the elderly, but surely it is interesting to see that freeway access was also last in importance across the entire adult age range.

The relative importance of the various transportation facilities to the old was closely similar to that for adults in general. In regard to the transportation systems in operation at the time, the rankings were identical. This information suggests that improving pedestrian facilities and access to public transit is of great importance to the population at large. Then actions to benefit the elderly should be beneficial, not detrimental, to the general public.

In regard to specific design and control features in the pedestrian and public transit environments, further research is needed in terms of

their effects upon travelers in various age and physical-status categories. However, it seems likely that the problems with bus trips cited by the elderly are shared by other bus riders; and that improvements suggested by the old would make bus transportation more satisfactory to other transit-dependent groups and might attract automobile drivers to public transit. The same may well be true in regard to pedestrian facilities. If so, it is not a question of allocating funds to the old versus the general public, but of allocating funds for the general good, including that of the elderly.

It would seem that the problem of transportation deprivation among the elderly has been adequately documented. It is time to move firmly toward solutions. For this purpose, we need: (1) A comprehensive survey of the existing problem in detail, on a national basis, (2) careful assessment of existing programs intended to ameliorate any part of it, (3) new demonstration programs, incorporating strong research components, which aim at innovative solutions and their systematic evaluation, and (4) a workable system of ongoing information-dissemination which involves planners, administrators, legislators, old people, and researchers and which facilitates coordination among the various types of agency which are, or should be, involved in dissolving transportation barriers. (The transportation problems of old people cannot be solved as a separate issue. Transportation is a mechanism for making community services and facilities accessible. Therefore, solutions require the coordinate function of those responsible for all types of community resource.)

Section 412 of the Older Americans Act Amendments of 1973 seems to speak precisely to these needs and to approve efforts to meet them. It is, therefore, a considerable disappointment to find no request for funds for these purposes in the budget for this year. The transportation situation of elderly people in this country is a grave one which places severe constraints upon their ability to live decently. Major efforts are needed, now, to find practical solutions and to implement them promptly. Funding to implement section 412 of the Older Americans Act Amendments of 1973 seems to be the requisite action.

In order that the comprehensive survey and the demonstration-evaluation programs will provide valid findings with general applicability, some pitfalls in research design must be avoided.

#### LIMITATIONS OF GENERAL TRANSPORTATION STUDIES

There is an understandable tendency to depend upon general studies of transportation to provide the information which is needed in regard to the old. Such studies are unlikely to provide this information. One reason is that, because the old comprise only about 10 percent of the population, unless the study has a large sample, the number of old people in it tends to be too small for useful purposes. This is a particular problem because old people are not a homogeneous mass, and understanding their transportation problems and assessing solutions necessarily involves subgroup analysis. When the number of old people is small to begin with, it is impossible to perform these analyses, and reports can be only in terms of "the old," without differentiation according to income levels, physical disabilities, drivership status, location

in the urban complex, existing transportation services, location and type of services and facilities, and other characteristics which are essential to the development of programs which will provide practical solutions.

Perhaps the primary reason that special studies are needed is that transportation planning is oriented to the traveler. The "prime traveler" is, of course, the work commuter. He, therefore, takes center stage in most studies. Other population groups, which provide a less promising market, tend to be of marginal interest. One example, and by no means a unique one, is provided by the "BART package." In the original conception there were two studies of travelers, each to have 350-400 respondents. One focused on the development of a modal-choice model and studied employed people who had viable transportation options for work trips: automobile plus bus plus BART when it became operational. The other study made strenuous efforts to include the transit-dependent and transportation deprived. It ended up with 52 elderly or retired, 54 physically handicapped, and 97 automobile work commuters.

#### SELECTING AN APPROPRIATE SAMPLE

Because general transportation studies focus on the traveler, old people who take part in them tend to be unrepresentative of the elderly in general. Studies designed for the old must take care to avoid this limitation. The old driver, the old bus rider, the old BART passenger or the old pedestrian in the central business district is not typical of his age peers. For many old people, the "transportation model" is not one of "modal choice" but of "go-not go." Studies of travelers learn about people with minimal constraints on mobility, not the typical old. A national survey of transportation needs, problems and constraints must be taken in such a way that the entire population of elderly citizens is represented. Otherwise the findings will not have general applicability, and the information base will suggest the development of programs which will meet the needs of only one segment of the older population—and that segment which is best able to cope with existing circumstances, not the segment most in need.

The same is obviously true also for demonstration and research projects. Information from nonusers is a necessary supplement to that from users, for adequate evaluation and remediation. Learning the reasons why older people do not use a transportation program is a vital source of information about how to improve that program and how to supplement it.

Program evaluations should be high-quality research. This requires that the evaluation component be an integral element from the start of planning, not an after-the-fact addition. Generally, prepost design should be used to compare mobility behaviors and attitudes prior to introduction of the program mobility behaviors and attitudes subsequently. A large literature on memory supports the view that comparison of information obtained at two or more points in time is far more reliable than remembered differences. This requires research involvement from the start, so that the collection of baseline data reflecting the preprogram situation can be properly planned and carried out.

Many other factors may affect mobility behaviors and attitudes over the period of time during which a program is being put into operation. Therefore it is essential to build "controls" into evaluation designs. (For example, how are we to determine the extent to which a "modal shift" from the automobile to BART is due to characteristics of the rapid transit system and the extent to which it is due to the fuel shortage and increase in gasoline cost?) Any program must be evaluated in terms of what is most likely to have taken place in that situation if the program had not been introduced. Therefore pre- and post-program data must be collected, also, at another site which is similar to the program site except that no program will be introduced in the time interval. Comparison of changes at the program site with those at the control site will provide the best estimate of program effectiveness.

In summary, research findings show that the elderly are automobile-deprived, transit-dependent and foot-dependent. They suggest that the low mobility rates of the old are due largely to lack of transportation, not to inclination; and that use of community resources and life-satisfaction would be greatly increased by provision of appropriate transportation coordinated with other services and facilities.

The reasons for low automobile utilization suggest that attention to that transportation mode will not entirely solve the problem. Existing public transit offers serious obstacles, as does walking. However, old people can see advantages in both, if barriers are removed. Therefore attention should turn to improvement of pedestrian and public transit facilities. These improvements may benefit other population subgroups as well. Rapid mass transit is an especially promising area, and every effort should be made to profit from experience with the first new system in this country in recent years, BART.

The appropriate next steps are spelled out in section 412 of the Older Americans Act Amendments of 1973. What is required now is funding to implement the provisions of that amendment, and careful attention to the quality of the research components so that they will provide valid information with general applicability.

Senator CHILES. Thank you very much, Dr. Carp. We appreciate your testimony very much. We are delighted to have you both with us. We look forward to seeing the results of your studies. Thank you.

Dr. CARP. Thank you, Mr. Chairman.

Señator CHILES. Our last panel for today will be made up of Mr. John Lawson, Mr. Jon Burkhardt, and Mr. Peter Schauer.

#### **STATEMENT OF JOHN LAWSON, PROJECT DIRECTOR, SUWANNEE RIVER TRANSIT PROJECT, LIVE OAK, FLA.**

Mr. LAWSON. My name is John Lawson, director of the Suwannee Valley Transit Project, Live Oak, Fla.

I want to thank you for inviting me here to describe our bus system. We have a report I would like to submit as part of my testimony.

Senator CHILES. We will be happy to receive the report, Mr. Lawson. We are delighted to have you appear.\*

Mr. LAWSON. We have a small transit system in the Suwannee Valley, which is a six-route common carrier hauling passengers.

\*See report, p. 86.

We were originally funded by OEO in 1972.

The system was funded specifically as a categorical system. It was intended to serve only the low-income population in our area, but as it turned out, the importance of the Florida Public Service Commission became more evident in the planning of the system.

The Public Service Commission in Florida requires that any system that does not operate strictly within a municipality comes under their jurisdiction, and that it must serve the general public; that is, it must be open to all; not just a limited segment of the public. The Public Service Commission viewpoint of how systems do and should operate is somewhat different than some of the testimony we have heard here today.

They in fact believe all bus systems should run on routes and schedules, and that while bus systems can deviate and divert to some extent, however, they must still file fixed routes and schedules with the PSC.

They now handle that requirement in another way that I would like to return to after awhile.

I would like first to go over the background of the system that we operate.

#### SIX BUSES IN OPERATION

We initiated road operations on July 14, 1973, after some months of planning, and after only 6 months of road operation we generated 1,100 riders per week on a very small bus system, using only six buses.

We have generated revenues of \$1,200 per month, and forecast that in 24 months the revenue picture on this entire system, if it stays static, will be about \$5,000 a month, with total operating costs of about \$10,000 a month.

I want to put particular emphasis on that subject, because I would like to come back to it later on as I near the end of my testimony. It happens to be a revenue-cost ratio that confronts most transit operators throughout the country.

Anyone engaging in public transit is faced with this problem day in and day out. There are some that have a better operating ratio and there are many that do not do as well.

Since our system is a public system, it was designed with several ideas in mind, but primarily with the idea that it had to carry the general public, by law.

Senator CHILES. Had to carry what?

Mr. LAWSON. Had to carry the general public, by law. It could not focus itself—

Senator CHILES. Is that because of the public service regulations?

Mr. LAWSON. Yes, sir, that is in the Florida statutes.

Therefore, it could not focus its energies on the poor or the elderly in particular. Thus, the system was designed with the general public, including workers in mind, and in fact about 55 percent of our ridership is presently worker traffic.

The other 45 percent is of course the elderly and the indigent population in the rural areas. These people do ride at a substantial margin during the middle of the day.

The system was designed in a dual mode originally, which meant we were geared toward industrial shift schedules in the morning

and the evening, and then we dedicated the entire bus system to the problem of the elderly in the rural area after 9 in the morning and until 3 in the afternoon. This was an effort to utilize six vehicles as much as we possibly could.

We operate in four counties in north-central Florida. These counties encompass 2,520 square miles, with only 8 major communities, which most bus operators would consider as stopping points on a fixed route system. There are 458 miles of primary State and Federal highways, and the rest of the highway system is generally rural country roads. Many of them are dirt roads. Most of the population of these four counties is sparsely distributed. There are only 51,480 people in the entire 4-county area, and we find that after some analysis, that the most critical need for transportation has been in the rural areas well outside the main population nodes.

Therefore, in order to be effective, a rural bus system has got to consider the necessity to go off the main roads, sooner or later, in order to serve people properly; in order to be adaptive to their needs.

This is the third node of our more recent operation. We discovered in one particular area that we experimented with early—with PSC approval—that we had to actually dedicate a bus to this area for an hour or more in order to make a circuit through the back country area, and, incidentally, at this moment I would like to mention that we had a gentleman from West Virginia commenting on the terrain in West Virginia, and I would love to have him on one of my buses going through the snakepaths that we go through.

#### VERY DIFFICULT BACK ROADS

This area, called Belleville, is up near the Georgia border, away up near the top of North Florida. It is largely populated by elderly black people, who are spread out in a random pattern throughout the area on very, very difficult back roads. Sometimes they are 4 to 15 miles back off the main highways.

We discovered in this particular operation that we had a very curious system happen to work out almost by itself, and this is the main point I would like to impress upon you, that this system has turned out to be responsive to the needs of those citizens in a very peculiar way, mostly dictated by their own sociological needs. We take no credit for it ourselves.

My driver informs me that upon entering this particular area each day, there was a public-spirited citizen there who approached him with a list of names of people who wanted to ride into town on the given days we had scheduled the bus. We were intrigued by the idea that we actually had a volunteer worker out in the field collecting and prebooking passenger ridership on our buses, so we cultivated this particular situation, and it seems to work extremely well. It is a prebooking system in which we are blessed with a "field dispatcher," as I call her. This woman contacts people before the bus is scheduled to come into that area, and she takes names and locations and sets up an itinerary for my busdriver.

He then takes this itinerary, which may vary from week to week and goes down through the back roads and finds the people confidently waiting for the bus to take them into town for once-a-week

shopping, for food stamps, or for medical attention. Some of them have actually rescheduled medical appointments to coincide with the bus schedule.

Senator CHILES. This is the way you comply with the public service requirements, you are running almost like a schedule?

Mr. LAWSON. Yes. We submit a schedule which indicates that we take a 1-hour circuit off the main line into a reasonably well populated area to collect people. We do not have a formal or fixed route in this area. In that sense, this little phase of our system is demand-responsive, and it is closely akin to what big city planners would call dial-a-ride, except that there are very few telephones, and the communication system is very mysterious to me.

Senator CHILES. It is a great run.

Mr. LAWSON. And it works. The entire thing has developed so well; we were so encouraged by it that we took one of our main route buses and dedicated it to this kind of service throughout several other areas, a total of five areas. We now run a specific area each day of the week. I would like to just dramatize the way this thing works by indicating the experience of one elderly gentleman we pick up every single week. The man is past 80, a Mr. Thomas, who lives down in a little town south of Live Oak.

Mr. Thomas used to come to Live Oak every Friday and get his laundry done, and used to pay a friend, and I put the word "friend" in quotes, \$6 every Friday to drive him in.

The friend worked in town, so poor Mr. Thomas had to come in at 8 o'clock in the morning and wait until 4:30 to go home, all at a cost of \$6.

#### "PAUL REVERE" BUS ROUTE

We pondered his problem, and several others like it in his area, and finally decided to install a similar Paul Revere route.

One of my drivers nicknamed these routes "Paul Revere," because of the early warning system that seems to precede them.

We scheduled this route for Mr. Thomas' area in the hope, of course, that there were several other people in the same predicament, and there are.

We now charge Mr. Thomas \$1.50 for a round trip from his area to Live Oak. He gets to town on a well-insured bus, driven by a competent driver, a reliable driver. He knows when it is coming, he knows it is a no-fail system; and we saved him 75 percent of his weekly transportation cost.

Incidentally, Mr. Thomas changed his laundry day from Friday to Wednesday, just for us. That was because we had no opportunity to get the bus down there except on Wednesdays.

The story I just told you is illustrative of what we are trying to do to provide transportation which is responsive to the needs of the elderly.

I feel confident that any public transportation system must be a public system, and must respond in that way. It cannot be a fixed route, fixed schedule system in every sense of the word. It really has to deal with the specific needs of the elderly.

One thing I would like to point out in this operation we are developing, the Paul Revere system, is that we find we do make some concessions to the schedule idea, but we also find we are gaining some benefits.



We are actually more efficient in operating such a route, because as I mentioned before, the route is not really a route. It is firm and final for every time we do it, but it is a different route for several different times of the month.

It is really based on the passenger load that we know we are going to pick up, so it is not a standard route system and, therefore, it saves us gas and time because we actually go only where we know the people are going to be waiting to be picked up.

In doing all this, we find that we cannot respond to the needs of the elderly without doing a sociological ministudy. In each area, it seems there are slightly different habit patterns and traditional patterns that we have to comply with ourselves.

We at one time ran the bus on Saturday and got no riders and we could not understand why. It took a week or two of interaction to find out that elderly black folks in the back woods do not even emerge from the back woods on Saturday, for a very good reason.

They devote the entire Saturday to preparation for Sunday, which is the Lord's day. Saturday is reserved for cooking and doing household work, which for religious reasons, is not allowed on Sunday. Therefore, we had to change the bus schedule for that reason. This is why I refer to our planning as based on a sociological study.

We find there are different habit patterns in other areas as well, and we try to accommodate them with our schedules.

#### REVENUES AND COSTS

Turning to revenues and costs, I have heard several comments in the last few hours about the need to dedicate "splinter" bus systems to one category of people.

It is my belief that bus systems will never really become economically sound in every sense of the word. There are some that can, but generally speaking bus operations have been traditionally a losing operation for many years. It always seems to require some form of subsidy from somewhere. I am afraid that any system that depends completely and entirely on a subsidy is doomed to eventual failure in one way or another.

I believe that a bus system does have to make an attempt to pay some of its own bills and there is a very good reason for that. My situation right now, for example. We have a system that is funded through June of 1974, this year. At the end of the funding period it must either be taken over by local government or go out of business. Since this is an incentive grant—it was set up on a one-time basis—it was put there simply to install a beneficial service to the community in the hope the community would somehow try to perpetuate it itself.

My efforts right now are focused on getting four county commissions to adopt the system under a regional transit authority. If we are unsuccessful in this, and there of course is always that possibility, there would be no bus system any more in that area.

However, if we are successful we will only be successful because the county commissions would have been convinced that the system had some method of paying most of its own bills. It simply is not fair to ask the taxpayer to pay the entire 100 percent, and I believe this is a standard philosophical approach that any county commissioner would take. He is responsible to the taxpayers and he would have to answer on that score. Therefore, our problem is, and I am

sure the problem of survival faces many of these small experimental projects, one of acceptance by the local community. Acceptance by the citizens who may never use a bus—who may never have to use a bus—and this acceptance naturally takes the form of the county governments taking over the system.

We believe we prepared them quite well for understanding what it would cost them to operate the system and we also tried to indicate to them that some Federal assistance in that area might be forthcoming. However, we do not wish to conjecturalize on the amount of the assistance.

One other thing I would like to mention—I would like to step to another point for a moment and talk just briefly about the fuel situation.

Any bus system that started up in the last year or so has definitely and distinctly got a problem and I would just point out my own fuel allocation problem, for which we filed 6 months ago when we first hit the road. It was filed under the voluntary program in the Department of Interior. This went on for some time, and since we had not heard what happened to our request under the voluntary program, we therefore had to refile when the mandatory fuel allocation program began. We are still awaiting word from the FEO on the status of that application.

#### EMERGENCY ALLOCATION HELPFUL

However, in the past 2 days, the local fuel distributors have advised me that our bus system may have to shut down, probably near the end of February, because we are still buying our fuel, just like the consumer, at the retail gas pumps. We were only fortunate, at least through March, to procure a part of the State set-aside as an emergency allocation, and that is what is holding us together through March.

I would like to conclude by just mentioning that bus systems in general truly have to become more responsive to the particular needs of particular classes of customers. I would like to emphasize strongly that a public transit system really is the only way to go, in terms of economics.

Putting together a special purpose bus system is definitely not my idea of serving public needs. It will indeed serve one particular class or another, but I believe that a good, well-organized, well-designed bus system, with properly responsive management, can do a better job if it is told what the public needs, and I think we are beginning to learn that.

Thank you.

Senator CHILES. Thank you, Mr. Lawson. Your report on the Suwannee Valley Transit project will be inserted at this point in the record.

[The material referred to follows:]

#### THE SUWANNEE VALLEY TRANSIT PROJECT (AN ADAPTIVE RURAL TRANSPORTATION SYSTEM)

Suwannee Valley Transit is a six-route common carrier hauling passengers under Florida Public Service Commission jurisdiction. The project was originally funded under a \$100,626 grant from the Federal Office of Economic Opportunity in late 1972. The grant stipulated 20% local matching funds in

cash or in-kind, which conditions were met. It was specifically declared to be a one-time "incentive grant", which means it is seed money to install a beneficial service in a community, with the hope that the service will ultimately be perpetuated in some way by the community itself. In fact, OEO guidelines are conducive to turning over such operations to a community free of charge if the community wants them.

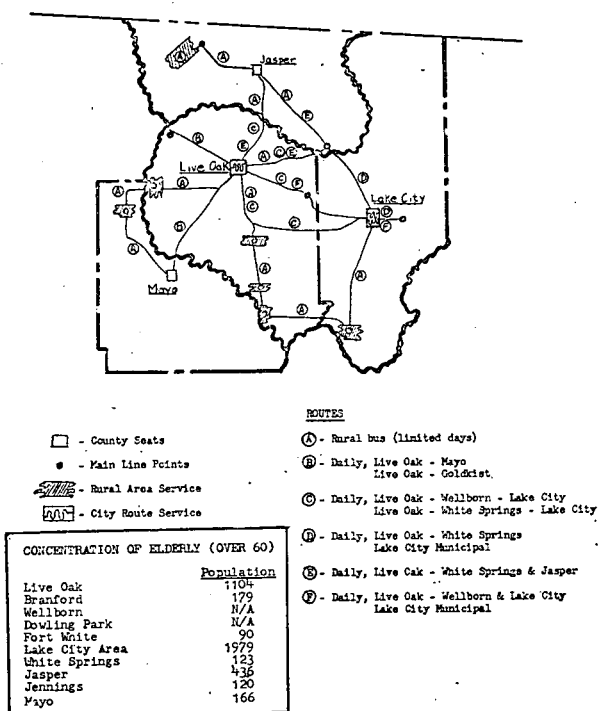
Road operations were initiated on July 14, 1973, and after only six months 1,100 riders per week were using the system, generating passenger revenues of nearly \$1,200 per month. At the present rate of acceptance revenues are forecast to reach an average of \$5,106 per month in the 24th operational month. Average gross operating and administrative costs are forecast at nearly \$10,000, or a revenue-to-cost ratio of 51%.<sup>1</sup>

Worker ridership is by far the major proportion of our business at present. Our statistics indicate that about 55% of all people riding the buses are going to or from a job. The remainder (mostly mid-day traffic) are going to school, shopping or health and welfare facilities. (Although some are going to mid-day jobs.)

We operate in the four counties of Suwannee, Columbia, LaFayette, and Hamilton, all just south of the Georgia-Florida state line. These four counties encompass 2520 square miles of North Florida which is mostly rural, with only eight major communities and four minor communities worth considering as main stopping points for buses. The remainder of the territory has a sparsely scattered population living generally along the 458 miles of primary State and Federal highways, or in backwoods areas along rural county roads at distances from five to ten miles off main roads.

The distribution of population in these four counties is the paramount problem facing a transit planner.

FIGURE 1'



While there are major activity nodes (See Figure 1) it seems that a great deal of the critical need for transportation exists in sparsely popu-

<sup>1</sup> Bus systems nationally have about the same performance level. They generally retrieve only 50% of costs from the fare box.

lated outlying areas, particularly among the elderly and the indigent. During initial study of the problem, we determined quite easily that the concentrations of elderly populations (over 60) were as shown in Fig. 1, but this data did not clearly tell the whole story. These figures reflect population by census enumeration district, which is tied to a single municipality as a rule and does not show the numbers of people in that category who live five, ten, or even fifteen miles outside the named community. It has been our experience that *most* of the people under consideration do indeed live at considerable distance from the nominal population node. Therefore, we have a situation in which there is very little concentration in a single municipality, but a whole lot of people living well outside it, and needing to get to it at only infrequent intervals. Also, consider the fact that the two communities for which the researchers found no figures available (Wellborn & Dowling Park) are in fact well-established senior citizens retirement centers, where virtually the entire population is over 60. Based on close scrutiny during the bus operations it is our belief that in all four counties we have in excess of 5000 elderly persons, not 4197 as the data shows. This means that about 10% of our entire 4-county population (51,488) could be classified as elderly, and therefore subject to all the transportation handicaps characteristic of that group in our society. We believe these handicaps were more acute in our particular area because there was simply no other form of transportation available to elderly nondrivers besides the "handout ride" from neighbors or friends.

Now let me tell you about neighbors and "friends". I was appalled to hear of one old gentleman past eighty who for years had paid a young friend six dollars once a week to drive him fifteen miles into Live Oak every Friday to get his shopping and laundry done. Incidentally, the old man had to wait all day until the "friend" got off work to go back home. At first, we had a distinct problem trying to cope with Mr. Thomas' problem, because our bus system was originally designed as an intercity type operation, running on strict schedules on main roads between points. The only trouble was that Mr. Thomas lives about  $4\frac{1}{2}$  miles off that main road, and couldn't possibly walk to catch our bus, and under Fla. P.S.C. regulation we are normally obliged to adhere to published routes and schedules. But one day we decided to help Mr. Thomas and get him as a weekly customer (at \$1.50 a round trip) by simply using a door-to-door technique we were developing elsewhere (to be described later as the "Paul Revere Bus").

We scheduled a Wednesday "Paul Revere" operation in his area and he obliged us by changing his laundry day from Friday to Wednesday. In doing so, we save Mr. Thomas \$4.50 per week or 75% of his former transportation cost. And he rides to town faithfully every week, secure and properly insured in a reliable bus driven by a competent driver who gets him there and back within only three hours as opposed to the eight hours he used to spend waiting for his "friend".

This story is illustrative of what we are trying to do to provide transportation which is more responsive to the needs of the isolated, the elderly, and the public in general. We don't merely race up and down the highways passing people up on hard roads at breakneck speeds. We go out on the dirt roads and get them. Admittedly, this is not everybody's vision of what intercity buses are supposed to do, but we are firm believers in the values of "demand responsive transportation". It isn't exactly "dial-a-ride", but it works.

In order to describe the operation of our "Paul Revere" bus it is best to summarize the social background that made it happen. We take no inspirational credit for the idea; it was born out of people's need for transportation from a certain rural poverty area.

Directly adjacent to the Georgia border in Florida's Hamilton County, west of Jennings, there is an area of about eighty square miles of low-grade farm territory populated largely by elderly black citizens. Living in extreme poverty, these people are handicapped not only by age but by terrifying isolation in a backwoods community with poor roads and few public utilities. It was dis-

covered early by one of our drivers that despite a general lack of telephones, the community possessed its own curious kind of communication system. Every time he entered the area on a prescribed route he was greeted by a particular community leader near the entrance point who handed him a list of passengers and their trip intentions for the day. In many cases, an entire itinerary including pick-up locations, numbers of passengers, times and destinations were discussed for several minutes, and in more difficult cases, she would go aboard for a while and act as a guide. In effect, we were blessed with the services of an unpaid volunteer; a "field dispatcher" as I now call them. Not only was the driver briefed, but all the people listed had been notified and again reminded of the buses' standard time of arrival. (Thus the apt name "Paul Revere", which was originated by one of our drivers.) Accordingly, the driver followed that day's itinerary through the area (it usually varied for each weekly trip) and found small knots of people trustingly waiting for the bus to take them to a town for food, clothing, or medical services. (They even began adjusting subsequent doctor's appointments after a while to fit the bus schedule.)

As to schedule, we had to make few concessions, and in fact, we gained a few benefits. We had always recognized this as a difficult area, and had scheduled one hour for a *standard* route cycle throughout. After the advance warning idea took hold, we found we could abandon a strict route plan and simply go directly to the places where we knew people would be waiting. This made the entire operation more efficient; it saved time, gas, and wear-and-tear on the vehicle. In actual fact, it is technically a *demand responsive* phase, closely akin to what big city planners call "Dial-A-Ride".

As a result of the Belleville experience, we installed the same kind of service in five other isolated areas, sometimes with varying results because we can't always find a reliable public-spirited field dispatcher like the one in Belleville. In addition, we find we have to make a mini-sociological study of each area for peculiar habits and characteristics (for instance, did you know elderly blacks in rural areas rarely go shopping on Saturdays? It seems that whole day is dedicated to cooking and household chores in preparation for the Lord's day).

Moreover, we had to study harvesting and household commitments related to the crops of that area, and the method of acquiring labor to tend those crops. And in fact, this entire problem is compounded by the fact that several of the areas we operate in are as different in social phenomena as are their inhabitants. For example, Dowling Park is a white retirement community of relatively affluent persons who have somewhat different bus riding habits.

It is evident that this type of operation makes it extremely difficult to conform to a State Public Service Commission's idea of the way buses are normally run (that is on strict schedules and routes), but in all fairness it can be said that Suwannee Valley Transit buses do run a dependable schedule, if not an easily understood one. The reason for this is obvious. We don't run from Point A to Point B. We try to find out what people really need, and if it's humanly possible, we give it to them.

In short, we believe a rural transit system has to be *adaptive*. If it is strait-jacketed, it won't work. Moreover, it has to serve *all* people, not just categories of people. This is because the long-range economic feasibility of such a system lies in its ability to attract every class to its service, not just a select few.

Although there are many day-to-day kinks in the system, Suwannee Valley Transit's only major problem at present is its future. The OEO grant program ends in June, 1974, at which time it is hoped to continued operation under a Regional Transit Authority. The four county governments are to be approached individually in early March, 1974 to seek their mutual participation in this venture. It is a complete uncertainty right now, in spite of the hope for substantial federal funding assistance from UMTA, as to whether the Counties will in fact agree to take over the system. It needs a support level of about

\$60,000 annually over and above revenues in order to continue. Each County's individual share of this amount is negligible, but there is no doubt that some taxpayer resistance will arise, particularly among the affluent, who are not *all* convinced of the bus system's social and economic values to the community.

Senator CHILES. Mr. Schauer.

**STATEMENT OF PETER SCHAUER, GENERAL MANAGER, OLDER ADULTS TRANSPORTATION SERVICE (OATS), COLUMBIA, MO.**

Mr. SCHAUER. Mr. Chairman, OATS thanks the Senate Special Committee on Aging for this opportunity to testify on transportation problems of the elderly and we are happy to have been invited to tell of our experiences in Missouri. And on behalf of the entire OATS membership, the board of directors and the OATS drivers and staff I wish to submit this formal statement, signed by OATS President Quinnie Benton and myself, to be entered into the record.

Senator CHILES. Without objection, it will be entered into the record.\*

Mr. SCHAUER. To correct some of the pre-hearing press releases I would like to say that I am Peter M. Schauer, general manager of OATS, and OATS stands for Older Adults Transportation Service and we are a transportation program for the elderly, not a grain support program (although we do use the adage "Come sow your wild wheat with OATS," to attract riders.)

I would like to briefly summarize the high points of our prepared statement and then discuss certain points which need particular emphasis.

OATS is a demand-response door-to-door personal membership transportation system. It has been in operation since 1971 and currently owns 45 maxi-vans which will be operated over 83 county areas, covering an area from the Iowa border to the Arkansas border, and from the border of Kansas to the border of Illinois. There are currently over 10,000 persons who have given their hard earned dollars to OATS and this is important because this is their testimony to the desperate need for rural transportation.

OATS is a complicated yet simple program (see organization chart, p. 96. I point this out because it illustrates the key in OATS, the volunteers, the elderly themselves. It is their self-determination which makes the program work.

OATS believes that for a transportation program to be successful the people who benefit from it must be involved in designing and managing the system.

**ESTIMATED FORCE OF 1,000 VOLUNTEERS**

Volunteers for OATS do many things, and OATS believes any volunteer for OATS who incurs actual out-of-pocket expenses should be reimbursed and we have a donation and reimbursement system to do this (although funds are limited). If OATS had to pay only

\*See prepared statement, p. 94.

\$1 per hour the costs would be astronomical. Volunteers serve on the OATS State Board of Directors; others serve on OATS County Committees, while some are county contacts and telephone callers. Some have estimated the volunteer effort to be over 1,000. We know in management that it is at least 500 because that is the number of contact names we have on file.

As mentioned, volunteers help schedule OATS buses and while this is a topic that is discussed in detail in the prepared statement, it bears emphasizing that the people themselves must be involved in the scheduling and operation. This is for a variety of reasons, but mainly because there is no way for a central office in Columbia to know just when vegetables are freshest at a store or when newspaper coupons come out, or when a doctor is in. Only the people know these things and they must therefore be involved in the scheduling and design of the system.

However, while the local county people know the local details it is important that careful management provide leadership in the regional utilization of buses and thereby spread certain overhead costs over several counties. That is, while local persons involved in scheduling may schedule a bus to a distant city for a local person's medical treatments, it takes a central scheduler to fully utilize that bus over the road. OATS builds loads by calling contacts concerning long trips, then they notify members and attempt to fill the bus.

The local involvement also helps OATS coordinate its service with existing local social services. That is, OATS frequently provides transportation for social agencies which lessens the need for every single program to buy its own bus. In some parts of the State, OATS in addition to its regular service, provides rides to congregate nutrition sites, for RSVP, for commodity foods, for food stamps, for Foster Grandparents, Meals-on-Wheels, church groups and others. In OATS the ultimate linkage and coordination comes when we communicate directly with doctors and other providers of medical services to insure that transportation is coordinated with treatments. OATS also coordinates with other agencies who need transportation and we cooperatively lease three buses from OEO agencies on the basis that they provide the bus and we provide the management and service. OATS also coordinates with public transit systems wherever possible to avoid duplication of services. OATS has participated in conferences where as many as 10 different kinds of specialized systems and the citywide public carrier met to discuss problems and avoid conflicts of service. These sort of conferences are important because they help to insure efficient use of natural resources, equipment, and of course tax dollars where such programs are publicly supported.

#### COORDINATION AND DUPLICATION

Some of the key words of OATS are: coordination and duplication of efforts; graphically this is shown by a print by Escher called "Drawing Hands." (At this point Mr. Schauer showed a picture of

Escher's print to the committee.) In his intriguing style it shows two hands each drawing the other, that graphically illustrates the feeling that must be present to succeed in a transportation program. That is, organizing a transportation program is an extremely complex undertaking. Of primary concern are the legal base, the financial plan, the system, private transportation firms, and political realities. All of these factors are interrelated, and coordination is one of the words to live by.

To move into some specific problem areas, those that concern OATS, first of course is funding.

At this time, the OATS program is uncertain, where the support will be coming in, for future operations.

Currently, we have an approved budget of over \$840,000, but funds have limited us to expenditures of roughly in the range of \$761,000, and that is based on a Federal contribution of only about half that (about \$400,000); the rest will be brought in through fare contributions, membership contributions, donations and in-kind, so the people are really supporting this program.

The OATS program has investigated various sources of money other than the Older Americans Act, which has been the source of our funds in the past. It has become necessary to look for other funds because these funds are becoming less available under current Older Americans Act strategies for a statewide program like OATS.

OATS understands that several million dollars have been allocated to be spent by the Department of Transportation on the rural transportation problems, and that may be a promising source of some funds.

As pointed out in the formal statement, one of the primary goals is to have a program that breaks even, so the hunt for funds would not be necessary. The OATS Board of Directors would like nothing better than to be self-sufficient, but with development of the program, and at the pace that the program has expanded, it has been impossible to break even.

In our formal presentation (see p. 94), there are OATS operational goals that the board of directors and management have developed with the help of the University of Missouri Extension. What we do, we take these goals, and we set target dates for buses, in an effort to know what kind of funding we will need in the future, and how we are doing. The first goal is a very basic goal, where operating revenue, that is fare contributions equals drivers' wages.

That is fairly basic. That is not talking about any of the administration or anything else, and the second operating goal, where operating revenue equals driver wages plus variable costs (variable costs mean gasoline and oil and maintenance, and some other things). It is our feeling in management that by the end of 1974 all our buses, our 45 that we own and the 3 that we lease. all 48 buses should be at or beyond goal No. 2, that is where they will be recouping the drivers' wages plus variable costs.



We think we have indications that some parts of the program can move through goal No. 4, which is where nonoperating revenue, plus operating revenue equals total costs minus the depreciation. (Nonoperating revenues being donations and membership contributions.)

We have some buses, some of the buses that have been established for 2 years, that indicate it is possible with considerable effort to develop a program that can pretty much handle the total costs of the operations except for the replacement of the equipment each few years.

Goal No. 5, that is the ultimate goal where nonoperating plus operating revenue equals total costs, that is of course the ultimate goal and one which if it could be reached would put us in a mass transportation class by ourselves.

#### DIFFICULTY IN GETTING PROPER EQUIPMENT

Some problems in terms of equipment: mostly we have had cost problems here in getting good solid, reliable equipment with low maintenance needs that could be placed at dispersed locations, perhaps a hundred miles from the nearest OATS supervisor and that would be easy to enter and exit.

Getting equipment with lifts and hydraulic mechanisms to make it easier to board the bus within reasonable costs has been difficult also.

Insurance: I have not heard anyone mention insurance yet, but securing insurance in the beginning for us was a problem and we understand many transportation programs have had problems securing insurance.

Fortunately, we have had an excellent safety record with no accidents other than one fender bender in over 2 years of operation, and no chargeable traffic violations of any sort. So consequently this year, just before I came to Washington we took bids on our insurance and we actually were able to receive competitive bids from four companies.

However, while the program may be able to get insurance, many companies set restrictions on the age of drivers you are allowed to hire or other types of restrictions. Age limits are the most obvious restrictions. With some you cannot hire under 25, and then they will set an upper limit on you, where you cannot hire over 65. So people who are talking about using volunteers and the elderly as drivers, may run into a problem in securing insurance for their program.

Gasoline: we face some unique problems in terms of gasoline.

As shown in the map in our prepared statement (see p. 95), our buses are kept at dispersed locations. We do not have a central garage; we do not have a main depot. We have 47 locations in the field, so consequently it is difficult for us to buy gasoline in bulk or develop a system where we can dispense gasoline to our buses ourselves.

As far as energy regulations go, things are in a muddle still. We are unable to get good direction on what we should do. OATS hopes that should rationing occur it will be considered as a primary user.

To close, OATS has lots of problems. The one overriding problem is funding. A constant worry at OATS is where the operating money will come from.

#### EARLY STAGES OF DEVELOPMENT

There are lots of minor things. Gasoline is not minor, but we have lots of problems, and we have lots of successes and we have a group of people that believe in the philosophy of pulling yourself up by the bootstraps, and we have a lot of hope. In actuality, OATS is in the early stages of development, and it is too soon to know if OATS will be totally successful, however, even with our current problems, we do have indicators that demonstrate OATS has a strong possibility of being successful and becoming a permanent part of many of the communities it serves.

Our prepared statement ends on a serious note with some quotes from the users of OATS, but I will end this statement on a superficially humorous note, yet none the less serious note, which illustrates the dilemma which faces the rural elderly.

You remember earlier, I mentioned the OATS county committee, and the key role that it plays in OATS. I recall one time when I was in the process of helping to establish an OATS county committee, when an elderly lady mentioned that she would love to serve on the OATS county committee, and she really felt that her county needed transportation, but the ironic part of it is that she had to say she was afraid she could not serve on the OATS county committee because she did not have any transportation to get to the meetings. And on that note, OATS wishes to thank you again, and we sincerely hope these hearings generate progress in helping to meet the transportation needs of the elderly.

Senator CHILES. Thank you, sir, your prepared statement will be inserted at this point in the hearing record.

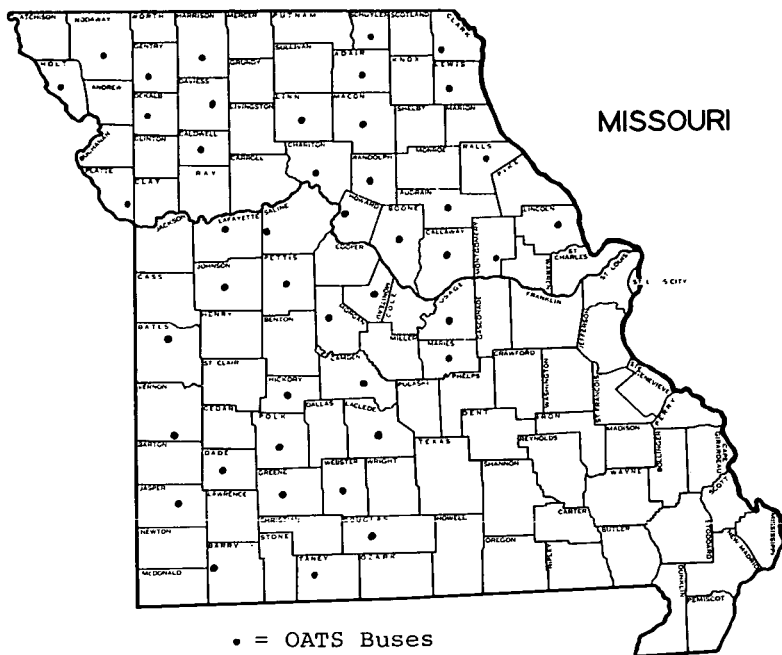
[The statement follows:]

#### PREPARED STATEMENT OF PETER SCHAUER, GENERAL MANAGER, OLDER ADULT TRANSPORTATION SERVICE (OATS) COLUMBIA, MO.

The Older Adults Transportation Service is pleased to have this opportunity to testify before the Senate Special Committee on Aging concerning "Transportation and the Elderly: Problems and Progress."

Almost two years ago to the date, March 3, 1972, the then director of the Missouri Office of Aging, Mr. Earl Welty, spoke before the Senate Sub-Committee on Aging in Kansas City, Missouri and said, "... one program which we are quite proud of at this time is the Cooperative Transportation Service . . ." (OATS). At that time there were only three vehicles operating in about four Mid-Missouri counties, and Mr. Welty stated that he was afraid that due to new regulations the program was doomed to failure. However, while the program has had its fair share of problems, it has hardly been doomed. Since that date two years ago, when Mr. Welty made his remarks the program has grown from three buses to forty-eight buses and from four counties to 83 counties. There were 1,000 members then and now there are 10,000 members with an anticipated membership of over 25,000 members in late 1974.

OATS BUS LOCATIONS  
April 15, 1974



The fact that 10,000 senior citizens and others have spent hard earned dollars on memberships in OATS is visible testimony to the transportation needs of the elderly. In their own way they are saying, "We need transportation. Transportation is a problem for us."

Without going into great detail on the problem of transportation for the elderly, it can be readily shown that the demise of the railroads, the cut back in bus service, and the problems of getting car insurance, and the high cost of maintaining private automobiles has caused the elderly person to be forced into isolation or dependency.

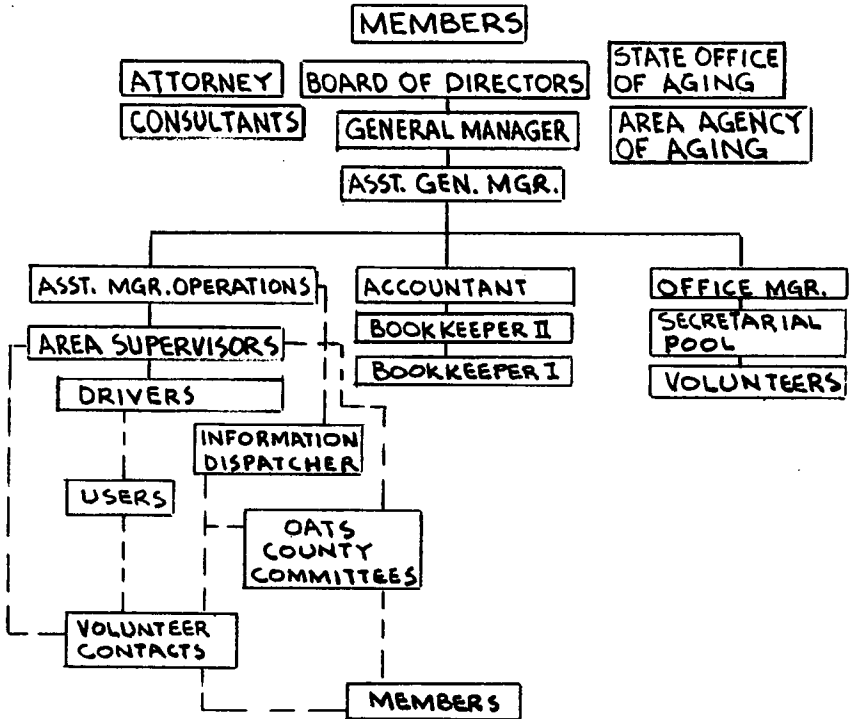
In Missouri, which ranks sixth in the nation in percentage of population over 65, the problem of getting from a small town like Argyle to Jefferson City for a medical appointment is one which can only easily be solved if one owns a private automobile. OATS knows of cases where elderly persons have spent more than 48 hours making travel connections to come from northwestern Missouri to Columbia for medical treatments. These sort of extreme transportation difficulties cause many elderly persons to ignore early warning signs of medical problems and frequently they will not be able to buy necessary food items because they can not get to a store.

But with OATS the elderly population in Missouri can get to places they need or want to go to. OATS is a not-for-profit corporation whose purpose is to provide transportation to the elderly or medically handicapped. OATS started in September 1971 as a project of the Cooperative Transportation Service, Inc. In November 1973, the membership of the Cooperative Transportation Service, Inc. voted to change the project from a cooperative to a not-for-profit corporation for tax and donation purposes. (It was felt that a not-for-profit corporation would have a better chance of securing extended financial support.)

As with other corporations OATS has a Board of Directors. The Board of Directors is elected by the membership of OATS, and serves as the policy

making body of the program. The OATS Board of Directors varies in age from middle aged persons to retired individuals and has wide ranging occupational backgrounds ranging from housewives to farmers to educators. However, the Board of Directors shares a common devotion to the problems of transportation for the elderly and it is through this devotion that the Board has met the wide ranging problems that a large transportation program such as OATS generates. The OATS Board of Directors hires a general manager who in turn hires other OATS personnel. (See organization chart.)

## OATS ORGANIZATION CHART



The program has no intention of competing with commercial transit systems. It is a totally different service aimed at areas without or with inadequate taxi or bus service. Actually the cost of riding the OATS bus is nearly the same or slightly lower than some commercial rates but the convenience of door-to-door service is a considerable benefit and puts OATS in a class by itself making comparisons unfair. OATS does not feel it should be compared with any of the major transit systems or any taxis because OATS considers itself a transportation value not available anywhere else at even twice the price. That is, OATS gives door-to-door transportation (not station to station) with trained, friendly drivers who have a real concern for the needs and desires of the OATS riders.

The basic cost to the user is \$6.00 for the first year (\$5.00 each year thereafter), and 4½¢ per mile fare contribution for the miles that one is responsible for. The fare contributions are published. The driver does not calculate fare contributions. This allows the elderly person on a fixed income to accurately budget in advance the cost of transportation.

The OATS buses which are fourteen passenger yellow mini-buses go to a person's home, take him to his destination and return him to his home. The

service is door-to-door and it is a unique system of transportation. The program operates on demand response system and this means that the OATS buses must operate on a flexible door-to-door schedule according to the personal needs of the riders. Buses are used on a first come first served basis; it is best for members to call in a week or more in advance of the date they need to go. However, it is possible for a member to call in the night before providing the bus is scheduled to be near the member's home. For instance, if one person has a doctor's appointment on Monday, she calls the contact volunteer in her area about a week ahead of time and requests the bus. (There are volunteer contact persons in almost every telephone exchange in the counties that OATS serves and this avoids the need for long distance calls. Members can also send postcards if they do not have a phone.) The area volunteer contact person then calls the county wide volunteer contact person who then contacts the bus driver. When the person makes an appointment to ride an OATS bus, the bus picks him up at his home at a specified time, takes him to the door of the place he wants to go and takes him home again.

To keep operating costs down, buses are coordinated to meet varying requests and to fill as many seats as possible during the trip. This may involve one individual coming to town very early for a shopping trip in order to get another individual to a doctor's appointment on time. But generally, the spirit is cooperative and complicated scheduling details run smoothly. However, it takes constant education to help the OATS members understand the advantages of cooperating in a mass transportation program. The idea of going shopping or to the doctor with 14 friends and neighbors is one that is readily accepted only after the person successfully uses one of the buses. While it is sometimes hard to educate an individual that it is to his benefit to leave early to go shopping so that someone else may go to the doctor, most people realize that at one time or another the bus will make concessions for their personal wishes.

While the OATS program is large the real control over the routes and scheduling lies with a volunteer local unit called an OATS County Committee. Some of the functions of an OATS County Committee are organizing routes and bus schedules, enlisting the help and cooperation of local organizations, encouraging persons to join OATS, and assisting in the hiring of the local OATS bus driver. The routes and schedules are worked out with OATS County Committee because it is felt by the Board of Directors and OATS management that only the local people within a county really know what the local needs for transportation are. Some of our transportation is tailored to coincide with the days coupons come out in newspapers, or when social security checks come out, or when grocery stores have the best vegetables, or when certain doctors are in their offices. These are things that only local individuals know about and it would be almost impossible for a central office in Columbia to know precisely what the local needs are.

The OATS County Committee establishes volunteer contacts who take calls from persons needing transportation. Some contacts regularly call perhaps 30 people several times a week. There is at least one county in the OATS network that calls its entire membership of over 300 members at least once a week. This sort of volunteer community network makes OATS strong. The OATS central office has a state-wide toll free number that contacts can call in for information and we at OATS have on file the names of over 500 individuals who are volunteer contacts. With a network of this size and nature, it is possible to disseminate a change of policy over a matter of several days, personally, to almost the entire OATS membership.

The OATS central office deals with the larger problems of scheduling. The problems of cross country scheduling such as a bus coming from northern Missouri to the Cancer Research Center in central Missouri without a full load. The central office will undertake to fill that bus as it comes down from northern Missouri with persons needing to come to Columbia in order to avoid duplication of effort by having a number of individual local buses coming into Columbia, each with just one passenger. This is one advantage of the size of our program and regional approach to transportation.

Another factor involved in scheduling is the overall coordination with medical facilities that the OATS central office provides. OATS is attempting to work closely with the providers of medical services. Some doctors will ask their patients if they are riding with OATS and if they are they will give

them preferential treatment and get them in sooner and out sooner. Medical receptionists in some parts of the state are getting to know the OATS service and will attempt to schedule their elderly patients together so that they can all ride the OATS bus. This is one area that OATS is anxious to bring to its full potential and increase coordination with the providers of the medical services.

A key aspect of local involvement in management besides scheduling is the fact that the OATS County Committee assists in hiring the bus driver within their area. OATS management has found that each county has unique needs and characteristics and the county committees themselves are best suited to hiring a driver to fit their needs. When OATS hires a driver, OATS management advertises the position and then an OATS management representative and the entire local OATS County Committee interview the prospective driver. The representative from management makes certain that the driver meets the certain basic Department of Transportation requirements and safety requirements while the representatives from the County Committee question the individual to determine exactly how the individual would fit in with the elderly population of that county.

The OATS drivers are dedicated. They must be dedicated due to the nature of their job. Being physically fit and good record keepers is not enough. OATS drivers must be courteous and willing to help older people and handicapped riders. OATS drivers have done everything from the routine carrying of groceries to mopping up floors when an OATS rider dropped something. The OATS drivers are people who have a special interest in the elderly and are the riders' friends. They are people who have stopped to see how a regular rider is when he was ill or hasn't been riding, or they often stop for water so passengers can take pills and other types of friendly courteous personal attention for the riders. To find this type of driver it is necessary to have the people themselves involved in the hiring process.

When one examines the amount of support the elderly themselves are devoting to OATS, one is amazed to see how large their part is. First, the local share of the program in terms of cash for fare-contributions, membership contributions and in-kind amounts to \$121,277.91 since 1971. However, that is just a small part of the elderly persons contribution.

If we look at the County Committee's role in management (i.e., hiring driver, routes and schedules), one is impressed, but the most impressive part of all is the volunteer contact role. The cost of hiring just one contact at one dollar per hour for a forty hour week, fifty-two weeks per year in all 83 counties would be \$172,640. With 500 contacts as OATS has now, the cost would be astronomical and would far exceed the total OATS budget for the past three years. OATS could not exist without volunteers and it is largely through their efforts that OATS has existed for as long as it has and continues to grow.

The OATS Board of Directors considers OATS a business, and their often stated objective is their desire to have the program break even. This is an area that the Board of Directors and we in management are particularly concerned about. While some of the buses are approaching self-sufficiency many of the buses are at earlier stages of development and future support is in some respects precarious. Since the beginning of the program in 1971, there has been a total outlay of federal money of \$428,437.35; and the local match was \$121,277.91. The current approved budget is \$847,883.50; and the current federal share is \$420,590.77. That means that in 1974 the program is roughly on a 50/50 matching basis. This will be a difficult goal to reach with so many of the buses just becoming established. (Perhaps impossible and hence, budget restrictions have already been imposed to hold expenditures to \$761,000, but the service, especially now in its development stage suffers.)

The number of users and income per bus varies because some of the buses have been in operation since late 1971 while others are in the process of being established in early 1974. The most established buses carry, during good months, approximately 10 passengers per day and have averaged about \$380 income per month. Some buses on certain trips in rural medium size towns have average as high as 30 passengers on given days. When the program is fully stabilized the goal is to average approximately 6½ persons per mile and meet all the expenses of operation. When the program will become stabilized

is difficult to predict; however, one can safely say that the program will begin to stabilize itself when all expansion into new counties has ceased.

Since OATS began, approximately two new buses were put in the field and the volunteer networks organized for each month the program has existed. One can hardly expect a program to stabilize itself under the pressures of rapid expansion. The expansion is nearly over, and what OATS seeks most is financial backing and support for two years of project stabilization and further development.

One of the main objectives of the OATS Board of Directors is to be self-sufficient and entirely free from any outside support. However, the more realistic goal is to survive and continue to provide service where the elderly have become dependent on OATS. This means that the Board recognizes that some level of support will be required for an unspecified period. But, it is felt that at least two years of operational experience should allow the program to stabilize.

The OATS Board of Directors has established the following five levels of goals to guide management and they are milestones on the road to stabilization.

#### OATS OPERATIONAL GOALS

1. Operating Revenue = Driver wages.
2. Operating Revenue = Driver wages + Variable Costs.
3. Operating Revenue = Driver wages + Variable Cost + Operation Cost - Depreciation.
4. Non-Operating Revenue  
+ Operating Revenue = Total Costs - Depreciation.
5. Non-operating Revenue  
+ Operating Revenue = Total Cost.

Level 1 shows operating revenue (that is, bus fare contributions) equal to driver wages. This means that each bus will roughly need to generate \$400.00 a month to equal driver wages. Some of our buses are into trouble now, especially the newly established buses. A second goal level is where operating revenue equals wages plus variable cost. That is when the revenue generated by the buses equals driver wages plus the cost of gas, oil, and maintenance and other variable costs. The third stage of development on the road to success is where operating revenue equals total operating cost minus the depreciation on the buses. This means that the operating revenue would equal the operational portion of administration plus the driver's wages plus the variable costs plus all the other fixed costs involved in the operation of OATS buses. Depreciation has been taken out because that is considered too difficult to meet in this step. Step four is a step that many of the persons involved in OATS consider success. Step four is when operating revenue plus non-operating revenue (that is the membership contributions and donations) equal the total cost of OATS minus depreciation.

It is felt by some that OATS would be a total success if it could pay its entire way except for the cost of replacing the buses every three years. Of course, ultimate success and the level of success that would be enjoyed by all would be where operating revenue plus non-operating revenue equals the total cost; that is, all fixed costs, administration costs and depreciation.

In relation to the five levels of goals, different buses are at different levels of success. Most buses will be beyond or approaching level three by the end of 1974. Although some of the buses which have been operating since 1971 do seem to indicate that with considerable effort and more development goal level four is attainable. Until all buses reach goal level five, outside support will be necessary for OATS to continue to provide its service.

#### CONCLUSION

In conclusion, it is encouraging to hear what some of the 10,000 OATS members have to say in relation to some of the important qualities of the program:

OATS helps to avoid institutionalization and helps the elderly person be more independent.

Eunice Hamilton of Galt agrees and says, "The OATS bus has been a great thing for our little town as so many don't have cars and can't drive. A good

number are using the bus to get to a doctor as our closest doctor is in Trenton."

The OATS buses act as focal points for the aging programs in Missouri and can be the difference between a successful social service and one that is failure due to the fact that people can not get to the location to participate and receive the benefits of the service.

Mrs. Lucille Price of Ridgeway knows OATS has helped her participate and says, "Thanks for Wheels. The wheels have helped me go to volunteer work and to doctors and the drivers have been so good to all of us."

It can be said that OATS is the binder which ties together and makes many programs such as congregate nutrition sites, senior centers, medical facilities, and other everyday services readily available to the elderly person.

Mrs. Ruth Sapp of Centertown says it this way, "I have been riding the OATS bus for two years now. It is the most wonderful thing. It comes and gets the older folks and takes them to doctors and anywhere they have to go. It is a great thing—only wish more people would join for they would enjoy it. If it were not for OATS, I would have no transportation. Thanks for OATS."

Walter Gravely of Armstrong, before he passed away, sent OATS one of the most encouraging notes the program has ever received. His note embodies the spirit with which many of the elderly persons support OATS.

While never an active rider himself, Walter Gravely recognized the transportation needs of his elderly friends and neighbors, and regularly made his membership contribution to insure that the program would continue for the benefit of all.

He said, "I am a charter member of OATS and proud to be a member. I've never used it as yet as I'm confined to home. But if I ever have to make trips regularly to a doctor's office I certainly will be depending on OATS to get me there. We sure have a wonderful thing in our county. Thank you."

Mr. Chairman and distinguished sub-committee members, OATS again thanks you for the opportunity to make this presentation and we at OATS hope to serve as encouragement to others who wish to initiate transportation programs for the elderly. We hope to be available as a model to those persons in government and private life who wish to advance research and provide further support of much needed transportation programs for the elderly.

Sincerely,

QUINNIE BENTON,  
OATS Board President.  
PETER M. SCHAUER,  
General Manager.

Senator CHILES. Mr. Burkhardt?

**STATEMENT OF JON E. BURKHARDT, PROGRAM DIRECTOR, RMC  
RESEARCH CORP., BETHESDA, MD.**

Mr. BURKHARDT. Thank you, Senator Chiles. It is a pleasure to speak to you. I have a prepared statement which I would like to submit for the record, and I will summarize that statement here.\*

I am speaking in particular to the problems that the rural elderly have in obtaining transportation. I would like to talk about three issues: the needs for transportation, some possible solutions, and the benefits we might expect if transportation were available.

First of all, the research that I have been involved in has shown that there are very few areas with no transportation. We have found very few people who do not travel at all—for example, less than 1 percent of the elderly are not traveling. There is transportation available in rural America, and people are getting to it.

\*See statement, p. 105.



Still, there are major problems that must be resolved. The problems generally involve travel frequency and cost.

In many areas, very little transportation is available to people. Now, what do we mean by transportation availability? The best situation one can be in is to own an auto. The problems are slight at that point. If no auto is owned, but there is taxi service in the area, that is a little bit worse, but not much. If no autos and no taxis are available, but there is bus service in the area, that is a little bit worse. If no autos, taxis, or buses are available, but you can get your friends and neighbors to take you, that is less attractive but still usable. If no other mode is available but walking, and if you can walk, then that is a possible solution. As you can see, as you take each of these solutions away, the problem gets more and more serious.

Another viewpoint must also be recognized: how people can use available systems? First of all, there are some people who have few problems because their income is sufficient. In many of the rural areas that we are talking about, you would need an income of \$7,500 a year to be included in that category. The second (lower) group is comprised of those who can afford to travel by taxi. Third, there are those who can only afford to travel by bus; and last, there are those who have so little money that they have problems even traveling by their own cars.

Thus, we have two ways of assessing transportation needs, the first based on what kind of transportation is available, and the second based on the ability to pay for the transportation available.

#### POSSIBLE SOLUTIONS TO RURAL TRANSPORTATION PROBLEMS

I would like to lay out some of the possible solutions that we ought to be considering at this point in time for different kinds of rural areas. Looking at the major problems, we see that there are two major types of solutions. One is to increase availability of transportation, and the second is to increase the purchasing power of people who might use it.

Availability can be increased by coordinating existing facilities, using advanced scheduling techniques such as dial-a-ride systems, or using other forms of scheduling which might, for example, lead to integration of freight and parcel service with passenger service.

The utilization of available systems can be improved by programs to reduce fares or to increase the rider's purchasing ability. Fares can be reduced by reducing basic costs. For example, wage costs can be cut by volunteer systems that we have heard about today, or by fuller utilization of existing vehicles, such as taxis. Increasing of purchasing ability could come about through payments to drivers, through transportation stamps, or just cash payments.

I would like to focus on one of the possible solutions in particular. That is the coordination of existing facilities that now exist in rural areas.

There is a lot of transportation available in rural America today. What we have, however, is a classic example of mismatch between resources and people that need them. Therefore, we must restructure the services. What is happening right now is an inefficient use of ve-

hicles and other facilities, an inefficient use of personnel, and inefficiencies in program administration, which culminate in transportation systems not being run by transportation experts.

To give you an example, in one county in New York State there are 77 transportation programs. These transportation programs are being provided by social service agencies, not by transportation agencies. In the State of New York, \$80 million per year is spent on transportation by social service agencies. That does not include the school bus system, which accounts for another \$200 million per year.

Let me give you a small-scale example. In Greensboro, N.C., there are 24 social service agencies in the city, 14 of which own their own vehicles. The pattern of use of these vehicles is very mixed. One agency pays as much as \$7.60 per trip for each person they transport. Another agency pays 67 cents. We have to coordinate these resources. Let us just take a look at what is available.

(1) First of all, many welfare agencies transport their clients to receive the services of the agency. Many of these agencies are using a high-paid professional person as a taxi driver.

(2) In certain areas, such as Sumter, S.C., there are so many unlicensed taxi drivers running around, if you could put them all together, you could transport people at fares they could afford, and you would make a profit doing it.

(3) There are many special transportation projects throughout the country. OEO has funded 53 such projects in rural areas. The Administration on Aging is involved in over 300, including the 100 or so reduced fare programs in local transit.

(4) On-going programs which have Federal sponsorship such as Headstart, Emergency Food and Medical Services, and others have to have transportation as a part of their systems.

(5) The schoolbus system is traditionally one of the untouchable resources of the rural areas. However, a number of States have begun to use schoolbuses to transport the elderly and/or the poor. For example, the State of Iowa has passed legislation which will allow school vehicles to be used for community purposes.

(6) The maintenance facilities of local highway agencies might be used to keep vehicles of a rural transportation system going. Military installations often have quite extensive maintenance facilities, and they might be put to similar use. Military bases also have a lot of people who know about transportation, whose expertise could be put to use in a coordinated community system. These are the kind of resources we ought to consider using.

#### SMALLER COST PER PASSENGER

If we could coordinate all of these resources, what could we expect?

First of all, total capital costs would decrease. It would not be necessary to buy as many vehicles for all of these systems. Second, if the operations of these systems could be coordinated, you could reduce the cost of passenger trips by fuller vehicle utilization. Third, you could have a better utilization of maintenance facilities; and finally, you

should have reduced supervisory costs. Therefore, what you have is more transportation being provided to more people, and you would be able to do it on a smaller cost per passenger. The total cost savings could be very large.

Let me go on to the second alternative to solve rural transportation problems, which is augmenting income. I would like to talk about the transportation stamp program, which, as you may know, may soon be started on a statewide basis in West Virginia.

The reason why this is a particularly effective program, in contrast to just giving cash, is that transportation has what we call multiplier benefits. This has a great impact on the lives of the elderly in particular. One of the other options would be to bring somebody to a person's home, such as a doctor, or even food delivery services which we see in many cases, the Meals-on-Wheels program. On the other hand, if somebody gets out into the community, as they can through a transportation stamp program, they can do a great number of things, and they do not have to be limited to just one activity. Our experience in West Virginia shows that people tend to engage in five or six activities on a trip to town, whereas if they were going to one isolated store as before, they would do only one activity.

This is the same kind of impact that you want. You want persons to multiply their activities. This is the unique benefit about transportation services. This is why the transportation stamp program will work well.

The possible problems of a transportation stamp program revolve around the availability of the transportation you are giving somebody stamps or credits to use. In many rural areas, transportation is only available through friends or neighbors. There are problems with this mode of travel. The day the welfare checks come out, it costs more to go to town. A trip on another day of the month will not cost that much. One thing we were told by a man in West Virginia is very appropriate here. He said the benefits of a bus system for him would be that "I do not have to rely on folks that do not want to fool with me, or that I do not want to associate with." The psychic costs of having to beg for a ride, even when you are paying \$10 for it, are very high.

#### BENEFITS OF RURAL TRANSPORTATION SYSTEMS

Let us go on and talk about benefits that might occur if we could get systems going in rural areas. The benefits are graphically described in the words of people that we have talked to.

This is an 82-year-old retired farmer in Missouri, "We cannot get anyone to take us to the grocery store or to doctors. Do you know what that means? To be old and sick and alone?"

A 62-year-old man in South Carolina said, "People can go to the doctor and won't die before they can hunt a car."

A 67-year-old woman in North Carolina says, "I really believe that the old folks should be better taken care of. There are so many old folks who do not have any way of getting around. Some of them cannot even get their children to take care of them."

A 76-year-old housewife from Missouri says, "My eyes are so bad, I am afraid I will fall and hurt myself. I guess I should go out more but I cannot. I cannot seem to walk any more."

Contrast these forlorn statements to what people who have received transportation say. These are people who have gotten transportation for the first time. It has opened up worlds they have never seen—for example, a 70-year-old man who had never seen railroad trains in his life but suddenly had this experience using the free bus system in West Virginia.

A man told us, "It helped me to get out of here and saved my life. I had cancer and did not know it until the bus brought me to a doctor. I could not afford someone to bring me to Beckley."

Another person said, "It has done everything, a 100 percent. It brought me out of a darkened mountain into the light."

Someone else just said, "It is God's blessing."

The kinds of quantifiable benefits you can expect are savings in transportation expenses, savings in shopping expenses, a greater use of social service programs, and an increase in travel for community purposes, such as community action and preventable medical care. We do have a much greater number of multipurpose trips, which means transportation is being used much more efficiently. Persons will tend to go to larger towns and to engage in more activities than before.

However, you have to consider some secondary effect on localities as well. In particular, the change in destination can be a hardship to some rural store owners, and therefore, the people that depend on them. Many rural store owners cannot operate on a low-cost basis as supermarkets in town. If a new transportation system provides a way for people to get in town and buy food cheaper, they will do that, and this will cause a redistribution of purchasing. There will probably be as much purchasing of food as before, but some people might be forced out of business.

#### SPECIALIZED SYSTEM OBJECTED TO

The same thing is true of existing bus operators. We have heard from many programs in the country that would like to run a special system, but Greyhound comes to the Public Service Commission, and says the proposed service will take riders from us. The Public Service Commission therefore denies authority to operate the special project. Another frequent occurrence is to find a system that has been failing for years, and when all of a sudden there is a little transportation project that comes around and hauls 200 people a month the original systems then accuse the new project of bankrupting them. These are the kinds of problems that will have to be handled.

I would like to propose that this Committee and the Senators themselves undertake some particular tasks to take care of some of the problems we face today.

First of all, the initial step should be to insure the full funding of existing legislation, in particular, the Federal-Aid Highway Act of 1973, in particular, section 147, the rural demonstration project has to receive full funding, and we should not let the opportunities in this

important legislation escape from us. It has been a long time. People have been looking forward to this, and there is a lot that can be accomplished by the funds authorized under this legislation. The Older Americans Act of 1973, and the Rural Development Act of 1972 also require as much money as we possibly can give to them.

Also, I think that new legislation allowing the coordination of existing facilities is one of the primary things we should push for.

I think major demonstration projects on a statewide basis ought to be instituted right now so that we can see which are minimal and which are not, because very many of them are going to be coordinated, and we are going to be able to make very significant improvements in the lives of the elderly ones that we can get to service that is rightly theirs by law.

Thank you very much.

Senator CHILES. Thank you, Mr. Burkhardt, your prepared statement will be inserted at this point in the record.

[The prepared statement of Mr. Burkhardt follows:]

#### PREPARED STATEMENT OF JON E. BURKHARDT

##### TRANSPORTATION FOR THE RURAL ELDERLY: PROBLEMS, SOLUTIONS, AND BENEFITS

There has never before been a society that could offer its citizens the quality and variety of goods and service available to Americans today. However, the ability to share in this abundance often depends greatly on being able to travel to where these goods and services are produced or distributed. Some persons and communities—in particular, the rural elderly—still remain isolated from the mainstream of modern American society because of their inability to travel. In some cases, this immobility is due to their inability to pay the price for existing transportation services; in other cases, transportation services are non-existent (or nearly so) for persons not owning automobiles.

Many rural counties now have truly fine all-weather road systems. Thus, there are relatively few transportation problems faced by those in rural areas who are able to drive and can afford to maintain reliable private automobiles. Compared to this mobile segment, those who do not have access to an auto or are not able to drive are often unaware of available measures to improve their living conditions or unable to take advantage of those they know about. The social and economic isolation fostered by distances between people and communities is compounded by the expense and difficulty of traveling. This immobility substantially decreases their opportunity to participate in the activities and transactions characteristic of our modern, complex, specialized society. In turn, this lack of opportunity is thought to maintain, if not produce, many of the cultural and economic problems of rural residents.

This paper will discuss the three most crucial issues in coming to grips with the transportation needs of the rural elderly:

- (1) Who needs transportation and why?
- (2) What kinds of solutions should we be looking at? and,
- (3) What changes could we make in the lives of the rural elderly if we could increase their mobility?

##### TRANSPORTATION NEEDS OF THE RURAL ELDERLY

If a particular trip is desired by a household whether or not the trip will be taken depends on two factors: (1) Is there any transportation *available*? (2) Can the traveler *use* the transportation facilities or is he prevented from doing so by physical, monetary, legal or other limitations? By considering the characteristics of a particular trip (for example, the desired destination, departure and arrival times, cost, etc.), we could say, on a trip-by-trip basis,

whether or not a particular household needed additional transportation according to the procedure in Figure 1. This algorithm begins with the question of auto ownership for the household. It then asks if the auto is available for that trip (it may not be for the housewife in a one-car family), if the particular traveler in question can operate the auto (persons that are too young, too old, or handicapped cannot operate it), and if the traveler can afford the cost of that particular trip (low-income persons may not travel in certain instances to save money for other trips). The availability and affordability questions are asked for each transportation mode to determine a residual number of persons without transportation meeting their requirements. They are those people who answer "no" to the last question on the list.

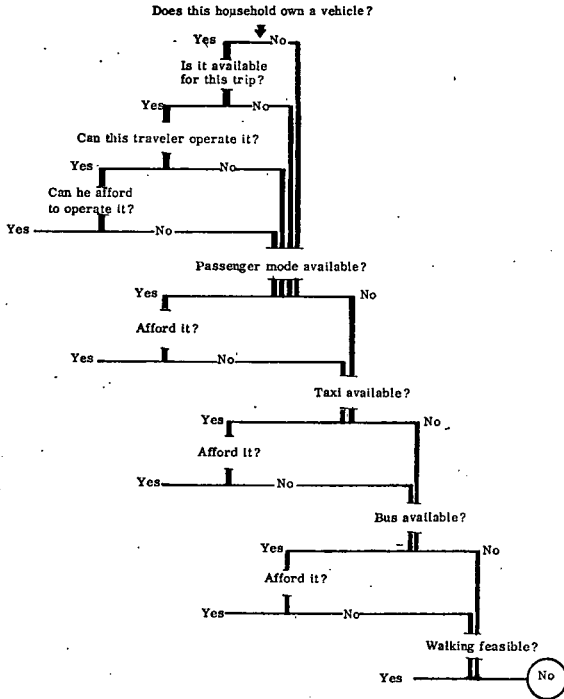


Figure 1: ALGORITHM: HOUSEHOLDS NEEDING TRANSPORTATION

### Transportation Availability

An important finding of rural transportation studies is that quite a lot of transportation is available and is being used in rural areas, even by the poorest families. A quite common mode of transportation is as a passenger in a friend's or neighbor's car.<sup>1</sup> In other areas, bus services are available along major routes, and the buses can often be flagged down at any point along the highway.

<sup>1</sup> In the ten percent most poor and most rural counties in the U.S., sixty-five percent of the families own cars that were in operating condition at the time of the 1960 Census (median figure). The worst case is Kemper County, Mississippi, where only 33 percent of the families had a car. In the most rural counties in Appalachia, approximately 73 percent of all households owned vehicles in 1960. (See Brian Noble, "How to Improve Rural Transportation Systems," *Appalachia*, April 1972, pp. 18-25.)

There are exceptions to this general availability, of course. In many rural areas there may be a handful of families, miles from anyone else, who have no means of transportation. An unusual example of an isolated community is near Newfoundland, where the Canadian Department of Transport is considering a combination land-sea system to reach a community that is said to be operating just as it did in the seventeenth century.

The problem becomes one of measuring *how much* is available, not *if* it is available. Obviously, a person who does not own an automobile does not have as much transportation available as one who owns an undependable automobile, who does not in turn have as much as a person who owns a dependable auto. Degrees of availability are distinct here if difficult to quantify. The following situations represent significantly distinct measures of the lack of transportation: when the family does not own a car; when no taxi service can be called to pick up a person; when no bus service is available nearby; when friends or neighbors can't or won't supply transportation; and when walking is not feasible.

When none of these situations occur, the availability of transportation is very good; when all occur, it is extremely poor. Several levels of availability are possible between these extremes.<sup>2</sup>

#### *Transportation "Usability"*

*Transportation Affordability.*—When a household cannot afford to travel on existing modes of transportation (including its own car), that household has unmet travel needs. There appear to be four distinct subgroups from a monetary standpoint: household cannot afford to travel by car; household cannot afford to travel by bus; household cannot afford to travel by taxi; household has comparatively little difficulty traveling.

The somewhat arbitrary nature of these definitions is recognized. A more satisfactory procedure would be to contrast annual household income with trip cost and perform the calculations on a per trip basis. However, the proposed procedure is felt to be an adequate approximation of needs for the moment.

*Non-Monetary Use Factors.*—Several kinds of problems that particularly affect the elderly must be included in determining if, in fact, the elderly will really be able to use the proposed system. For example, physical problems such as failing eyesight and slowed reaction times mean that many of the elderly cannot drive. Walking can also be difficult and dangerous—elderly pedestrians are often involved in fatal accidents (2.5 times as often as one would expect from considering their proportion of the total population). Licensing and insurance problems make driving impossible for a large group of elderly (indicating that some transportation "solutions" could be legislative and regulatory in nature instead of hardware-oriented). Then there are those who cannot climb bus steps or are prohibited by other architectural barriers from using existing systems. These problems can create as great a restriction on mobility as can the availability and affordability problems.<sup>3</sup>

#### THE KINDS OF TRANSPORTATION OPTIONS AVAILABLE

We can define a transportation system as a means of linking people and the goods, services, and activities they desire. In some rural areas, the present transportation services do not adequately serve all persons, particularly the elderly and the poor. To remedy this situation, the following range of strategies is possible: transport people to the destinations they desire; transport goods, services and activities to the people; relocate people (change residential locations); relocate goods, services, and activities (change their locations).

We will focus on the first option—transporting people—because it offers advantages the other options do not (in particular, social interaction in the midst of a community) and because it is an immediately implementable strategy.

How to provide transportation service to the rural elderly will depend on the particular kinds of travel needs in the locality being investigated. As previously discussed, the two major types of situations in which additional transportation is needed occur: when the transportation facilities do not

<sup>2</sup>It is common for the elderly in rural and urban areas to be unaware of the transportation services actually available to them. We would argue that these people are "in need" because the ultimate effect is restriction of their travel. However, the solution to their need is relatively simple: an information and education program.

<sup>3</sup>For further details about the definition and estimation of transportation needs, see J. Burkhardt and C. Eby, "Need" as a Criterion For Transportation Planning, in *Transportation Systems Planning and Analysis, Highway Research Record No. 435*, Washington: Highway Research Board, 1973, pp. 32-41.

provide adequate service or do not exist at all, and when people cannot use the existing facilities.

#### *Options for Increasing Transportation Availability*

The brightest prospect for increasing the amount and frequency of transportation available is coordinating the very substantial resources currently possessed by social service agencies. New scheduling for existing systems should also have some impact on frequency and coverage.

*Coordinating Existing Resources.*—As previously discussed, the number of rural elderly who do not travel out of their homes for any reason at all is extremely small. Similarly, there is a lot of transportation being provided in many rural counties today. What we have is a classic example of a mismatch between existing resources and those who need them. Therefore, methods to restructure the services that already exist should be a top priority task.

Consider several examples. The state of New York spends \$80 million per year on transportation as line items in the budgets of nontransportation agencies. This does not include \$200 million per year spent to transport school children. In one county—Rockland—there are 77 state and local agencies that provide transportation services to the economically, social or physically handicapped. Imagine what could be done if all that energy and money were being spent in a coordinated fashion.<sup>4</sup>

On a smaller scale, Greensboro, North Carolina is also an instructive example. Of the twenty-four social service agencies in the city (which has a population of about 150,000), fourteen own vehicles of one kind or another and provide transportation for their clients. The vehicles are operated only briefly during the day and are not well utilized when operated. Average costs per passenger trip runs as much as \$7.60 for one of the agencies, while the average passenger trip costs another agency only \$0.69.<sup>5</sup>

These examples point out the urgent need to coordinate existing resources. Some of the agencies that should be considered for inclusion in a comprehensive, community-wide transportation system in rural areas include:

*Welfare agencies.*—Many of these agencies reimburse their clients for some transportation expenses or actually pick up and transport them. In such cases, the driver is usually a trained social worker.

*Private entrepreneurs.*—In some cases, this can be a very significant resource. In the Sumter, South Carolina area, there are so many unlicensed taxi drivers that if their activities could be coordinated, they could probably provide low-cost transportation service at a profit. Some regular bus services now existing in rural areas could be coordinated with other resources to serve persons not now served. Also, some persons in rural areas make significant incomes by transporting their neighbors.

*Special projects.*—Special purpose and demonstration projects have been funded throughout the country by various agencies, particularly OEO and AoA. At last count, OEO had funded 53 rural transportation projects<sup>6</sup> and AoA was involved in funding about 270 projects, or projects with transportation components in both urban and rural areas,<sup>7</sup> including the one hundred or so reduced-fare programs on local transit systems.<sup>8</sup>

*On-going programs.*—Many federally-sponsored programs, such as Head Start, WIN, Emergency Food and Medical Services, Manpower Development, Migrant Child and Health Care, and many others, have transportation as an integral part of their projects.

<sup>4</sup> Information contained in letter of February 4, 1974 from Richard Yukubousky, Planning and Research Bureau, New York Department of Transportation, and A. Politano, C. Keek and R. Yukubousky, *Selected Transportation Services Provided by Public Agencies in New York State*, New York Department of Transportation, Report PRR 48, August 1973.

<sup>5</sup> Alice E. Kidder, "Transportation Policy and the Delivery of Social Services: A Small City Case Study," paper presented to the Highway Research Board, January 1974.

<sup>6</sup> Ira Kaye, "Transportation Problems of the Older American in Rural Areas," in *Rural Development: 1971: A Year of Listening and Watching the Growing Consensus that Something Must be Done for the People of the American Countryside*, Report of the Committee on Agriculture and Forestry, U.S. Senate, May 1972, pp. 429-446.

<sup>7</sup> Report by Mr. Joe Revis concerning a study by the Institute for Public Administration being performed for the Administration on Aging.

<sup>8</sup> See "Reduced Fares—How Effective?" in *Developments in Aging: 1972 and January-March 1973*, Report of the Special Committee on Aging, U.S. Senate 1973, p. 79.



*The school bus system.*—Although it has not been politically feasible to incorporate school buses in community-wide transportation systems to date, the state of Iowa has just passed legislation allowing such use. Problems of vehicle design and scheduling still have to be overcome before school buses can be used for other purposes.

*Local highway departments.*—Many state and local highway agencies have maintenance facilities that are currently underutilized. They could form an important component of a community-wide system.

*Military installations.*—Many military installations maintain very sizeable investments in vehicles and maintenance facilities. In addition, they have highly skilled personnel in scheduling and logistics. An example of the application of this expertise to rural transportation problems is the work being done by the Army Corps of Engineers at Fort Benning, Georgia in the Huntsville area.

These are the most promising of the many resources that should be considered.<sup>9</sup> Other resources—such as local employers—could be included in a rural transportation system if the service was not primarily for the elderly.

What could we expect to happen if existing transportation services were coordinated? First, total capital costs would decrease because it would no longer be necessary to have so many vehicles. Second, less labor input per passenger carried would be required. Thus, by fuller vehicle utilization, both capital and labor costs (which alone can easily run above 50 percent of total system costs) can be significantly reduced, thus reducing the cost per passenger trip. Coordination would most probably result in a better utilization of maintenance facilities, thus lower overall costs still further. Finally, there would be reduced supervisory costs because of the need for fewer supervisory personnel. Since the remaining personnel would have more responsibility, it would be possible to justify hiring persons with more expertise in transportation operations, which should improve system efficiency and further reduce costs.

*New Scheduling Procedures.*—Bus and taxi operators often do not serve low-density rural areas because it is not economically feasible for them to do so. This problem can be attacked on two fronts: ensuring more passengers per trip and eliminating dead-head trips. The first can be addressed by techniques to fill vehicles, such as running particular routes on particular days only,<sup>10</sup> running vehicles only when a minimum total fare is assured, and dynamic schedule and routing through dial-a-bus concepts. Dead-head trip problems might be resolved by allowing the system to carry freight (parcels) from town to the rural areas and carry rural produce back to town. Carrying workers from town to and from rural work locations could fill the vehicles on the other half of shopping trips. For example, the vehicle leaves town with workers, returns to town with shoppers, brings the shoppers back to their homes, and picks up the workers and takes them back to town. Other strategies for ensuring fuller vehicle utilization are also possible and must be developed.

Procedures for encouraging friends and neighbors to provide transportation for the elderly must also be designed. A ride board, or other semi-public notice of when people intend to go specific places, could be established so that the elderly could pay only the *marginal* costs of their transportation. Emergency or special-purpose trips must also be made available. In these cases, the person who requires the trip or an agency acting on his behalf should reimburse the transport provider for the *full* cost of the trip.

#### *Options to Remove Constraints to Using Currently Adequate Transportation Facilities*

The reasons for not being able to use existing systems include impairments to physical ability and health, legal constraints, and lack of money. While professional assistance can sometimes overcome mobility impairments, facility

<sup>9</sup> A possible addition to the list is the U.S. Postal Service. However, despite the renown of the Postal Passenger Service in Switzerland, use of postal vehicles in this country does not appear possible because of scheduling problems. See J. Burkhardt, C. Eby, et al. *The Transportation Problems of the Rural Poor*, report prepared for OEO, Resource Management Corporation, Bethesda, Maryland, January 1971, esp. Vol. II, pp. 100–115.

<sup>10</sup> Rural peak load problems, such as the first and fifteenth of the month when welfare checks and food stamps are delivered, could be alleviated if such agencies would agree to stagger payments.

improvements requiring capital expenditures are often required to meet the transportation needs of the handicapped.<sup>11</sup> Vehicles that include such special capabilities are now operating throughout various parts of the country.<sup>12</sup>

Legal and institutional constraints continue to pose great transportation problems for the rural and urban elderly. The 1971 White House Conference on Aging showed a great deal of concern with age discrimination with regard to driver licensing and insurance cancellations. Particularly in rural areas, not being able to drive very seriously decreases one's mobility.

The most pressing need for the majority of the rural elderly—particularly those without cars—is how to pay for the trips they take. Among families whose head is 65 or older, thirty-seven percent have poverty or near poverty level incomes, making the purchase of adequate transportation a severe problem for them. Among persons over 65, living alone or with non-relatives, seventy percent have incomes that hinder their ability to pay for the transportation they need.<sup>13</sup> The story in the 1970 report of the Senate Committee on Aging of the elderly man who spent \$31 (of his monthly income of \$90) and 10½ hours for one trip to the doctor is a classic because of the frequency with which instances like this occur.<sup>14</sup> Clearly, if we could solve the problem of being able to pay for transportation, we could handle a sizeable proportion of the overall problem.

*Fare-Reduction Methods.*—There are a number of methods of reducing fares on existing transportation systems that are worthy of careful consideration. First, fares may be cut by fuller vehicle utilization. This can be particularly important in areas where sufficient taxi fleets exist, as in northeastern South Carolina, where it was estimated that a rural transportation system could operate without any subsidy at all while reducing fares and ensuring adequate profits at the same time.<sup>15</sup> In order to more fully utilize taxis and other vehicles, they may need communications systems and procedures such that they function more as demand-responsive jitneys or dialed buses than as taxis.

Second, costs may be cut by eliminating or reducing driver wages, since these are the most significant operating cost items in any system. Volunteer driver systems have worked well in programs for the elderly, but frequent service and dependability considerations rule out volunteers for many cases. Adding passenger to freight and mail deliveries has been suggested often, although research has shown that mail schedules are such that they would not encourage passenger use of vehicles.<sup>16</sup> Car-pooling is an instance where the driver is not paid for his time since he must make the trip anyway. The scheduled car-pools operating in Warren-Forest counties in Pennsylvania provide a striking example of one of the few successful rural transit operations in the country. Charging two to five cents per seat-mile, the operators make enough to cover costs and buy new vehicles every three years.<sup>17</sup>

*Methods for Augmenting Income of Travelers.*—Where existing transportation services are adequate, travel problems revolve around the ability of the riders to pay for their trips. A scheme that has been proposed several times is that of an agency giving the rider coupons or tokens which he in turn gives to the driver of the vehicle. The driver or transit company then takes tokens to the agency and receives a full fare payment for each rider. This transportation stamp program is now being demonstrated in a West Virginia county. There is a proposal to extend this demonstration to the entire state at a cost of over \$4 million for the first two years of a four-year project. Other possible methods of increasing the ability of travelers to purchase trips are direct cash payments to selected individuals and direct reimbursements to transportation operators for providing service to selected persons.

<sup>11</sup> Ruth Lauder. *The Goal is: Mobility!*, Social and Rehabilitative Service, HEW, Washington, 1970 and Abt Associates, *Travel Barriers*, report prepared for the U.S. Department of Transportation, 1969.

<sup>12</sup> James Young, "Findings from U.S. DOT Urban Transportation Demonstration Projects," paper presented to the conference on New Programs in Planning and Action in Transit Programs for the Transportation Disadvantaged, St. Petersburg Beach, Florida, November 1973.

<sup>13</sup> Kaye, *op. cit.*, pp. 429-430.

<sup>14</sup> *Older Americans and Transportation, op. cit.*, pp. 15-16.

<sup>15</sup> Burkhardt, Eby et al. *Transportation Problems . . .*, Volume 1, pp. 75-80.

<sup>16</sup> *Ibid.*, Volume 2, pp. 100-116.

<sup>17</sup> William E. Griswold, "A Transportation System for Rural Areas in Northwest Pennsylvania," memo to Northwest Pennsylvania, Arthur D. Little, Inc., Oct. 9, 1968.

These alternatives appear to differ substantially in terms of the number of trips possible for a given cost and consequently the cost per trip. It is likely that direct cash payments would not be spent entirely on transportation even if they were given expressly for that purpose alone. If transportation stamps are given by riders to transportation operators, the operators may increase the price of the trips because they know that the travelers now have more money. This unfortunate practice, sometimes referred to as "gouging", has been observed to occur when individuals have received subsidies for medicine,<sup>18</sup> housing,<sup>19</sup> and transportation.<sup>20</sup> This leaves payments directly to transportation operators as the alternative under which trip prices can be most closely controlled. According to this one criterion, this would appear to be the best of these programs. One must remember that income supplement programs must be closely compared to the other alternative transportation strategies.

The benefits of income supplement programs include allowing the transportation disadvantaged to travel more without diverting traffic from existing transportation providers. However, the caveat about "where such services are adequate" eliminates many rural areas from consideration. Bus and taxi services simply do not exist in many rural areas, and buses are often scheduled too infrequently or at hours useless for local travel in other areas. The term "friends and neighbors" is often a severe euphemism for that particular mode. There are frequently high psychic or social costs that must be added to the usually steep monetary cost of the trip. As one resident of a small community in a West Virginia hollow explained the benefits of a new bus system there, "I don't have to rely on people that don't want to fool with me or I don't want to associate with." Then there is always the problem that the driver might not be going to the right destination or might not be departing (or returning) at the appropriate time. Therefore, while the transportation credit program is often worth considering, it may not be generally applicable.

#### SUMMARY

At the moment, the following options for increasing the mobility of the elderly in rural areas without major capital investments are: options to increase transportation availability; coordinate existing facilities, increase vehicle utilization to provide more revenue for system operators, schedule service, eliminate dead-head runs by freight and parcel service integrating trip purposes served, and dial-a-bus or other flexible routing and scheduling; options to remove constraints to mobility, reduce fares by—fuller vehicle utilization, reducing driver wages and/or other operating costs; augment traveler's purchasing ability by—payments directly to transport operators, transportation stamps or credits, direct cash payments.

Research has shown that efforts to reduce constraints (particularly financial) and to increase availability will *both* be required in most rural areas to meet the needs of the elderly and other transportation disadvantaged persons living there.

#### POSSIBLE CHANGES IN THE LIVES OF THE RURAL ELDERLY

##### *Benefits Seen by the Elderly*

The elderly do recognize transportation as one of their greatest problems. At the Forums preceding the 1971 White House Conference on Aging, transportation was identified as the most crucial problem of the elderly after income and health. The session of the conference on the rural elderly identified transportation as the number one problem.

<sup>18</sup> For example see "Medicare Payments Up in Maryland and Virginia." *Washington Post*, February 8, 1973, page C-1, and related front-page articles of the preceding month.

<sup>19</sup> Preliminary reports from the Department of Housing and Urban Development indicate that housing prices in some areas have risen the full \$15,000 allowed as payment above market value for replacement housing for individuals displaced by HUD programs. This increase in cost has been attributed by HUD officials to the subsidy allowed under the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-636).

<sup>20</sup> Personal interviews by RMC staff in West Virginia and other states who showed that "friends" and neighbors charred more for trips on the days that welfare checks or food stamps could be obtained. These opinions were confirmed by the analyses of trip purpose by cost (adjusted for destination).

Impressive as they are, aggregated problem statements such as these often lose their urgency. When we asked the elderly in rural areas what it would mean to them if they could get dependable, affordable transportation, here is what they said:

An 82-year old retired farmer in Missouri: "We can't get anyone to take us to the grocery store or doctors. Do you know what that means—to be old and sick and alone?"

A 76-year old woman living alone in Missouri: "People could get out and go see different places and not have to just sit home and watch their life go by."

A 62-year old man in South Carolina: "People can go to the doctor and won't die before they can hunt a car."

A 62-year old woman in South Carolina: "Please, Lord, send transportation here."

A 73-year old man in North Carolina: "I can't get anyone to take me when I need to go. I have to walk a lot because I can't find any transportation of any kind."

A 76-year old woman in Missouri: "People won't take you anywhere unless you slap money in their hands."

A 67-year old woman from North Carolina: "I really believe the old folks should be taken better care of. There's so many old folks that don't have any way of getting around. Some of them can't even get their children to take them."

A 76-year old woman from Missouri: "I could enjoy myself better if I could get out and see my friends. My life would just be more interesting . . ."

A 76-year old housewife in Missouri: "My eyes are so bad I'm afraid I'll fall and hurt myself. I guess I ought to go more but I'm afraid to. I just can't seem to walk anymore."

What does transportation mean to people who have never had it and then get it? We asked people in Raleigh County, West Virginia to describe in their own words what the Community Action bus had done for them. The people praised the bus most highly, many of them saying, "It's the best thing that ever happened to us." Thirty-four percent of the riders said that it provided their only means of transportation; twenty-nine percent of them said that it saved money. In addition, they said:

"It's helped me to get out of here and saved my life as I had cancer and didn't know it until the bus brought me to the doctor. I couldn't afford to hire someone to bring me to Beckley."

"It's done everything 100 percent. It's brought us out of a dark mountain into the light."

"Only have a small check—could not even get to town to pick up stamps. Better doctors. Could not get along without the bus. Cannot hire anyone for love or money to bring me to town. No bus service where I live."

"It's a God's blessing."

#### *Changes Apparent to the Analyst*

*Travel Behavior.*—New transportation systems will significantly change the travel patterns of the rural elderly. These travel pattern changes will lead to directly quantifiable monetary and non-monetary benefits, as explained in the next section.

We can expect the following changes in travel patterns of the elderly from new systems: savings in transportation expenses, an increase in travel for non-essential purposes, such as community action, preventative medical care, visiting, and non-food shopping (while food shopping, church and medical treatment travel will not change much in frequency), a change in destination from less urbanized to more urbanized locations, and a much greater number of multi-purpose trips and a slight increase in the overall number of trips (indicating, in conjunction with the change in destination, a more efficient utilization of transportation).

*Benefits to System Users.*—A second level of evaluation goes beyond direct transportation effectiveness for user groups and trip types to consider more rigorously the worthwhileness of the additional trip purposes served in terms of monetary savings or other benefits to the disadvantaged as a result of using the system. This approach would consider:

Savings in transportation expenses to users for the pre-existing trip patterns.

Savings to users as a result of being able to purchase goods and services more frequently at less expensive places than before.

Value of increased accessibility to social services such as health care, welfare services or other public programs.

Increased income as a result of greater accessibility to employment opportunities.

Intangible benefits from decreased isolation—increased sense of security, independence, social awareness and participation, etc.

It will be evident that most of these user advantages are of the sort usually termed "benefits", and are largely quantifiable. It may be assumed that no losses to users exist. The examples given, however, are benefits to the user and not necessarily net benefits to the larger community. To obtain a broader perspective than that of the individual, secondary system impacts must also be considered.

*Secondary Effects on the Locality.*—Implementation of transportation-stimulating methods for the disadvantaged may affect individuals and organizations other than the direct users. It is not clear that such effects will always be significant enough or variable enough among alternative methods in an individual area to warrant measurement efforts solely for the purpose of ranking the alternative methods. In some cases, they surely will be significant. Even when they are not, however, it might be considered desirable in some cases to quantify secondary effects along with user benefits in order to establish the net social justification of the system. In this case, the main problem is income redistribution effects, and the evaluation problem is to determine whether the total benefits of the system are larger than the sum of any losses to specific individuals plus the real resource costs of the system.

Secondary effects may be both beneficial and disbeneficial. Rural transportation projects have sometimes had the effect of increasing sales of stores in towns at the expense of sales of higher-priced country stores. These effects may approximately cancel out in dollar terms, but if country stores are forced out of business by insufficient sales, there may be a net loss to the rural elderly who then become totally dependent on in-town services without the standby value of the country store. Whether the greater choice and lower prices of in-town shopping would offset such consequences for the elderly should be determined.

Impacts on existing sources of transportation may also occur. A method that resulted in the substitution of transportation in private personal cars for taxis and buses would improve the incomes of friends and neighbors of the elderly at the expense of employment or income in commercial transportation. Conversely, substitution of taxi or bus service for private automobiles previously purchased could redistribute income from private car owners to public transportation employees.

#### SUMMARY

If we are to make a significant improvement in the quality of life of elderly persons living in rural areas, we must improve their ability to travel. At the moment, many rural elderly cannot obtain the common necessities of everyday life.

In many cases, improvements to both the transportation service available and the ability of the elderly to purchase it will be required if we expect to see a significant improvement in their status. Coordination of existing transportation resources in rural areas offers substantial benefits and the prospect of immediate implementation—this strategy deserves a large-scale demonstration effort at once. New legislation may be required to make this strategy work. The potential benefits are great. Many rural elderly are aware that they miss a great deal by not being able to travel; many more are unaware of assistance and support that is rightfully theirs under existing laws. Transportation is a key that unlocks these opportunities.

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Senator CHILES. Mr. Lawson, I wondered from your testimony, have the public service commission requirements greatly hindered you in setting up the bus system, or do you think they just change your direction?

Mr. LAWSON. Not in every sense of the word. They have been generally kind enough to look the other way on some of my more questionable operations. The ones with the rural systems are obviously a necessity, and are experimental, and they understand that.

## MEDICAL BUS OPPOSED

However, when we first filed for our PSC certificate, we did encounter strong Greyhound opposition at the hearing, and Greyhound was particularly opposed to one phase of the operation that we proposed, which was a medical bus out of our four counties to the city of Gainesville, a county we did not propose to operate in.

It was simply one extension of our line, for a single purpose. They simply would not believe we would use the bus for straightforward medical trips, and therefore, they did everything in their power at the hearing to convince us not to run it on the basis that we thought we had to run it.

That meant as frequently as we needed to. They limited us by mutual agreement to 3 times a month.

They indicated that if we would do that, they would withdraw their opposition to that particular operation.

We had to agree, of course, because their opposition is quite fierce, and then they asked again if we would also limit our passenger loads to eight people.

Now, this combination tends to dilute the entire idea. Three times a month, eight people each trip, from a single embarkation point almost cancels out the effectiveness of the idea in the first place.

It is very, very difficult to accumulate eight people going all to the same destination, and generally to the same doctor. We have actually run that bus only once in our 6 months career because of that problem.

Senator CHILES. What is your cost, your figure on passenger miles?

Mr. LAWSON. Our cost per passenger mile is calculated at 37½ cents. We know that this is quite low by comparison with others. I think the reason it is low is because we have been calculating it without depreciation.

If we put vehicle depreciation into it, I do not know what it would be, but it covers all of our costs except the cost of replacing the vehicle.

Senator CHILES. You said you are carrying laborers or workers 55 percent of the time.

What kind of fares do they pay?

Mr. LAWSON. The standard fare, and this is a uniform fare; a zone fare for approximately a 12-mile trip.

We have taken a circle around a single community, and found this circular zone system worked quite well, but we converted to a tabular system for PSC filing.

For a 12 mile trip approximately, 50 cents is the fare, and for a trip of 24 miles or thereabouts, it is 90 cents. This converts to about 4 and a fraction cents per mile on that basis.

These fares are different for workers commuting regularly. In their case, we do not charge the full fare; we ask them to buy commuter tickets which is permissible according to PSC, and the commuter tickets reduce a 90 cents fare to 75 cents.

The 50 cents fare becomes 40 cents. We have, also, municipal fares in our daily operations inside of Lake City and Live Oak. These are 20 cents. We have children's fares as well, rural children's fare is 25 cents and 15 cents inside the city limit.

## NO PREFERENTIAL CLASS FARES

Senator CHILES. Do you charge your older people a different fare?

Mr. LAWSON. No, sir; we have to charge a uniform fare under Florida statutes. No preferential class fares are permitted.

Senator CHILES. How far along are you in your effort to establish a four county transit line?

Mr. LAWSON. At this point, I have prepared a very lengthy and complicated proposal for the four counties to consider.

I have developed all of the financial data for them and I have contacted a few County Commissions preliminarily in order to discuss the nature of the material because it is comprehensive.

We have not yet formally approached them. We intend to approach all counties in early March. During the next few weeks, I will be making my pilgrimage to each County Commission.

Senator CHILES. Is your transportation system adapted to the handicapped as well as to the elderly?

Mr. LAWSON. No, sir. The nature of the vehicles would make that extremely difficult. We have four small passenger vans, and we have three used schoolbuses in our entire inventory. None of these vehicles is actually equipped to handle handicapped as we know they should be, but these vehicles were purchased with economy in mind from the very beginning.

As a point of fact, the 10 passenger vans are entirely inadequate in terms of passengers.

Incidentally, I would like to make another point on those vans, those vans are—were originally designed by the manufacturers as suburban family carriers. Putting 10 seats in them does not make buses out of them, however. They are economical to purchase; there is a very low initial capital investment, but they do not in any way, to my thinking, serve the elderly properly.

We have had several complaints and we have done things to them to make them as easy to board as we can. We have put extra steps on them, but the idea of crouching to get to your seat is just not fair to the old people.

Senator CHILES. Thank you, sir.

Mr. Schauer, as you know, the Older Americans Act Amendments of 1973 devised a new status for the establishing of planning and service areas and to serve regions rather than individual communities.

Is this strategy going to make it easier for OATS or more difficult?

Mr. SCHAUER. The new strategy will make it more difficult. The regional concept, the area district on aging, causes funding to go through them, and not to statewide aging programs like OATS.

This is a real problem when it comes to transportation programs that do not stop at county boundaries or area agency boundaries and need to be coordinated over larger areas than even a region. There are some fundamental differences between, let's say nutrition sites which adopt well to the regional concept and transportation programs which cross all boundaries. Somehow more provisions in future legislation needs to be made for interregional programs like OATS.

Senator CHILES. Thank you, sir.



Mr. Burkhardt, you say that legislation may be necessary to make your consolidation, coordination strategy work.

What would be the thrust of this legislation, and what use could be made of the legislation already on the books, such as last year's Older Americans Act?

#### THRUST OF LEGISLATION

Mr. BURKHARDT. I think that the legislation that is required would allow coordination in those areas where coordination is not permitted now.

For example, it is often not possible for people in welfare agencies—operating, for example, under the Social Security Act—to hire another transportation system to handle their clients, although they can sometimes reimburse the clients themselves directly.

In other cases, in particular that of the school vehicles, these simply cannot be used for purposes other than transporting school children. This is an area that will require legislation on a State level. I think much more than the legislation in the Older Americans Act of 1973 is required because we are going to coordinate so many more agencies, and I think that the Older Americans' agencies themselves will not be able to succeed. Provisions such as those in the Allied Services Act must be passed into law.

Senator CHILES. I see.

I want to thank all three of you gentlemen for your testimony. I'm going to have to excuse myself now. Mr. Murphy has a couple of questions he would like to ask Mr. Schauer.

Mr. MURPHY. Thank you.

First, I would like to say on behalf of Senator Eagleton, he regrets not being here for your testimony. He planned to be here, and, of course, he is greatly interested in transportation for the elderly and the progress of the OATS program.

He is tied up in a meeting, and when I left, apparently, he is still there. I do want to ask a couple of things.

How do you meet the capital costs of your program, purchase of the vehicles?

Mr. SCHAUER. The purchase of the vehicles is through a grant, through the Missouri Department of Community Affairs Office of Aging, from title III of the Older Americans Act.

Mr. MURPHY. How much have you gotten out of it so far, vehicle purchase?

Mr. SCHAUER. The total grant?

Mr. MURPHY. You have it in your statement?

Mr. SCHAUER. Yes, it is in the statement.

Mr. MURPHY. That is in the capital costs?

Mr. SCHAUER. The total Federal outlay from 1971, to date has been \$428,437.35.

Mr. MURPHY. But now you are expecting annual Federal expenditure of about \$400,000 for operations costs?

#### MORE FUNDS NECESSARY

Mr. SCHAUER. At least that much if we can get the program to a point where all of the buses at least cover 50 percent of their costs.

However, we feel that since we have been adding new counties and new buses roughly at the rate of two a month since we have been in operation, that we are going to need at least 2 years of further support during the developmental stages. Perhaps even more funds than we are getting now will be necessary to truly make OATS reach its potential.

Mr. MURPHY. The \$400,000 in operating funds for title III, is that for the current fiscal year?

Mr. SCHAUER. It is in some respects confusing because from 1971, up until January 1, 1972, there has been a Federal outlay of about \$400,000 and then this year, the Federal contribution for 1 year has been about \$400,000.

Mr. MURPHY. That is this current fiscal year?

Mr. SCHAUER. Yes, January to December 31.

Mr. MURPHY. That is calendar year.

Mr. SCHAUER. Yes.

Mr. MURPHY. Are you faced with any of the problems of getting a certificate of convenience and necessity, do you have to go before the Public Service Commission?

Mr. SCHAUER. We have a legal opinion on this matter, which leads us to believe we are outside the jurisdiction of the Missouri Public Service Commission, because we are a membership-only transportation program.

Only members are allowed on the bus, every member must carry their OATS card with them when they ride the bus. This has led to a rather comical scene where I am told 70 year olds have been involved in a shakedown when a highway patrolman stopped their bus to find out what was going on when the program was new.

However, as long as we carry only members there should be no problem. We are in close contact with the Missouri Public Service Commission. I feel quite good about the contacts that we have had. They are very sympathetic to the needs of the elderly and as long as we continue to cooperate with private carriers and we adhere to the spirit and letter of all applicable laws, I believe our relationship will continue to be good.

Mr. MURPHY. The General Counsel for the public service program used to be the MARC chairman in Kansas City?

Mr. SCHAUER. We are aware of that.

Mr. MURPHY. What is the State contribution on a program, State funds?

Mr. SCHAUER. There are no State funds involved.

Mr. MURPHY. Have you sought to get any money through the Governor's office or through legislations?

Mr. SCHAUER. You know, the program is so big, I sometimes forget we do receive some revenue sharing funds.

In some specific instances, we have received revenue sharing, such as in one case where the Greene County Court purchased a bus and turned the bus over to the OATS program for use in their region.

In Pettis County, they have supplied money for membership and trip tickets for poor persons.

## RESTRICTED REVENUE SHARING FUNDS

There have been isolated cases across the State where we have used State funds, where revenue sharing has been used, but no overall coordinated program.

Mr. MURPHY. The State, as you know, is essentially restricting its revenue sharing funds to capital investments. It is a pretty good theory but there is no assurance you used them for operating costs. It would seem to make a case for additional capital expenses of your program for revenue sharing from the State level.

Mr. SCHAUER. Correct.

Mr. MILLER. If I might be indulged a personal comment, I would like to make an observation about the enthusiasm for the OATS program, at least as reflected in one community in Missouri, where an OATS program is now emerging. I refer to Branson, in Taney County. I think the Branson program is part of a multi-county affair, which does include Greene County.

Mr. SCHAUER. We have five service areas across the State, and the southwest area includes Taney County, Greene County and 15 other counties.

Mr. MILLER. The Secretary of the Taney County OATS Committee is Mary Patterson, and she reports to me that there is tremendous enthusiasm in that community for the OATS program.

I said this was a personal comment. Mary Patterson who is approaching her 72d birthday, and incidentally has her own car, and does not have a transportation problem of her own, happens to be my wife's mother. One of the personal problems we have in my family is getting her to talk about anything except the OATS program when we talk to her over the phone.

Mr. SCHAUER. As a matter of fact, on Saturday I was in the OATS central office in Columbia, Mo. where we have a statewide toll free WATS number that the county chairman and county contacts can call us on. The chairman of the OATS County Committee in Taney County, Mr. Art Flavin, called me, and told me about some of their successes, and the enthusiasm you refer to was clearly evident in my conversation with Mr. Flavin.

We are very encouraged with Taney County. It looks like it is going to be a good area.

Mr. MURPHY. Mr. Schauer mentioned some problem with the new planning service area concept in the Older Americans Act. I will talk to you about this later, but for the record, I do think those things can be worked out, that arrangements can be entered into on purchase of service buses by the area agencies, relating, I suppose, to the residence of the person being served, it would be the area agency that would fork over the money.

Mr. SCHAUER. One of our most promising sources of future revenue is based on the purchase of services concept. One agency we are currently negotiating with is the Missouri Division of Welfare. This sort of agreement with Welfare looks very promising.

Mr MURPHY. Or the area agency.

Mr. ORIOL. Also for the record, I would like to identify Mr. Jim Murphy as the counsel for the Subcommittee on Aging of the Labor and Public Welfare Committee. The subcommittee is chaired by Senator Eagleton.

Senator Chiles asked me to announce before he left to thank all of the witnesses, those here, and those departed, for a very rich record for this first day of hearing, and the hearings will resume at 10 a.m. Wednesday in this room.

[Whereupon, the committee was recessed at 2:45 p.m.]

## A P P E N D I X

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### LETTERS AND STATEMENTS FROM INDIVIDUALS AND ORGANIZATIONS

#### ITEM 1.—PREPARED STATEMENT OF ROBERT J. AHRENS, DIRECTOR, MAYOR'S OFFICE FOR SENIOR CITIZENS, CHICAGO, ILL., DATED MARCH 15, 1974

Older people want to live independently in the community. The goal of Chicago's policy on aging is to help them to do so. Because mobility is a necessary precondition for independence and for a high quality of life, and because the elderly as a group experience greater restraints on their mobility than do most other groups in society, the transportation problems of the aged population are of continual concern to us. I welcome this opportunity to discuss with you the efforts which we have been making in Chicago to resolve those problems and the additional federal leadership and assistance which we believe to be necessary.

Studies of the transportation problems of the elderly indicate that many of these problems could be alleviated if regular fixed-route public transportation systems were made more accessible to older people. We have therefore devoted considerable energies towards eliminating those economic and physical barriers which have traditionally made fixed-route transportation systems difficult, if not impossible, for the elderly to use.

Although its own financial difficulties have been mounting in recent years, we have been successful in working with the Chicago Transit Authority (CTA) to ensure that CTA services are available to the elderly at a price they can afford to pay. The CTA's Senior Citizen reduced fare program was expanded in November, 1972 to allow persons 65 years of age or older to pay 20¢ instead of 45¢ for the basic fare at all times rather than during specified non-rush hours only. Our Office established and coordinated the distribution of reduced fare I.D. cards that, as of December, 1973 had registered more than 273,000 people 65 years of age and over. It continues to coordinate and administer an ongoing registration program at a number of permanent registration sites.

Although studies of the effects of reduced fare programs are not conclusive, they tend to indicate that the operator realizes a loss in revenue intake despite the increase in elderly ridership. Until the present time, the Chicago Transit Authority has received no special subsidy to cover the cost of its reduced fare program. The City of Chicago has urged the passage of legislation at the federal level that would ensure that all public transit operators would be reimbursed by the Federal Government for such losses.

Last year Illinois enacted a law allowing for \$9 million from the State Road Fund to be used for such a reimbursement program. While the new statute was intended to ensure that the CTA will receive some State assistance for its reduced fare program it did not guarantee that the assistance will cover all revenues lost as a result of the program.

A provision in the statute limits the amount of State assistance to the loss in revenue caused by a reduction in rates up to half the regular fare. The CTA offers a reduction to senior citizens on more than half its regular fare. Even with this statutory limitation the Illinois Department of Transportation anticipates that \$9 million will not be sufficient to grant all transit operators in the State who offer reduced fare programs the maximum subsidy to which they are entitled.

In the last analysis we believe that reduced fare programs serve only as a temporary and tenuous resolution to the problem of economic barriers in public transportation systems. Special reduced fare programs and special subsidies to cover losses incurred from these programs will mean little if transit operators do not receive operating subsidies necessary to maintain regular service operations. Only when regular public transportation systems are guaranteed operating subsidies sufficient to put them back on sound financial footing will economic barriers be permanently removed.

At present, the hope of a regular guaranteed operating subsidy from local and State funds lies in the establishment of a Regional Transportation Authority (RTA) which will be charged with the responsibility for public transportation services in the entire Northeastern Illinois area. On March 19, 1974 a referendum on the establishment of the RTA will be held. We have been working hard to inform voters in the 6-county region of the RTA's special significance and importance for improving transportation for older people.

Even with operating subsidies from States and localities there is still considerable concern that in the long run, this type of aid will turn out to be only stop-gap. If operating subsidies were available from the Federal Government as well as from State and local taxing bodies, we could be better assured of top-quality public transportation services at a price that everyone could afford to pay.

The removal of physical barriers inherent in the design of traditional mass transportation equipment and facilities is a problem with which various departments of the city government involved in transportation planning are becoming increasingly concerned. The newly formed Chicago Urban Transportation District is presently planning a new rapid transit service within the city's central business district and its periphery. After extensive research on the costs and benefits of a barrier-free system, the City of Chicago recommended to the District that full access for the handicapped and elderly be provided in the design and construction of the project.

The Chicago Transit Authority has also shown increasing concern for the need to improve the physical accessibility of public transportation facilities and equipment. The new buses which were purchased under the CTA's 1972-73 capital improvement plan contain a number of design improvements, most notably an access step which is several inches lower than the height of steps of older buses. Approximately \$7.7 million of funds requested for its 1974-75 proposed capital improvement plan are designed, directly or indirectly, to benefit the elderly and physically handicapped.

The City of Chicago has and will continue to assume responsibility for working towards the elimination of barriers in regular public mass transportation systems. But ultimately we believe that the Federal Government must take a greater leadership role in the development of barrier-free systems.

The buses which were purchased by the CTA last year were among the latest, most modern designs being mass-produced by bus manufacturers. Their thirteen inch entry step is recognized as still being a barrier for many people, but standard size buses having lower steps were not yet in mass production. If the Federal Government, as the largest financial supporter of urban mass transportation in the country, had established standards for the barrier-free design of capital equipment and had required that capital grants be used for the purchase of equipment which met these standards, many manufacturers might have been prompted to hasten the development of barrier-free vehicles. Without the guarantee of a market for new products, technological lag can be expected.

Studies of the transportation problems of older people indicate that we must be equally concerned with the provision of special door-to-door transportation services as with increasing the accessibility of fixed route systems. At the present time over ten different agencies and organizations in Chicago provide special transportation services. Strategies being used include demand-activated mini-bus systems, taxicab subsidies, special fixed route mini-bus services and volunteer drivers using their private autos. The field staff of our Office and of other social service agencies continue to report that the use of their own private auto is frequently the only means of assuring that their clients can get to the centers which provide services that they need. All of the formally

established programs taken together, have simply not been able to meet the special transportation needs of the entire elderly population of the city. Our Office plans to expand this year a purchase of service program with the YMCA for the provision of door-to-door transportation services on a city-wide basis. Funds awarded to Chicago under Title VII (Nutrition) and the Title III Model Projects Section of the Older Americans Act, will be used to purchase this service. Even with this new contract, the demand for special transportation will far exceed the supply. The present patchwork of special transportation systems is at best a partial, temporary, and more than likely, inefficient response, to an immediate need. In an effort to develop a permanent solution to the problems of the elderly and other groups in our city who have special transportation needs, the city of Chicago made application to the Urban Mass Transportation Administration in the spring of 1973 for a \$700,000 demonstration grant to establish in one area of the city a research and demonstration program of special transportation for the elderly and handicapped. The City Council, in approving this application, has set aside \$300,000 in City matching funds. A number of City and State departments, as well as the Chicago Transit Authority, were active in the development of this project and have made commitments to serve on the board that will manage the project once funded. We have already secured agreement that the operating board will be enlarged to add more representatives of social service agencies and elderly consumers.

Chicago's project application called for a major planning effort including: (1) a market survey to estimate the magnitude of the clientele, their ability to pay, their scheduling needs and demand for service, their attitudes on use and their desire to participate in the system's operation, (2) an evaluation of existing services to establish permanent contacts with agencies operating them, and to determine service gaps and duplication, (3) the establishment of a coordinating mechanism to insure that various special door-to-door transportation systems would work together (data on various alternative types of structures which could serve in this capacity, such as [a] a non-profit corporation, [b] a new quasi-governmental-non-profit social agency for transportation, [c] a social agency presently operating a demand-actuated system and [d] the regular mass transit authority, would be assembled and reviewed before the coordinating mechanism is established), (4) a study of alternative uses of vehicles in the system during off-peak hours to insure maximum use of local resources.

We believe that information that could be gathered from this project, and the involvement of the public and private sectors in a coordinated effort, could provide the basis for implementing a specialized transit system on a city-wide basis. We are, therefore, deeply dismayed over UMTA's failure to date to give a definitive response on our application of March, 1973.

Over the year that we have been awaiting approval from the Federal Government of this application, we have been working hard to develop new permanent commitments from the State and local taxing bodies to provide funds which will be required to purchase equipment and to cover the costs of operating special transportation services. We were successful in our efforts to ensure that the proposed Regional Transportation Authority, which I referred to earlier, would have the power and additional funds necessary to help finance various types of special transportation programs for elderly and handicapped persons.

Chicago has supported the introduction of additional legislation at the State level which would authorize the Illinois Department of Transportation to offer financial assistance to various carriers that provide special transportation to the mobility limited at reduced rates. The legislation specifies that the State may reimburse such carriers up to an amount representing "one-half the full adult fare for the handicapped person who is furnished transportation at the reduced fare, or \$2.50 per trip, whichever is the least." We are now working to develop an awareness and interest in these measures among the general public and among senior citizens in particular. Our regular community education efforts include the periodic publication of legislative reports and of discussion papers focusing on issues of importance to the elderly, such as transportation.

**ITEM 2.—LETTER FROM WILLIAM HENEGBRY, PROJECT COORDINATOR, COMMUNITY SERVICES COUNCIL OF BREVARD COUNTY, INC., MERRITT ISLAND, FLA., TO SENATOR LAWTON CHILES, DATED FEBRUARY 20, 1974**

**DEAR SENATOR CHILES:** As you requested during the meeting with the senior citizens at Baxley Manor, I am forwarding some background information on our senior citizens' bus transportation system. A recapitulation of the situation might be in order first.

In 1971 there were three minibuses that belonged to the Community Services Council here in Brevard who picked up senior citizens at their housing complexes on a once a week basis and took them shopping. This did not include any seniors living on the beaches or away from the complexes. There were approximately 1,500 passenger rides given seniors that year. During December 1972 new rules came into the operation of a low income bus system, to wit, anyone riding on these minibuses must be low income people and going to a community type agency, thereby excluding the bulk of our senior citizens. The Community Services Council approached the Florida State Bureau on Aging and requested that project money be allocated that would enable our Senior Activities Program to purchase services from the Social Service Transport for our senior citizens. This was approved, and the state allocated funds to the program to provide for these services. In the meantime, our Senior Activities Program had submitted a proposal to the Brevard County Commissioners requesting that two minibuses be allocated to the Senior Activities Program to transport senior citizens. On October 24, 1972 the Senior Activities Program received, on loan, two used minibuses with over 70,000 miles from the County Commissioners to use as a senior citizens' bus line. From October 24 to December 31, 1972 the two minibuses had 3,195 passenger riders (a copy of the schedules for the Central and South senior citizens' buses are enclosed.<sup>1</sup>)

In 1973 the Community Services Council's five minibuses and the two senior activity buses combined carried a total of 68,668 passenger riders, of which 37,292 were senior citizens (54.3%).

The Division on Aging allocated \$19,104 towards this service, and the remaining amount is provided from county and local funds. Incidentally, this bus service is free to seniors.

In the latter part of 1973, a group of people from the various community agencies that have buses within our county got together to see if a consolidated system could not be placed into effect. Mr. Peter Wahl, the Social Services Planner for the County and Community Services Council, headed a task group of people from the Community Services Council, Association for Retarded Children, Brevard Achievement Center, Health Departments and Senior Citizens groups. On January 11 the Consolidated Agencies Transport System made up of the above named agencies pooled their buses and resources and implemented a county-wide bus system. This bus system takes children to the Achievement Center, Retarded Training Center, takes people to the Health Department, Mental Health Center, Food Stamp Office and other community service agencies, takes senior citizens to the shopping centers, community agencies, and also affords them the opportunity to get out of their apartments and mingle with people. The program has not been in effect long enough to judge all the costs and other items, but from samplings it is very obvious that the number of seniors being transported has risen. While each of the agencies may receive some money from the federal government such as Association for Retarded Children, etc., the only federal funds allocated to transport the senior citizens comes from the Florida Division on Aging and amounts to \$12,825.00 for nine months.

As I mentioned to you at the meeting, our requirement now that we have proven that a system can be run, is for new vehicles. The senior bus line of two buses costs over \$2,000 a year in maintenance alone. The buses are 1969 vintage with over 90,000 miles, and the good book says after 70,000 miles of operation that they should be retired for a major overhaul.

I would like to reiterate that our bus system is operating, we are transporting senior citizens, and we know that there is a requirement to transport

<sup>1</sup> Retained in committee files.



them (we do not need a feasibility study on this). What we need are new buses and possibly a bit of consideration that each time the price of a gallon of gas doubles that we be granted from the Division on Aging enough money to cover the difference.

With our new Senior Nutritional Aid Program starting in March, the necessity for our bus system becomes even more marked. Volunteers are reluctant to take anyone, in view of the cost of gas and the shortage of gas, and as of now our buses will go by the feeding sites, and we will be able to take those people who need to participate in the Nutritional Aid Program. While our County Commissioners and other local people are very helpful and sympathetic, the ability to obtain funds for new buses from a financially depressed community such as this is rather remote, therefore, we must obtain outside help.

Perhaps what we are trying to say in this whole thing is that we saw a problem that existed locally and we solved it locally with some help from the federal government. We are now in a position where, if we are to continue to give as good as or better service to our seniors, we must receive the wherewithall with which to do it.

Sincerely,

WILLIAM HENEGBY,  
Project Coordinator,  
Senior Activities Program.

**ITEM 3.—STATEMENT FOR THE MASSACHUSETTS EXECUTIVE OFFICE  
OF ELDER AFFAIRS, PREPARED BY ANN DOWNING, TRANSPORTA-  
TION SPECIALIST, INTERGOVERNMENTAL RELATIONS STAFF**

We are now in the midst of a tremendous opportunity to have an impact upon how transportation services will be developed and expanded, and whether or not they will consider the needs of those persons who must depend upon public transportation.

The crisis in energy has stimulated government to demonstrate a greater concern for public transportation. President Nixon recently proposed a \$16 billion program of federal grants to urban and rural public transit services. The Highway Trust Fund may now be used to improve transit services. In Massachusetts legislation was recently passed which provides for the establishment of regional transit authorities.

Will these developments benefit the transit dependent? Will their special needs be taken into consideration by those who plan for and implement transportation services? Those who do not have access to an automobile have no other alternative but to rely upon public transportation.

Will Section 16 of the Urban Mass Transportation Act, also known as the Biaggi Amendment, be taken seriously when it states ". . . that special efforts shall be made in the planning and design of mass transportation facilities and services so that the availability to elderly and handicapped persons of mass transportation which they can effectively utilize will be assured."

During these days of testimony in which the transportation needs and problems of the elderly are addressed, let us keep in mind these recent developments and opportunities for action.

During December 1970, a report was presented by this Special Senate Committee on Aging concerning the issue of Transportation and Older Americans. Particular emphasis was placed on the integral relationship of transportation to other needs and problems experienced by elders. Mobility was presented as access to opportunity and to services required by elders.

The inadequacy and lack of transportation services has been well documented since that time. It was restated at the 1971 White House Conference on Aging, as well as at a Transportation Conference held in Massachusetts in 1972.

My testimony will concentrate on ways in which existing and developing transportation systems can be improved to better serve the needs of older persons and others with mobility problems. This will relate directly to attempts in Massachusetts to make transportation more responsive to the needs of the transit dependent by encouraging them to become involved in the planning

process. This includes the responsibility of government to provide the mechanisms and resources necessary to provide and implement the goals and objectives set forth by the transit dependent.

First, I would like to briefly highlight the transportation issue as it relates to elders and others with mobility problems. This deals with the accessibility, the adequacy, and availability of transit services.

We will depend on the ability to travel to acquire the basic necessities of everyday life—to go shopping, to receive medical and dental care, to gain employment, to take part in educational, recreational and social activities, to visit friends and relatives—in other words, to remain in the mainstream of life.

Mobility and accessibility to goods and services is the key to independent living in the community and the prevention of institutionalization. Transportation is the link to those facilities and services which help all of us to live an independent life. The ability to remain independent as long as possible, to lead a life of dignity, and to have the freedom to choose alternative life styles depends to a major extent upon the accessibility, the adequacy and the availability of transit services.

However, most transportation systems have not been planned with elders in mind. Instead, they have been planned and designed to accommodate the so-called average person and have ignored those with special needs. Perhaps, the most common complaint about public transportation is that it does not take retired persons where they need to and want to go. This is the case, because transportation has, for the most part, been planned with the work and business trip in mind.

Underlying the preceding statements is the belief that public transportation, as a public service and as a public facility, must be made accessible to all the public. Consideration for those with mobility problems will lead to better public transportation for everyone.

If existing transportation does not reflect the needs, economics, and priorities of the older consumer, what can be done? This is the point at which the older person should assume the role of self advocate through an educational process. Those responsible for planning and operating transit must be made aware of and sensitive to the needs of elders. They must be made aware of the difficulties and obstacles they face when attempting to use public transit. Only with input into the transportation planning and problem solving process can elders be assured that adequate attention will be paid to their needs.

The following describes those efforts currently underway in Massachusetts to include older persons in the transportation planning process. Perhaps, this could be viewed as the essence of advocate planning.

The Massachusetts Bay Transportation Authority (MBTA) is the major operator of transit in the Metropolitan Boston Area and it provides service to 79 cities and towns. Last year seven MBTA communities became involved in an experimental program utilizing compact sized or "mini-buses". The key element of this mini-bus program was the involvement of the local community in planning how these buses would best serve local needs by designing their own bus routes.

Older persons were well represented in this planning through Councils on Aging and other elder-related organizations. Normally, route planning would have been done by MBTA routing specialists with little, if any, input from the community to be served.

In many of the communities, existing bus routes provided service only on main streets with little, if any, crosstown connections. For many elders this means long walking distances to bus stops. For those who are not able to walk more than a short distance, transportation service did not exist. With the mini-buses, service could now be linked to these areas.

Although the mini-buses are not exclusively for elders, their routing has been planned with them in mind. Community representatives took the following factors into consideration when planning these routes: the location of elderly housing and high concentrations of other transit dependents, the location of health facilities, shopping area, nursing homes, churches, parks, hot lunch programs, and libraries. These locations were pinpointed on a street map along with existing transit routes. Using this information, various routes were suggested.

A unique feature of these mini-bus routes is that while the bus has specific stops, it can also be flagged down in between stops. For many persons, it comes close to providing door-to-door transportation.

We are encouraging the MBTA to promote this kind of advocate planning in other communities. With this kind of community involvement public transit can be made more responsive to its users. It may also finally give due consideration to those persons with mobility problems.

Opportunities for public participation should be made available in all communities across the country, whether they are urban, rural or suburban. Consumer input should become a regular and integral part of transit planning.

Outside the MBTA, in those parts of the State where public transportation is virtually non-existent, the Office of Elder Affairs has been involved in the promotion of accessible transportation through its participation with Regional Planning Agencies.

In Massachusetts twelve (12) Regional Planning Agencies are responsible for comprehensive planning on a regional level. Included in this comprehensive planning process is the determination of transportation needs, goals and priorities for each of the regions.

Joint Transportation Planning Committees are being established within each region as the vehicle for consumer input through its task forces. Elders are being encouraged to participate in order to have input into regional needs, goals and priorities. This kind of early involvement will, hopefully assure, that the development of new transit services will be responsive to all elements of society.

This is particularly timely in view of recent legislation in Massachusetts providing for the establishment of regional transit authorities. This action could promote the development of public transportation in those parts of the State where to be without an automobile means to be homebound and isolated.

Another effort to make transportation available to elders is reflected in a one-year Title III of the Older Americans Act grant in the amount of \$492,000 which established Project Links. The goal of Project Links is to provide elders with a "link" to services that they require by stimulating the development of transit services that are sensitive to their needs.

Integration and coordination are the two main guiding principles of Project Links. As the name implies, the project will be designed to "link" rather than duplicate existing transportation services. Because the key to the success of this project will be its ability to coordinate and stimulate transportation efforts around the State, working relationships are currently being developed with the Urban Mass Transportation Administration, the State Office of Transportation, the State Department of Public Works and Regional Planning Agencies.

The cooperation of UMTA is particularly vital in those regions which fall within their guidelines. A major objective is to promote the purchase of vehicles by UMTA so that Title III funds could then be used to provide the operating expenses.

In accordance with UMTA requirements that local planning be concerned with special needs, Project Links will foster and develop appropriate plans with Regional Planning Agencies. In other cases where Regional Planning Agencies may have completed transit development plans, Project Links will review that portion pertaining to elderly needs and make a judgement as to its readiness for implementation.

The award of Project Links money for implementation will give priority to existing and developing public transit bodies that will give special concern to the transportation needs of elders. This is in keeping with the goal to integrate the needs of elders into the main transit system and not to develop separate systems.

Along with this goes the condition that continuity of service be insured beyond the life of the grant money. We do not wish to create merely demonstration projects but to stimulate ongoing services which are sensitive to the needs of elders.

Throughout these cooperate ventures will be stressed the mandate of the Biaggi Amendment declaring it to be national policy that elderly and handicapped persons have the same right as other persons to utilize public transportation.

In concluding, I would like to stress the importance of planning for the needs of the transit dependent, those who are most dependent upon public transportation in order to meet their daily living needs. You are encouraged to foster and support legislation, programs and activities that include the transit dependent in the transportation planning process in order to assure consideration for their needs.

**ITEM 4.—LETTER FROM R. BERNARD HOUSTON, DIRECTOR, DEPARTMENT OF SOCIAL SERVICES, LANSING, MICH.; TO SENATOR FRANK CHURCH, DATED MARCH 22, 1974**

**DEAR SENATOR CHURCH:** We would like to share with you some of the thoughts we have regarding transportation and the elderly, based on our past and present experience in this area.

It is our feeling that transportation service for senior citizens is an extremely important need. No social service program can be effective unless the clients have a way of getting to the location where the service is being offered. Elderly poor citizens in particular frequently do not have their own means of transportation, and, therefore, programs for the aged can easily be underutilized if transportation services are not available. The lack of mobility among senior citizens can lead to more serious health, psychological, and social problems which frequently necessitate institutionalization. We feel that the planning of any senior citizen program should include provision for transportation. One effective way to accomplish this would be to require a transportation component in a program before state-federal financial assistance could be received.

The majority of transportation services provided by our Department for elderly clients is given by volunteers who use their own cars. Our volunteer services program is statewide and includes a volunteer services coordinator in each county. Volunteers are reimbursed at the rate of 12¢ per mile for any transportation provided for clients of the Department of Social Services. Transportation given to elderly citizens has been usually for medical care, shopping, recreation programs, or nutrition programs. The main difficulty which we have encountered in using volunteers for transportation is that they are not always available when their services are needed. Since they are volunteering their services, they cannot be expected to be available at all times, and so it is our feeling that any comprehensive transportation program for senior citizens must include more than just volunteers. The energy crisis has created an additional problem in using volunteers in that individuals are reluctant to volunteer extra use of their cars when they have difficulty obtaining enough gasoline for their own needs.

Feedback from our workers in local county offices indicates that Dial-a-Ride programs, reduced fares for elderly citizens on public transportation, and senior citizen programs which have their own transportation vehicles have in general been very successful. Increased programs of these types are definitely needed. In general it is felt that older people should be required to pay at least something for their transportation and that they would resent having completely free rides. Unfortunately, many of our clients (on SSI or General Assistance) can only pay if those programs are amended to truly recognize the costs of transportation for service and meaningful community life. One effective approach to encourage senior citizens to use public transportation might be to let them purchase passes for unlimited use during a period of time. Our Department is presently involved in planning transportation for retarded clients to sheltered workshops. An interesting possibility raised by this is to coordinate the use of vehicles for retarded and elderly clients, thereby trimming costs.

Some specific problems in transportation programs have been pointed out to us, and these deserve consideration. In some cases the limitation of public transportation to political boundaries has caused difficulty, and it is felt that areawide coordination is needed so that services can encompass broad geographical areas. Another problem is that most transportation programs assume that seniors can get to the curbside or a bus stop. Perhaps some consideration needs to be given for disabled clients who need additional aid. A final difficulty

which has arisen is that volunteers are reluctant to provide transportation when a client needs to be taken from a nursing home to a hospital, because the volunteer would be liable in this situation.

I am glad to see that the Senate Special Committee is investigating the issue of transportation for the elderly, and I hope that our comments will be of help to you.

Sincerely,

R. BERNARD HOUSTON,  
*Director.*

**ITEM 5.—LETTER FROM DON WHITEHEAD, FIELD REPRESENTATIVE II, OFFICE OF AGING, MISSOURI DEPARTMENT OF COMMUNITY AFFAIRS, JEFFERSON CITY, MO.; TO SENATOR FRANK CHURCH, DATED MARCH 6, 1974**

DEAR SENATOR CHURCH: Our Director, Willis W. Marshall, Jr., resigned effective March 1, 1974. I am in charge of the transportation programs in the State of Missouri, and do appreciate your concerns.

The Office of Aging in Missouri is certainly elated to receive notification of the Senate Committee hearings on "Transportation and the Elderly: Problems and Progress" and, likewise, appreciate the opportunity to send representatives from the Missouri Older Adults Transportation Service, Inc. (OATS), as a participant in this hearing.

As you no doubt are aware, the Missouri Office of Aging designed and funded the OATS system in 1971 with the intent to supply transportation to the senior citizens throughout Missouri on a priority basis; (1) to Medical and Dental appointments, (2) shopping and domestic necessities and (3) to help provide recreation by regular and frequent tour trips to points of interest.

The project is starting its third year of operation, providing services to approximately 10,000 members in 84 of the 114 counties in Missouri.

As we enter our third year, we are faced with two major problems, one, of a reduced amount of financial support and the second being the increase of gasoline prices, shortage, etc., and those affects, which may in the future require deductions in operations.

In summary we would ask that the committee discuss our concerns and in particular point us toward any future financial assistance that is or will become available.

Again, we thank you for this opportunity to have input into your committee hearing and will look forward to receiving a report of any suggestions and/or recommendations.

Sincerely,

DON WHITEHEAD,  
*Field Representative II,  
Office of Aging.*

**ITEM 6.—LETTER FROM DAN F. KELLY, CHIEF, AGING SERVICES BUREAU, SOCIAL AND REHABILITATION SERVICES, HELENA, MONT.; TO SENATOR FRANK CHURCH, DATED MARCH 1, 1974**

DEAR SENATOR CHURCH: We are indeed interested in the subject of "*transportation and the elderly: problems and progress.*"

Our first observation would be to the inequitable formula utilized by Washington to allocate money to states based on a simple 60 plus census basis. We would hope that a more sophisticated and equitable formula with consideration of geography, density of population, rural aspects, poverty, and minority be included. We feel the most important of these ingredients for consideration relative to transportation are geography and density. Montana has been recognized as a leader in innovative approaches to solving many of the challenges that have confronted us with Senior Citizen Programs in general, and transportation for the elderly in particular.

Besides more equitable funding, we would like to point out some possible resources on the Federal level that would allow us to complete our plans more fully.

Insurance is always a subject that is hard to breach with a sound solution due to general public opinion that senior citizens are a poor insurance risk. We encourage your committee to confer with Insurance Company of North America and ACTION to review the history of the accident insurances and owned and unowned automobile insurances authorized under the RSVP. We are sure that your report would show that senior citizens are not a high risk group.

Within provisions for purchase of equipment or materials for support of programs eligible for GSA, vehicles are not allowable purchases. We would like to see special provisions written into the GSA regulations allowing for a variance for Senior Citizen Projects. In other Federal surplus programs we would hope that appropriate vehicles for transporting senior citizens be labeled for preferential bidding by grantees of senior citizen programs. We would also hope that the difficult area of maintaining these vehicles may come to the attention of Federal, State, and County shops to lend more life to any vehicles that may be obtained.

We do not wish to touch on the present difficulties created by the energy crisis because it is not only a problem for senior Americans but all Americans and we hope it is a temporary situation. However, we feel there may be a tendency to discontinue manufacture of mini buses which have proved to be a great supplemental source of support to many of our senior projects. Montana is entirely without public transit and mini buses have been the mainstay of communities that were able to purchase them to mobilize their senior citizens.

We would like to see the Federal Department of Education initiate a movement downward to help state and local officials find ways to utilize school buses during off hours for senior citizen mobilization. It is difficult to comprehend that transportation is a number one hindrance to many senior citizen objectives and to see public owned vehicles such as school buses sitting idle a major part of the day. If there is a possibility of a pilot project being initiated to discover the feasibility of utilizing these buses, Montana would certainly volunteer to pave the way.

Green Thumb has made it possible in several rural areas to fully utilize mini buses for senior citizens. State Green Thumb Director has cooperated by assigning Green Thumb Drivers as a project. We certainly encourage the continuation of funding for Green Thumb, for not only the help they have given in transportation, but for the many other successful assignments they have had throughout the state.

We are at present concentrating much effort to better the lives of our senior native Americans. To assist us in this endeavor we would hope that the Bureau of Indian Affairs could earmark or otherwise prioritize money to support senior citizen projects on reservations.

We feel that in many instances regional and state resources could be better utilized if there was positive effort put forth from Washington.

We appreciate the opportunity of commenting on this priority issue and wish your committee the best success.

Sincerely,

DAN P. KELLY,  
Bureau Chief.

ITEM 7.—LETTER FROM DAVID C. CROWLEY, EXECUTIVE DIRECTOR, OHIO COMMISSION ON AGING, COLUMBUS, OHIO; TO SENATOR FRANK CHURCH, DATED MARCH 14, 1974

DEAR SENATOR CHURCH: In response to your request for information on transportation and older Americans in Ohio, I have compiled a series of documents for inclusion into the hearing record<sup>1</sup> on "Transportation and the Elderly: Problems and Progress".

Transportation ranks alongside housing and income as a high-priority problem for Ohio's older people. Both the availability of fuel and the ability to use automobile transportation are of crucial importance to older people. Limited rural public transportation has resulted in fewer older persons receiv-

<sup>1</sup> Retained in committee files.

ing the benefit of the current nutrition program (in at least one Ohio county according to the recent AoA survey on the Impact of the Energy Crisis on Title III and Title VII Projects).

Ohio is taking steps to meet transportation problems for all persons in the state as well as for Ohio's older people. Ohio provided for a Department of Transportation effective September 29, 1972. The resultant improved coordination of public and private transportation facilities has provided for better service to the elderly. Since formation of the Department of Transportation, several Ohio transportation facilities have installed a reduced fare program for senior citizens. Canton, Ohio has successfully initiated a unique senior citizen transportation service which provides free and available bus service to all Canton residents 60 years of age or older who possess a ride pass. Funding for this project was the result of combining funding from the Ohio Commission on Aging and the U.S. Dept. of Transportation, with local share (provided by the Canton Junior Chamber of Commerce).

Ohio's upcoming Governor's Conference on Aging will focus largely on concerns related to transportation for the elderly. It is hoped that recommendations and actions resulting from this conference will further our significant progress toward solving such transportation problems in Ohio.

Sincerely,

DAVID C. CROWLEY,  
*Executive Director.*

**ITEM 8.—LETTER FROM JACOB G. KASSAB, SECRETARY OF TRANSPORTATION, PENNSYLVANIA DEPARTMENT OF TRANSPORTATION, HARRISBURG; TO SENATOR FRANK CHURCH, DATED MARCH 25, 1974**

DEAR SENATOR CHURCH: Thank you for the opportunity to submit testimony to the United States Senate Special Committee on Aging regarding Pennsylvania's Free Transit Program for Senior Citizens.

As you know, one of the principal problems facing many older persons is limitation of their mobility. Lack of safe, convenient, reliable and affordable personal and/or public transportation has limited the range of opportunities for many senior citizens. They are denied access to a wide range of community facilities simply because they cannot travel to them. We in Pennsylvania have recognized the transportation needs of the elderly and have taken positive steps to meet these needs on a statewide basis. The most significant action to date has been the development and implementation of Pennsylvania's Free Transit Program for Senior Citizens.

In recent years cities in many areas of the country, including Pennsylvania, have experimented with reduced transit fares for senior citizens. In at least two major metropolitan areas (Honolulu and Minneapolis-Saint Paul) senior citizen free fare programs have been implemented. However, as of July 1, 1973 the Commonwealth of Pennsylvania became the first state in the nation to implement a statewide senior citizen free fare program for local transit service.

Under Pennsylvania's program any person who is 65 years of age or older may ride at no fare on any of the 77 participating local common carrier transit properties throughout the state during non-peak hours on weekdays and all day on Saturdays, Sundays and major holidays. Non-peak hours include all hours of the day except 6 a.m. to 9 a.m. and 3:30 p.m. to 6:30 p.m. All that is required of the senior citizen is that he or she present his or her Medicare Card or locally issued Senior Citizen Transit Identification Card as proof of age to the transit vehicle operator in lieu of paying the fare. Eligible services under the program are mandated by law and include local public bus, trolley and subway-elevated systems.

The response of the senior citizens to the program has been overwhelming. We estimate that more than 49 million free rides will have been taken under the program by the end of its first year of operation (June 30, 1974). On many transit systems senior citizens are taking more than twice the number of trips they had been taking prior to the initiation of the program. In Pittsburgh, for example, which had its own reduced fare for senior citizens prior to July 1, 1973, the number of senior citizen riders has risen from 500,000 per month under the reduced fare plan to 1.2 million senior citizen riders per month under the Commonwealth's Free Transit Program for Senior Citizens.

The Free Transit Program for Senior Citizens is financed from Pennsylvania's State Lotteries. During this first year it is operating under a \$12.6 million Executive Authorization. To date approximately \$11 million has been encumbered under 77 contracts both with public and private transit operators. Negotiations are continuing with a few remaining transit operators to bring them into the program. However, the contracts in force include local carriers who serve more than 95 percent of all local transit patronage in the state. In large measure the success of the program can be credited to the transit operators who have cooperated splendidly.

Benefits from the program have accrued to more than just the senior citizens who make free transit rides under it. Some merchants, especially downtown merchants, report that sales to senior citizens have risen since the program began. Social service agencies who deal regularly with senior citizens report greater attendance and participation in their programs as well as other community activities. Many transit operators have reported an increased awareness on the part of local citizens and elected officials to the needs and problems of their operations and have shown a greater willingness to work with the operator to improve local transit service.

The program has also had some benefits which relate directly to the fuel shortage problem plaguing the nation. The most obvious benefit is for those senior citizens who used to drive but now choose to ride public transit since it is free to them. A second area, one which is of potentially great importance to commuters struggling to get to work in the rush hour, is the fact that the Free Transit Program for Senior Citizens has induced many senior citizens to taken transit trips in the non-rush hours when there is much excess capacity on the Commonwealth's transit systems instead of competing for a limited number of rush hour seats. This program has in effect added capacity to local transit systems when they need it most: in the peak hours.

While the program has been quite successful, like all programs it has shortcomings. Not the least of these is the fact that the program can only operate effectively in those areas of the state where good local common carrier, fixed route mass transportation is available. Pennsylvania through its well established urban mass transportation assistance programs, which by the end of the current fiscal year will have provided in excess of \$200 million in operating assistance and authorized over \$130 million worth of capital assistance to the state's urban transit systems over a ten year period, has helped to insure the provision of adequate local transit service in the Commonwealth's urban areas.

For the rural areas of the state a cabinet level Rural Transportation Task Force has been formed which is investigating the transportation needs of residents in these areas of the state. It is to recommend by May 15, 1974 a state rural transportation policy and the necessary legislative tools necessary to implement that policy. Additionally, there is currently legislation before the Pennsylvania Senate which would establish intercity and rural local transit aid programs similar in concept and scope to those which have successfully operated in the urban areas of the Commonwealth.

Before concluding, there is one additional comment I wish to make regarding the federal government's involvement in the matter of providing transportation for the elderly. Currently there is a myriad of federal social welfare programs which have provisions to help pay the transportation costs of the intended clients. A recent study revealed that in two rural Pennsylvania counties seven different social service agencies were spending nearly \$100,000 per year on transportation costs alone to serve approximately 230 clients. Greater coordination among these programs is imperative in order to optimize the spending of the limited transportation dollars available and to provide more effective transportation services to persons aided under these programs as well as to others who could benefit from an improved coordinated approach to transportation.

Thank you again for this opportunity to submit testimony regarding Pennsylvania's Free Transit Program for Senior Citizens. If we can be of further assistance, please do not hesitate to contact us again.

Sincerely yours,

JACOB G. KASSAB,  
*Secretary of Transportation.*



**ITEM 9.—PREPARED STATEMENT OF THE HUMAN SERVICES COUNCIL,  
MONTGOMERY COUNTY, PA., DATED FEBRUARY 28, 1974**

**AGING TRANSPORTATION NEEDS—WHO'S LISTENING?**

The wave of new Federal programs for aging Americans, intended to draw out the isolated and the disadvantaged, misses the mark of aging needs when the emphasis of these programs fails to address itself to the need for improved public transportation. More than additional Federal programs, which programs include limited transportation tied to them, older adults, at least in Pennsylvania, need transportation to meet at least two basic human needs—shopping and medical services.

In two separate surveys conducted in southeastern and southwestern Pennsylvania, the aging themselves identified the above two needs as their priorities for using transportation. The Pennsylvania Department of Agriculture, which is already operating a mini-bus service for residents in 4 Counties in Western Pennsylvania (80% of whom are age 55 and over) discovered that 77% of the people using their service did so to meet medical and shopping needs.

Last Fall, the Human Services Council of Montgomery County, which is planning a County-wide Senior Transit Service experienced similar results from a survey of 500 older adults, namely, 75% of the respondents identified shopping and medical resources as their greatest need for transportation. The added discovery of the Human Services Council survey was that 21% of those queried simply did not get out and were unable to meet their basic needs due to a lack of transportation.

Both surveys seem to suggest that legislation regarding the transit needs of the aging as well as the planning mechanisms of the Department of Transportation and the Bureau of Aging should be addressing themselves to these two basic needs of aging Americans.

How best can such needs be met?

It is the view of the staff of the Human Services Council of Montgomery County that the philosophy sustaining transportation for the aging should not be based upon a system which merely connects two geographic areas. Rather, it should be seen as a "service" which connects older people with their needs.

Essentially, the planning and operation of a transportation service for the aging should be seen as another part or aspect of the total human services delivery system.

Positing this philosophy, such a service, like other social services, hopefully, should be personal, individualized and as accessible as possible, e.g., the dial-a-ride concept.

Recognizing that older persons have limited incomes and may only need to shop weekly or visit the doctor monthly, the service might only be needed on a limited basis for specified geographic areas.

The practice of the Department of Agriculture in Western Pennsylvania has demonstrated that most older adults will identify with and satisfy their two basic needs in the nearest and largest center of population. Therefore, defined service areas can be established on different days serving different populations contiguous to the nearest and largest population areas.

The Western Pennsylvania experience also demonstrates the value of the smallness of such a service. The Department of Agriculture practice highlights the important service roles played by the dispatcher and drivers. Their caring, sensitivity and knowledge makes their mini-bus service viable and effective. Further, it allows, because of its smallness, the establishment of important, trusting relationships.

As a result of these trusting relationships, other significant ancillary service benefits occur. Some of these benefits include: daily information and referral requests to the dispatcher for other service needs; informal organization by older adults themselves with one person calling for five or six others and arranging for the group to meet at specified places; having these organized small groups plan to meet other needs together; having these same groups establish ongoing communications and relationships which didn't exist before.

The issue of the mobility or lack thereof of aging Americans addresses itself to many of the psychological problems of the aging. Increasing age imposes decreasing mobility and increasing dependency upon all of us. Increased dependency, therefore, serves to lower our self-esteem and self-worth. With lowered self-regard, many older adults can easily be influenced to either easy anger and disdependency or to withdrawal and isolation.

With the above in mind, it would seem that a personal, individualized transportation service for the aging can allow choices and opportunities to older adults which they previously understood and used. Such choices can free older adults to actualize and achieve their own basic priority needs. Perhaps, through such services, older adults will avail themselves of further opportunities for socialization—after independently meeting their basic needs.

Hopefully, such a system of service for older adults will achieve results similar to a study completed by the University of Illinois of a mini-bus service for older adults in southern Illinois. That study, pointing out one psychological impact of the service, concluded: “. . . that the free mini-bus service did have a positive effect upon the attitude of elderly about life in their community.”<sup>1</sup>

[Enclosure.]

#### SUMMARY OF TRANSPORTATION SURVEY IN WESTERN MONTGOMERY COUNTY

(Conducted by *The Montgomery County Human Services Council*, Fall, 1973)

If 1% of the older adult population in Western Montgomery County are any indication, one in five of Montgomery County's Senior Adults are simply not meeting some very basic human needs as a result of inadequate or non-existent transportation facilities in the County.

The above fact highlights a recent survey of the transportation needs of 1,500 over 55 residents living in the Western half of Montgomery County. This number of older adults had been visited earlier in the summer in conjunction with the County's coordinated flood-relief program known as the Older Adults Service Program.

This fall, the Human Services Council, Coordinator of the OASP, mailed a four question survey to those visited and received a 33% response. The survey invited older adults to specify: (1) Their present ability to reach basic resources; (2) Their present means of reaching these resources; (3) Whether they would utilize a door-to-door transportation service; and, (4) To indicate their greatest need for such a service.

In response to the survey's first question, older adults were able or exerted the greatest effort to reach health resources (71%) and shopping resources (63%). They actively reached (or desired to reach) cultural activities least of all—(42%).

Of the almost 500 persons who responded to the survey, a composite number of about 21% simply are unable to reach basic service resources such as health, social, cultural, shopping, and socialization services.

Concerning the means of transportation most utilized by older area residents, 1 in 3 had their own car; 1 in 3 used public transportation or a taxi; and 1 in 3 depended upon relatives or neighbors to assist them to reach various resources.

In response to their possible use of a future door-to-door transportation service, almost 2 out of 3 (64%) indicated they would utilize such a service, and 1 in 3 would not. The response was related to the results in question number 2 and was consistent with whether or not the individual had his own car.

Of those specifying their need for transportation, shopping and medical resources were identified by a total of 75% of the respondents as their greatest need for such a service.

<sup>1</sup>Patton, Carl V. "The Immobile Americans," Presented to American Institute of Planners National Conference, Atlanta, Georgia, October, 1973.

## QUESTIONNAIRE RESULTS

	Total	Percentage
<b>Response to questionnaires by county:</b>		
Washington.....	349	26
Fayette.....	533	40
Greene.....	136	10
Westmoreland.....	325	24
Totals.....	1,343	100
<b>Age:</b>		
18 to 25.....	59	4
26 to 35.....	40	3
36 to 45.....	43	3
46 to 50.....	107	8
51 to 55.....	72	5
56 to 60.....	130	10
61 to 65.....	209	16
66 to 70.....	225	17
Over 70.....	451	34
Totals.....	1,336	100
<b>Sex:</b>		
Male.....	194	15
Female.....	1,141	85
Totals.....	1,335	100
<b>The following best describes my income:</b>		
\$0 to \$1,499.....	831	70
\$1,500 to \$2,999.....	237	20
\$3,000 to \$4,999.....	82	7
\$5,000 to \$9,999.....	31	2
\$10,000 to \$14,999.....	7	0
\$15,000 and over.....	0	0
Totals.....	1,188	100
<b>The reason for using this transportation service:</b>		
Health.....	989	52
Social.....	52	3
Cultural.....	17	1
Shopping.....	527	27
Other.....	323	17
Totals.....	1,908	100
<b>What means of transportation do you presently have available to you:</b>		
Public transportation (bus).....	90	7
Taxi.....	326	27
Neighbors.....	678	55
Children.....	60	5
Personal car.....	63	5
Other.....	13	1
Totals.....	1,230	100

**ITEM 10.—STATEMENT OF THE NEBRASKA COMMISSION ON AGING,  
 "AGING IN NEBRASKA: NO. 5",<sup>1</sup> PREPARED BY LARRY V. ALBERS,  
 UNIVERSITY OF NEBRASKA**

**TRANSPORTATION FOR THE ELDERLY IN NEBRASKA . . . A REVIEW OF EXISTING AND  
 ALTERNATIVE SYSTEMS**

**SALIENT POINTS . . .**

According to a recent survey, the mayors of 40 Nebraska urban areas with populations greater than 2,500 persons voiced a need for public transit primarily based on concerns for the elderly.

<sup>1</sup> Published by Nebraska Commission on Aging; Ronald L. Jensen, executive director; Joseph A. Gaida, editor.

A national survey reveals that of the persons over the age of 64, 46% suffer from some sort of impairment. This may account for the lower than average incidence of licensed drivers among the elderly.

Six modes of transit exist in Nebraska for the elderly. Only one mode, the senior handibus, lends itself extensively to the elderly and their needs.

Although 2,000 school-district buses now operate throughout the State, present legislation restricts its use to the transportation of children to and from school or school related activities.

Recent federal regulations prohibit subsidies of reduced bus fare programs under the Older Americans Act.

### 1. INTRODUCTION

Transportation plays an integrating role in the lives of us all. Without it, medical, recreational, and all life-sustaining services would be impossible to attain. Perhaps nowhere is transportation more significant and necessary than with the elderly. The lives of the older person have changed so that a suitable mode of transportation must now accommodate itself to fulfill their new demands and needs. To the extent the aged are denied transportation services, they are denied full participation in a meaningful community life.

### 2. METHODOLOGY

This study was undertaken with three primary objectives in mind. The first objective was to determine to what extent the need of transportation for the elderly exists in Nebraska. Are all their transportation demands being fulfilled? Or are their transportation demands perhaps somewhat different than those being fulfilled? The second objective was to analyze the existing modes of transit in terms of cost, barriers, and target group suitability. And finally, the study aims at offering some alternative modes of mass transit or systems whereby the elderly might best be served.

In order to accomplish this task, many sources of data and literature were used and synthesized. This study is intended not to offer any sound conclusions, but to develop a picture of the transportation demands of the elderly and the services offered them.

### 3. THE TRANSPORTATION DEMAND OF THE ELDERLY

According to the 1970 Census, Nebraska has the second largest concentration of older people in the nation with 12.4% of the population aged 65 and over. Even more significant is that 18.9% of its population are over 60, and that 70% of these individuals live outside the most populous counties—Lancaster and Douglas. For it is within these rural areas that transit, other than the automobile, remains virtually non-existent. Although few surveys and studies have been conducted within the State concerning the transit needs of the elderly, many inferences can be made using data from national and out-of-state sources.

#### *Income*

Low incomes often force older persons to live in poor transit service areas and prevent them from owning automobiles. The 1970 Census reveals that of the families in Nebraska with the head 65 and over, 17.8% are below poverty level. This compares with 10.1% for the population as a whole.

#### *Physical Impairments*

Besides income barriers, the elderly suffer the problems of physical impairments. Of those persons 65 and over, 46% have some sort of impairment—with loss of hearing and visual impairment being the most prevalent. These impairments are especially hazardous with respect to transportation accommodations at a time when traffic patterns and signals are becoming more complex. With these changes, the older persons often becomes less able and willing to get about. This is one reason which accounts for the elderly having a lower than average incidence of licensed drivers. Even where a recourse to some other transit is available, the older person may not be able to use it. For instance, an older person who cannot climb stairs will also find it most difficult to step into a bus.

### *The Automobile Society*

In America, the ability to go places depends so very much on the ability to drive an automobile—without which, an individual can be figuratively marooned in his own house. Although data is not available on the percentage of persons 65 and over having drivers licenses in Nebraska, another indicating factor is the percentage of households owning automobiles by the age of the head. In 1970, the Nebraska Census data revealed 55.1% of all households with the age of the head 65 and over own an automobile. This compares with the total age average of 79.6%. These percentages are especially profound when one considers that 62,074 persons in Nebraska over 60 are the only members of their households; and that almost half *must depend* on some other means of transit to travel beyond a couple of blocks of their homes. Perhaps the idea of the elderly being marooned is not so vague after all.

### *The Mobility of Retired People*

An interesting study has been done by Frances M. Carp, Ph.D., entitled *The Mobility of Retired People*.<sup>1</sup> In this study, she seeks an understanding of the mobility and transportation habits, needs, problems, and preferences of older people. Data were collected on 709 retired persons with a mean age of 64.5 in San Antonio, Texas. Although we cannot infer too much from this single study, it does give an insight to some of the transportation demands of the elderly.

The elderly, like everyone in society, must depend upon the ability to travel for acquiring the basic necessities of food, clothing and medical care. Yet when evaluating the quality of transportation used, transportation for grocery and medical services received the second most negative response, with 20% of the respondents expressing dissatisfaction. (Illustration 1, p. 141.). While 62% used the automobile as a mode of transportation when buying groceries, and additional 31% walked. (Illustration 2, p. 141.). Even more significant is that "twenty percent said they would shop more often if better transportation were available—and an equal number would go less often if they had a way to transport more groceries at one time."

Of the different modes of transportation used, the automobile was the most frequent. However, access to automobiles was limited. Only one-third of the respondents were currently drivers, and less than half the drivers could drive "anywhere." For the non-driver, going by car as a passenger was the most common means of transportation. The problem in regards to being a passenger was the insufficiency of opportunity. Most non-drivers, and many drivers, said they needed and wanted more such rides.

### *Nebraska Survey*

In the Nebraska Public Transit Study, prepared for the State Office of Planning and Programming by the consulting firm of Comsis Corporation, a survey concerning transit needs was conducted of the mayors of the 40 non-metropolitan urban areas in Nebraska with a population greater than 2500. A summary of the responses concerning transit for the elderly follows:

Seven cities indicated a need for city bus service, with three of the seven indicating the requirements were for the elderly.

Of the thirteen cities with intercity transit, 65% of the mayors responded the primary requirements were for the elderly.

Twenty-five mayors felt their community needed taxi service. Seventy-five percent indicated that such service is needed to serve the elderly.

Operators of the intracity bus transit were also interviewed in the study and asked, "Why, if you are losing money on regular service, don't you simply disband operations and find some other way of making a living?" Several operators responded by saying that they could not disband operations because of many of their elderly friends and neighbors depended upon them for necessary transportation. Their loss was being subsidized with profits made from other type services (school bus, charter, special, etc.).

## 4. EXISTING TRANSPORTATION

### 4.1. Intracity Bus

As of January 1, 1973, city bus service was provided in the cities of Fremont, Grand Island, Hastings, Lincoln, Norfolk, Omaha, and South Sioux City.

<sup>1</sup> *Transportation*, 31, AoA.

Lincoln and Omaha had the largest fleet with 36 and 142 buses respectively. The remaining cities have a fleet of only a couple of buses. Some points regarding intracity cost and patronage follows (from *Nebraska Public Transit Study*).

In 1972, it cost \$0.01 to provide one seat-mile of service.

During the period 1967-1972, Nebraska's small transit companies experienced an average *increase* in revenue of 4% per year. During the same period, Lincoln and Omaha experienced an average *decrease* in revenue of 3% per year.

The cost to provide one bus-mile of service is increasing at a rate of 6½% per year.

During the period 1968-1972, Nebraska's small transit companies have experienced an average decline in patronage of 7% per year. During the same period, Lincoln and Omaha have experienced an average decline of 18% per year.

It should be pointed out that a company's operating cost, when analyzed, may be misleading. For example, cost may be held constant through a reduction in service. This service factor is measured in terms of annual seat-miles provided. After analyzing the data for the period 1967-1972, small transit companies decreased service at an average annual rate of 2%, while Lincoln and Omaha have decreased service at the rate of 3% per year.

In conclusion, the intracity transit system in Nebraska serves a limited population. Even where it is available, the city bus service is decreasing while the operating cost continues to increase. Yet in all the cities, the elderly constituted a large portion of city bus patronage, and in some cases, an overwhelming majority. For instance, 85% of adult fares in Hastings are from the elderly.

Even with a high percentage of its patronage being elderly, intracity transit does not necessarily satisfy their needs. Many barriers exist on the ordinary bus which are not accommodating to an older person. High steps, poor visibility, and a crowded bus will accord an older person more discomfort than many realize. For many of the 33% elderly who are handicapped, this mode of transit would be impossible to use.

#### 4.2. Intercity Bus

Intercity bus service is that which operates between cities. Data from the Nebraska Public Transit Study reveals that as of January 1, 1972, there were 13 transit companies classified as interurban carriers operating in the State of Nebraska. Complete data however, were available on only five of the larger companies (Arrow State Lines, Inc., Black Hills Stage Lines, Inc., Capital Service Lines, Inc., Continental Trailways, Inc., and Greyhound Lines, Inc.). Some cost and patronage data concerning these companies follows.

While these companies experienced an annual revenue growth of 4% (1967-1971), the total operating expenses increased an average of 5.4% per year.

Patronage has declined at an annual rate of 12%.

Bus-miles of service has declined at an average rate of 3% per year.

The barriers existing on these buses are similar to those on intracity buses.

#### 4.3. Taxicab

There were 41 taxicab companies registered and operating within the State on January 1, 1972. (Data synthesized from Nebraska Public Transit Study.) Omaha has 47% of Nebraska's total fleet, numbering 504 vehicles, with an additional 10% located in Lincoln. The remaining 43% are scattered throughout the State. Statistics were not available for the average operating cost of a taxi, but the average revenue generated by each taxi is about \$7663 per year.

It may be assumed however, that because of the relatively high fares charged, the operating expense would also be quite high. And for economical reasons, it is impractical for an older person to use the taxi extensively. If it were used, the trips would be few and within the immediate vicinity of one's home.

#### 4.4. Airplane

Although airlines presently serve much of the State many operational barriers exist which limit its use as a mode of transportation for the elderly. It remains impractical for most trips within the immediate area because of poor scheduling and service.

#### 4.5. Train

Trains, while once serving much of the State, are now phasing out most of its passenger service. Presently, there are only five stops AMTRAK makes in Nebraska. These are Omaha, Lincoln, Holdrege, Hastings, and McCook.

#### 4.6. Senior Handibus

The Senior Handibus is a relatively new mode of transportation in Nebraska, providing portal-to-portal transportation service for older persons in Lincoln and Lancaster County at a cost of 30¢ per ride. Superior also has a senior handibus project. The specific objective of this program, "is to enable isolated elderly individuals to gain access to the essential services and facilities which they need to maintain independent living." It is intended to serve those individuals who are threatened with relocation to a more dependent living arrangement because they are unable to obtain suitable transportation for health services and other essential needs. Presently, there are five vans operating within the Lincoln Area-wide Model Project, three of which are used for the elderly. The project is funded by the City of Lincoln, Lancaster County, and the Nebraska Commission on Aging. The project's cumulative certification of clients stands at 802 (as of August, 1973).

The Senior Handibus project is unique in many respects. As was mentioned earlier, it provides portal-to-portal transportation to a segment of the community that cannot benefit from existing modes of transportation. The project also provides for an escort to assist these individuals with their particular needs—such as wheelchair victims.

Although the Senior Handibus project is now limited to Lancaster County and Superior, similar projects are being adopted in 26 other areas throughout the State. Many of these projects will be administered primarily through county governments.

### 5. ALTERNATIVE MODES OF TRANSPORTATION OR PROGRAMS

#### 5.1. School Bus

With 70% of Nebraska's elderly living outside the urban areas of Lancaster and Douglas Counties, an alternative mode of transportation available in these areas, would be the use of school buses. There are some 2,000 district-owned school buses now operating throughout the State, including a number of 9 or 12 passenger vans used for athletics. This constitutes a large amount of resources which at the present time, are used minimally. The buses transport children to and from school, but remain idle most of the time. This is especially true during the summer months. If legislation enabling school districts to lease these buses would be enacted, other segments of the community could be served.

There are a number of points which must be taken into consideration regarding the leasing of school buses. First, a critical part of the lease negotiations will be to arrive at a cost which most accurately reflects the total cost of the operation. Such items as depreciation, repairs, insurance, and miscellaneous expenses will have to be included in their expenses. Costs per mile of such projects in other states have ranged from \$0.30 to \$0.75 per bus-mile. Second, the public will have to be informed of this intent, avoiding the misconception that tax money is being used for public transit.

A number of physical barriers also exist. The high step required when entering the larger buses restricts its use by some older persons. Every project researched mentions this barrier, but goes on to point out that it can be dealt with quite simply; another step can be built, or the bus can be driven closer to the curb. In the 9 or 12 passenger van, there would be no restrictions.

The demand for this mode of transportation could be substantial. In the Brantford-Millette, S.D. Project, 69 of the 200 eligible are presently being served. A Cosis survey of the mayors of 40 cities in Nebraska with a population of over 2500, reveals 65% responded in favor of using school buses for public transit for the elderly. However, there appears to be a definite hesitancy on the part of the mayors to commit themselves to this idea. Comments such as "if absolutely necessary" and, "as a last resort" with a *yes* answer were indicative of their feelings.

#### 5.2. Transit Stamps

An effective way to deal with economic barriers may be the issuance of transit stamps to those elderly with incomes below a designated point. The stamps

would serve as fare for the bearer. The expense of any transit stamp program would be the function of the number of people covered and the number of stamps issued. Assuming that stamps were issued to the 9000 elderly below poverty level in Lincoln and Omaha, at 70¢ round trip, 5 days a week, 50 weeks of the year, the annual expense would be \$1,575,000.

### 5.3. Coupon Taxi

The coupon taxi option is a mechanism for providing good service to a highly selective target group. It is assumed that each recipient in the target group would receive \$250 per year in coupons (coupons would not be transferable). The target group is composed of those who "can go out, but cannot use transit."

### 5.4. Ubiquitous Fixed Route

Another ways to extend service to those urban elderly not within reach of existing systems would be according to UMPATA (1973), to approximately double the existing bus fleet. This would allow the establishment of new routes in areas presently not served. The expense, including Lincoln and Omaha, would be approximately double the current bus operating expense annually, or \$7.2 million. The key advantage would be its expanded service for all transit users. It would not, however, remove those physical and operational barriers which prevent its use by a large number of older persons.

### 5.5. Removal of Bus Barriers

The basic goal here would be to remove physical barriers on buses and make these systems accessible to older persons living within reach of the system. Buses would be equipped with ramps or hydraulic lifts for wheelchairs, more stanchions, wider doors, hand rails, and so forth. The estimated cost of such a project would be \$5,000 per bus.

### 5.6. Reduced Fare

Another alternative system would be the expansion of the reduced fare program to include all communities with intracity transit. Presently, Lincoln and Omaha are the two cities in the State with reduced fare transit for the elderly. The objectives of this program are to "encourage and maintain a high level of mobility among elderly residents \* \* \* to encourage better and safer realization of the municipal bus service by shifting the elderly ridership to a less congested period of time of operation."

The program in Omaha is open to any male over 65 and female over 62. As of February, 1972, 14% of those eligible held tickets. In Lincoln, anyone over 65 with an income of less than \$5,500, per year, may participate. To illustrate the impact of the program, in 1972, 19% of the total bus patronage in Lincoln was reduced fare. The cost of the program is shared by the City and the Commission on Aging—the City paying 5¢ per ticket, AoA 15¢, and the individual making up the difference.

In expanding this program to the cities of Fremont, Grand Island, Norfolk, and Hastings, an additional \$5,500 per year would be required. *A new source of funds would be needed however, since recent federal regulations prohibit subsidies of reduced bus fare programs under the Older Americans Act.*

## 6. SUMMARY

There are six modes of transit existing in Nebraska for the elderly. Only one mode, the Senior Handibus, lends itself extensively for the elderly and their needs. The other five modes have a different target group suitability, which presents many physical barriers for the older person. Of these five, intracity bus transit is used most. But once a person travels outside the larger cities, the transit offers less service and availability. This is especially true with respect to train and airplane travel.

Six alternative modes of transit or programs were also presented. Three of these had the elderly as their target group suitability—that is, the school bus, coupon taxi, and expansion of reduced fare. The transit stamp offers an economic alternative, but is quite expensive for the number of people served. Over one million dollars would be required for each year of operation. The ubiquitous fixed route would be beneficial for everyone, except that it too is expensive. A final alternative aims at removal of the physical barriers on all buses.



ILLUSTRATION 1.—MOBILITY OF RETIRED PEOPLE<sup>1</sup>—QUALITY OF TRANSPORTATION FOR THOSE WHO WENT  
[In percent]

Destination	Evaluation of transportation	
	Dissatisfied	Would go more if better
Friends .....	11	25
Children .....	14	30
Other kin .....	15	25
Doctor .....	20	6
Church .....	13	21
Grocery .....	20	20
Other stores .....	15	15
Meetings .....	9	25
Entertainment .....	10	37
Senior center .....	9	86
Library .....	11	45
Sports .....	11	68
Travel .....	21	50

<sup>1</sup> Frances M. Carp, Ph. D.

<sup>2</sup> An additional 20% would go less often.

N varies with destination.

ILLUSTRATION 2.—MOBILITY OF RETIRED PEOPLE—TRANSPORTATION FOR THOSE WHO WENT<sup>1</sup>  
[In percent]

Destination	Transportation					
	Automobile		Bus	Walk	Taxi	Train and plane
	Driver	Passenger				
Friends .....	29	21	8	42		<1
Children .....	24	45	8	16		7
Other kin .....	30	31	15	16	<1	7
Doctor .....	28	32	20	16		
Church .....	26	32	7	34	<1	
Grocery .....	31	31	4	31	3	
Other stores .....	29	24	23	23		
Meetings .....	32	34	6	25	2	
Entertainment .....	26	32	10	31	<1	
Senior center .....	16	38	<17	45		
Library .....	19	6	6	67	1	1
Sports .....	37	36	16	8	1	
Travel .....	22	32	22			23

N varies with destination.

<sup>1</sup> Frances M. Carp, Ph.D.

**ITEM 11.—LETTER FROM JOHN B. McSWEENEY, ADMINISTRATOR, DIVISION FOR AGING SERVICES, DEPARTMENT OF HUMAN RESOURCES, CARSON CITY, NEV.; TO SENATOR FRANK CHURCH, DATED FEBRUARY 25, 1974**

DEAR SENATOR CHURCH: In the State of Nevada, we have not experienced a great deal of hardships in our elderly population due to the energy shortage. However, we do anticipate this problem to grow in the near future because we see a greater shortage of energy as time goes on. The following is an answer to your letter of February 18, 1974:

1. We will have to curtail our transportation operations in our Elderport Service programs in the near future unless there is more fuel allocated to the elderly transportation program in Washoe County. This transportation program is needed very much in order that the elderly people in Washoe County can receive medical attention, food stamps, shopping assistance and get to the congregate feeding sites in Washoe County.

At this time, we are still able to purchase gasoline most of the time; however, if the price goes much higher, we will be unable to meet the costs with a fixed dollar amount in our programs. It would be a dire hardship for some of the elderly people in Nevada if they would miss a meal or would not be able to get to the doctor or drug store. Food stamps are another problem; people need transportation to pick up their food stamps. They also need transportation to get to stores and do their food shopping. This may not sound like a problem to the average person, but for the elderly, this is a very real problem.

Mass transportation in Washoe County, in the Reno, Sparks area, is nearly unheard of as far as transportation for the elderly is concerned. AOAN-24 was set up as a pilot project, however, it has proven to be a very necessary project to help the elderly in the Washoe County area. Therefore, we would like to see some kind of special allocation or other fuel help for the elderly people of our area.

2. We have experienced a reluctance of volunteers using their own automobiles to continue to pick up other elderly people because of, not only fuel shortages, but also because of the high price charged for gasoline and home heating fuel. The elderly people living on a low or fixed income are being used as pawns in this energy crunch. It was bad enough before the energy shortage just to pay for housing, food and medical expenses. In this time of economic inflation, the older person finds himself in more trouble even with an increase in Society Security and other benefits given to them in the past year. Anyone earning a living today would realize how much a small increase means when the cost of living goes up twice as fast as the increase in income.

It is not only the energy shortage that the elderly are worried about, they feel that soaring prices will put all of the elderly below the poverty level in just one short year. It is our belief that prices should be rolled back, instead of giving more increases in income. The more money given to people just enhances the inflation problem for the elderly low-income people.

The energy shortage could raise hell with the transportation program if it gets much worse. We would like to see some allocations of gasoline for these elderly people now.

3. Some of the hardships experienced at this time in the State of Nevada are: lack of volunteer transportation; high cost of living when they are on a fixed income; and rising costs of medical attention and drugs which elderly people are in need of in their later years of life. The Division for Aging Services, working through the three area agencies on aging, is advocating and helping to implement programs with local resources to combat the high cost of living and fuel shortages in the State of Nevada. We use car pools and promote the use of car pools throughout the state programs for the aging people of Nevada. We also solicit local government entities in helping with transportation problems as well as helping with other aging programs for our elderly low-income people. It has been our policy all along to see that the most needy elderly people in the State of Nevada were our top priorities.

We have also experienced some hardships in acquiring fuel oil for home heating in Nevada. The high cost of heating fuel makes it necessary for some poor people to turn to other more primitive forms of heating fuels.

Until you get out in the real world and see how some poor people live, it just can't be administered from a desk and hope to really help some of the poor elderly people of this country. We feel that lowering the prices would help more than any other form of assistance.

Sincerely,

JOHN B. MCSWEENEY,  
*Administrator.*

**ITEM 12.—LETTER FROM JAMES R. MacKAY, CHAIRMAN, COUNCIL ON AGING, STATE OF NEW HAMPSHIRE; TO SENATOR FRANK CHURCH, DATED MARCH 13, 1974**

**DEAR SENATOR CHURCH:** Within the limited resources of Administration on Aging program funding, N.H. State Council on Aging has strongly supported transportation for the elderly. Being a rural state with a high elderly population count the need is most apparent. Transportation is consistently one of the three priority needs on the surveys that have been conducted in New Hampshire.

This agency is presently spending twenty-four percent of its program money for transportation. We are in the process of an inter-agency basis of trying to join with the N.H. Division of Welfare and other state agencies to expand our present service. A comprehensive state plan is now being prepared with high, average and minimum needs shown. The extent to which these will be implemented will depend on the support received from all sources including the Federal Government.

Presently the service is provided on a route or a dispatch basis and covers rural areas of New Hampshire where there is no means of public transportation. Distances covered vary from five to twenty-five miles from service centers where people are brought for shopping, baking, medical-dental care, post office or recreation. We make every effort to support ongoing private or public transportation. The vehicles are frequently used as feeder lines to support existing transportation systems.

The ages of people being transported are from sixty to ninety years old. Many do not have cars and many that do cannot drive due to poor health or eyesight. They are most appreciative of the service and the thoughtfulness of the drivers. It is important to them that the service not only be continued but also be expanded. The majority served are low income living on Social Security.

Our grantees are using 9 and 15 passenger mini-buses, cars and station wagons. This often means that some would-be riders are left behind or must wait for a later trip. The experienced drivers feel that it would be more economical to operate larger diesel buses which could transport more people and would be more comfortable.

It is evident that communities will need continued support from the state and federal level to maintain a suitable transportation system. Communities should be able to contribute to the finances of daily operation but will need help with capital investments. The actual transport service should be offered at a reduced fee which is fair to the elderly, but enough income should be generated to substantially cover operation and maintenance costs. It is planned that local communities will continue to help support the system in their areas.

We suggest that initial support might be derived not only from special revenue sharing funds but also from those funds designated especially for transportation by the Department of Transportation. Since transportation of the elderly is presently one of the programs being considered for expansion on the federal level, communities should have the opportunity to be a definite partner in the program and thus generate a stronger local support, for the needed transportation of the elderly.

Sincerely,

JAMES R. MACKEY,  
*Chairman.*

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**ITEM 13.—LETTER FROM JAMES J. PENNESTRI, DIRECTOR, NEW JERSEY STATE OFFICE ON AGING, DEPARTMENT OF COMMUNITY AFFAIRS; TO SENATOR FRANK CHURCH, DATED MARCH 26, 1974**

DEAR SENATOR CHURCH: In response to your recent request, enclosed is our statement concerning "Transportation and the Elderly: Problems and Progress."

I hope this information is helpful. If we can be of any further assistance, please do not hesitate to contact us.

Sincerely yours,

JAMES J. PENNESTRI,  
*Director,*  
*State Office on Aging.*

[Enclosure.]

DEPARTMENT OF COMMUNITY AFFAIRS,  
STATE OFFICE ON AGING,  
*Trenton, N.J.*

**TRANSPORTATION AND THE ELDERLY**

Over the past year at least some of the transportation needs of 55,467 of New Jersey's elderly have been served by either transportation projects or

transportation components of other projects funded under the Older American Act of 1965. Those transportation projects funded under Title III of Older Americans Act are listed below:

1. Maplewood Senior Citizens Transportation Project.
2. Seth Boyden Housing Complex Transportation Project.
3. Senior Citizens Transportation Project of Nutley.
4. The Burlington County Senior Citizens Transportation Project.
5. North Bergen Senior Citizen Transportation Project.
6. Union Senior Citizens Transportation Project.

A total of \$237,700 of Title II monies were spent on these projects. Additionally, \$5,250 in Older Americans Act, State share monies were used to fund the following two projects:

1. Senior Citizens Bus Route for the Borough of South Plainfield.
2. Berkeley Heights Senior Citizens Transportation Project.

Additionally, a New Jersey Bus Half-Fare Program for Senior Citizens was adopted and signed into law on May 10, 1973. The Program allows anyone 62 years of age or older to use intrastate bus lines at half fare during off-peak hours (9:30 am-4 pm).

Unfortunately, these gains have been coupled with the problems of the energy crisis.

Several project directors have indicated that they have had a decline in the number of volunteer drivers which has led to greater difficulties in the delivery of services. Also private drivers over the age of 60, living on fixed incomes, have undoubtedly been severely hit by the price of gasoline which has doubled in the last six months.

Gains in one area are offset by losses in another. Increases in income benefits are wiped out by spiraling food costs. And once again the plight of the elderly hangs in precarious balance.

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**ITEM 14.—LETTER FROM K. ROSE WOOD, DIRECTOR, COMMISSION ON AGING, STATE OF NEW MEXICO, SANTA FE; TO SENATOR FRANK CHURCH, DATED MARCH 15, 1974**

DEAR SENATOR CHURCH: In response to your recent letter, enclosed is a statement on transportation services for the elderly in New Mexico. We trust that you receive this in time to be useful to your Committee.

Thank you very much for your good cooperation with the State offices on aging.

Sincerely yours,

K. ROSE WOOD,  
*Director.*

[Enclosure.]

**TRANSPORTATION SERVICES FOR THE ELDERLY—NEW MEXICO**

Transportation remains a high priority need among the elderly in 1974 as it was in 1971. Although only 6.9% of those 65 and older are identified in the 1970 Census as living in rural areas of the state (less than 2,500 persons), 36% of the 60 and older age group (and who are now almost 65 years old) live in those same rural areas. Time and again, in forums or surveys of needs conducted by the area planning projects, transportation has been stated as a major need among the older population. Without a way of getting to a health clinic for free assistance, or to the food stamp office, such worthy services are not taken advantage of. Even grocery shopping becomes a major ordeal in an area without public transportation. Only 33,047 persons in New Mexico aged 65 and older, were licensed to drive a vehicle, leaving 53% of the elderly with no ability to drive a car if they had or have one. The assumption that all of those licensed drivers even have access to a car would be erroneous.

New Mexico needs ways and means for providing public transportation in its major cities, let alone in the rural areas. Only the City of Albuquerque has a public transit system. Upon showing Medicare cards, or other proof of age, senior citizens can ride the bus for 20¢ instead of the regular fare of 30¢.

In northern New Mexico, "Camioneta de Necesida" was organized. It is a private transportation cooperative, organized in 1971, which serves the elderly of Penasco and nearby areas in Taos County. With GSA surplus vehicles, Camioneta began its services. It now has a 36-passenger bus and two station wagons. The Taos-Rio Arriba Community Action Program contracts with Camioneta under an OEO agreement to transport senior citizens to centers and meal sites in Taos County. The cooperative is reimbursed at the rate of 25¢ a mile.

The major response to the problem of transportation comes from the senior citizens' programs funded under Titles III and VII. In late 1973, six Title VII nutrition projects were funded in New Mexico serving seven of the highest priority areas in the state. These projects are primarily serving low-income, minority persons. As a required service of the Title VII Nutrition Program, transportation must be provided to participants to and from the meal sites. However, all of the projects have exceeded this minimum requirement, and are using their mini-buses and vans to transport the elderly to medical appointments, grocery stores, to pay bills, or just about for any reason the participants feel is necessary. For the meals project, generally fixed routes are designed, and persons are picked up at a set time and location. For individual needs to go to doctors, stores, etc., usually the person can just call into the Center and make a reservation. One of these Title VII programs began its transportation services under Title III in 1969—the Santa Fe Senior Center. Since that time they have increased their services so that they now have 5 vans, averaging 1,000 pick-ups a month. Three vans serve the city area, and 2 vans serve the rural areas in the county. Participants are asked to give a day's notice for their transportation requests. In the near future, the program expects to purchase another van which can accommodate persons in wheel chairs, as they have not been able to offer handicapped individuals any transportation services.

Programs funded under the Title VII Nutrition Program for the Elderly providing transportation services to the extent indicated are in the following counties shown on pp. 1 and 2 of Attachment\*: Dona Ana, Chaves, Santa Fe, Bernalillo, McKinley, Taos and Rio Arriba.

Several of the Senior Citizens' Centers funded under Title III grants for community services have limited transportation services. In many cases, a Center has not been able to purchase a mini-bus, but is able to rent buses for special occasions or trips to places of interest. The Albuquerque Model Neighborhood Office on Aging and the Metropolitan Area Office of Aging have been very cooperative in making special bus arrangements for large numbers of elderly in Albuquerque to attend legislative sessions or the 1973 Governor's Conference on Aging in Santa Fe, 60 miles away. The Title III programs funded by AoA/HEW which have transportation services are shown on the accompanying Attachment\* on pp. 2 and 3 for Albuquerque, Artesia, Sandoval County, Union County, De Baca County, Las Cruces, Las Vegas, Lovington, Melrose, Lincoln County and Tucumacri.

Realistically, it will be a long time before public transportation systems are comprehensively serving the towns and counties of New Mexico for people of any age. However, as more and more programs for the elderly seek local volunteer support for their existing transportation services, the wider the involvement will be from local government and community organizations. The Retired Senior Volunteer Program (ACTION Agency) began to function in 1973 in New Mexico. Wherever possible, their assistance is called upon in programs on aging as RSVP may pay expenses for gas and oil used by volunteer drivers. With the cooperation of the development Area Agencies on Aging, more coordination between programs should occur in the future. Better referral systems can assist tremendously in providing transportation to the older population in the state.

Some thought has been given for the use of school buses, especially in communities where there are senior centers, multi-purpose programs and nutrition facilities for older people. No official state-wide system has been devised or drafted. This might require legislature and/or Congressional action before a practical plan for use of these valuable resources is developed.

\* Retained in committee files.

**ITEM 15.—LETTER FROM WARREN G. BILLINGS, ASSISTANT DEPUTY DIRECTOR, NEW YORK STATE EXECUTIVE DEPARTMENT OFFICE FOR THE AGING, ALBANY; TO SENATOR FRANK CHURCH, DATED MARCH 20, 1974**

**DEAR SENATOR CHURCH:** In response to your invitation to submit information on transportation and the elderly for use by your Committee, we are pleased to provide the findings of a 1971-72 survey of New York State's elderly which was designed to identify areas of greatest need.

The index used to evaluate transportation needs of the elderly in the survey was convenience of eight selected neighborhood facilities. The majority of older New Yorkers (66%) reported only one or none of the facilities inconvenient. Almost one-fifth (19%) of older New Yorkers were moderately inconvenienced. The remain 15% of older New Yorkers were severely inconvenienced, reporting most neighborhood facilities inconvenient to travel to. While the data do not give an explanation of why it is convenient or not to travel to each place, since the convenience of traveling to the place would be a joint function of the actual distance to the nearest such facility and the availability of transportation if it is necessary, the figures do indicate the situation faced by elderly New Yorkers.

Perhaps surprisingly, residents of rural areas found the various facilities more convenient than did residents of central cities, even controlling for car ownership. New York City residents found the facilities more convenient than did residents of other central cities. Fourteen percent of all New York State residents stated they would like to have help with transportation.

Following are some salient findings from the report on the group most in need of help in the transportation area :

1. The types of people who are most likely to be inconvenienced and in need of help in the transportation area are: Older, women, non-whites, residents of central cities outside New York City, those who rent their home or apartment or receive it rent free, those living alone or in households headed by someone other than themselves or their spouse, non-married people, those with lower incomes, those who are not working at the present time.

2. Those who are most inconvenienced and in greatest need in the transportation area are more likely to be those who have needs in other areas. More specifically, those with the greatest transportation problem are more likely to: Have lower incomes, be somewhat less optimistic regarding their financial situation, be sicker and be much more likely to be incapacitated, have an unfavorable outlook on their health, be somewhat more likely to have an inadequate diet, be less active and participate in fewer activities than their less inconvenienced peers, be reclusive and have fewer people to visit with or call on the telephone, be lonely, worry and have a less optimistic view of the future.

3. In order to aid in fulfilling the needs of those who are ill and incapacitated, a variety of sources of assistance should be available ranging from family, friends and neighbors to social services provided by the community or State.

However, it appears that those who are most in need of assistance (i.e., those who have the greatest transportation problems) have fewer of these sources of assistance at their disposal.

More specifically, the severely inconvenienced group are more likely to: Know fewer neighbors to call on for help, have fewer relatives to call on for help, have less contact with other people.

It might be hypothesized that respondents who are severely inconvenienced are unable to keep up relationships with persons because they lack the transportation facilities to visit them. Therefore, they lack the close ties which would make them feel comfortable calling on people for help. Helping these people get around would, therefore, facilitate their getting other kinds of help from friends and relatives.

You will find attached a table showing the relative convenience and inconvenience that older persons in our sample had in getting to and from various types of facilities. I have also enclosed for your information, a copy of pages describing the scope and the method of the study of the status and needs of the aging population in New York State.

We hope this information will be helpful to you and your fellow committee persons in getting a fresh perspective on the elderly and their transportation needs.

Sincerely,

WARREN G. BILLINGS,  
Assistant Deputy Director.

[Enclosure.]

CONVENIENCE OF FACILITIES

	(N) Total	New York City	Other central city	Urban fringe	Urban places outside urbanized areas	Rural
	(1641)	(693)	(262)	(339)	(138)	(209)
Convenient to visit:						
Places to shop.....	87	91	84	80	85	94
Bank.....	85	83	83	81	88	96
Church or synagogue.....	85	88	81	79	83	91
Post office.....	78	75	70	80	85	92
Doctor or clinic.....	76	72	75	76	80	86
Restaurants.....	73	74	54	73	78	90
Public library.....	65	60	58	69	72	80
Public park.....	60	59	36	60	72	82
Number of places inconvenient:						
0 to 1.....	66	62	51	69	75	87
2 to 3.....	19	25	27	10	12	8
4.....	15	13	22	20	14	5
4+.....	38	16	45	53	49	71
Own an automobile.....						
Would like to have help with transportation.....	14	17	14	16	10	5

A STUDY OF THE STATUS AND NEEDS OF THE AGED POPULATION  
IN THE STATE OF NEW YORK

INTRODUCTION

In conjunction with the White House Conference on the Aging in 1971, the State of New York's Office for the Aging committed itself to a study of the status and needs of the elderly.

The purpose of this survey was to identify the areas of greatest need of the elderly population of the State of New York. More specifically the study was designed to:

Identify the specific areas of need of older New Yorkers.

Determine which demographic segments of the elderly population have the greatest needs.

Determine the interrelationships between the specific areas of need cited by elderly New Yorkers.

Determine the extent to which the needs of older New Yorkers are currently being serviced and pinpoint gaps between services needed and services desired.

The following report is one of a series of reports drawn from this research. Each report investigates a specific area of need—e.g., health, housing, income, transportation, nutrition—focusing on that segment of the population which exhibits the greatest need in each of these specific areas.

This report discusses the current transportation status of older New Yorkers, focusing on those groups with specific transportation needs.

More specifically, this report seeks to evaluate the overall transportation status of New Yorkers over 65, establishing specific criteria by which transportation needs can be measured.

Then using these criteria, this report focuses on the high transportation need group, identifying exactly who these people are, and delineating their additional needs in terms of social, health, nutritional, morale, financial, etc., dimensions.

And finally, this report shows what sources of transportation help are currently available to the older New Yorkers with specific needs, and in the process points up gaps in this resource availability.

## SCOPE AND METHOD

The study was conducted among 1,641 respondents, 65 years of age and older, living in private households in the State of New York.

A probability sample was used in which respondents were selected from 156 sampling points spread throughout the State.

In common with the design of any sample intended to provide sufficient flexibility to treat the many research problems considered in this study, the sample for the New York State Study on the Aging was designed to satisfy three basic criteria :

1. It had to be capable of representing all individuals 65 years of age or older residing in households in the State of New York with maximum efficiency ;

2. It had to provide an operational basis for statistical analysis and tests of hypotheses associated with the problems under consideration ; and

3. Its data had to be projectable to the universe represented within known, precisely computable ranges of reliability.

The above criteria, individually and collectively, were satisfied through the use of a probability sample. A replicated design comprising five randomly selected, stratified, interpenetrating matched sub-samples was used for this study with each household in the study area having a known chance of selection.

The interviews were conducted in person between November 1971 and June 1972.

The interview was about one hour in length and covered the following areas :

1. Family size and composition.
2. Housing and presence of specific household facilities.
3. Neighborhood satisfaction and convenience of neighborhood facilities frequently used.
4. Activities, including visits with neighbors, hobbies and employment.
5. Life satisfaction and morale items, such as the amount of respect old people get in the community, incidence of loneliness, expectations for the future.
6. General health status, including specific time ill and specific health problems as well as general perception of their overall health.
7. Respondent's ability to perform various tasks that are necessary for self-maintenance, such as going up and down stairs, dressing and bathing.
8. Dietary patterns and satisfaction with diet.
9. Financial status, including source of income, amount of income, assets and debts, and perception of financial state.

**ITEM 16.—LETTER FROM G. D. SHAW, SUPERVISOR, AGING SERVICES, SOCIAL SERVICE BOARD OF NORTH DAKOTA, BISMARCK; TO SENATOR FRANK CHURCH, DATED FEBRUARY 28, 1974**

DEAR SENATOR CHURCH: This is in response to your communication of February 18, 1974, regarding the effects of the energy crisis on transportation in North Dakota.

The very nature of North Dakota's vastness predicates us to depend highly on gasoline in order for our rural and remote areas to receive the benefits of our larger, more urban, centers approximately 100 miles away. While North Dakota has an excellent highway network, public transportation companies have found it economically unfeasible to establish regular commercial modes of transportation. This further isolates the rural area, drives up soaring costs due to increased freight rates and thus, the burden becomes greater for those residents of the rural area.

In order to keep our comments brief and practical, please let us use two instances which clearly identify the problem.

The Rolette County Transportation Program is in a very precarious position due to the energy crisis. When funded originally under Title III of the Older Americans Act, the gas stations in Rolette County had agreed to donate gasoline to the project as an in-kind portion of local support for the program. Since that time, the increased cost of wholesale gasoline and the disproport-



tionate cut of fuel allocations to the very rural areas has caused the station operators to change their stand on the donation of fuel. At the present time, the mini-bus in Rolette County is having to pay full retail price for gasoline. The project considers itself extremely fortunate if they can get gasoline at any price. We need not elaborate on what this does to a budget.

We do not mean to reflect undue criticism on local station operators regarding their "breach of agreement" concerning the provision of free gasoline to the project. Considering the cut back in allocations, station operators are extremely fortunate if they are able to keep operating expenses below gross sales.

In our urban programs such as the Fargo Senior Commission on Aging, Inc. Program in Fargo, North Dakota, the programs are under the sponsorship of a local public non-profit agency such as the Park District. In Fargo's case, they suffered a 50% cut in their fuel allocation. Needless to say, the use of their 22-passenger bus has been severely curtailed. The cut in their fuel allocation places an extremely heavy demand on their 10-passenger mini-bus.

Once again, we cannot criticize the City of Fargo or the Park Board for the reduction of amount of fuel available to project. All departments of local government are functioning under the same handicap and are sharing in the cutbacks.

Anything which can be done to restore a workable fuel allocation to AoA projects of this nature would be appreciated. We realize it is a complex problem and there are no easy or simple solutions.

The effects of increased cost of gasoline and fuel allocations will have on the outreach programs in North Dakota are purely speculative at this point. If fuel costs rise as anticipated and rationing becomes a reality, the outreach components of comprehensive programs will be in serious jeopardy. Only through budget revision for increased costs and a high priority rating for the purchase of fuel can we continue to maintain the high quality of service delivered to our senior citizens.

We are enclosing a recent memorandum from one of our consultants as it directly relates to the energy crisis.<sup>1</sup>

Thank you for any efforts you expend to helping us alleviate this critical problem.

Sincerely yours,

G. D. SHAW,  
*Supervisor Aging Services.*

**ITEM 17.—LETTER FROM WILLIAM G. BARKER, TRANSPORTATION PLANNER, NORTH CENTRAL COUNCIL OF GOVERNMENTS, ARLINGTON, TEX.; TO SENATOR FRANK CHURCH, DATED MARCH 15, 1974**

DEAR SENATOR CHURCH: Thank you for the opportunity to express my personal experiences and thoughts on transportation as it affects older Americans.

As I am sure you are aware, the dependence on the private automobile as the primary means of transportation in our country has caused an isolation of those who are unable to own or drive an automobile. Our elderly, often characterized by low retirement incomes and physical handicaps, have been one of the groups most effected by this automobile orientation. It appears that improving the opportunity for mobility among the elderly requires consideration of the three interrelated elements of low income, physical handicaps, and the lack of public transportation service.

First, the typically meager income of the retired person prohibits the ownership of an automobile. Further, retirement incomes are often so limited that the best communications alternative to transportation, viz, the telephone, is also out of reach. Without a telephone, the use of taxicabs and dial-a-bus systems is often difficult. Purely transportation solutions, such as reduced fares, can have only limited effectiveness in these extreme poverty situations. Incidentally, it should be noted that many reduced bus fare programs require an investment on the individual's part of a dollar, or sometimes several dollars, for an ID card or monthly pass. Such investment requirements place unreasonable demands on the budgets of the poor.

<sup>1</sup> Retained in committee files.

Physical handicaps may also prevent the older citizen from being an automobile driver. Again, this problem can not be eliminated through transportation system changes alone. Travel barriers in buildings and/or sidewalks must also be attached to permit the handicapped individual to travel freely about the community. It appears that, for this reason, those transportation systems which are considered barrier-free experience a low utilization by the handicapped.

Finally, the foremost problem seems to be the lack of access to public transportation. To a transit planner, a one-quarter mile walk to a bus stop is considered standard, though one-eighth of a mile is more reasonable for an elderly person. Consequently, many areas in which the elderly are concentrated are not really adequately served by transit. Additionally, the elderly ghetto resident often has no public transportation service available during the evening hours when the buses stop running and taxi drivers fear entering certain parts of the inner city. The lack of public transportation service for the elderly will become more acute in the years to come as our low-density suburbs age and their residents age with them. One promising idea which may alleviate this service shortage is to provide a bus in an area on selected days of the week rather than providing daily service.

I sincerely offer these views in the hope that they will assist the work of your committee.

Very truly yours,

WILLIAM G. BARKER,  
*Transportation Planner.*

**ITEM 18.—LETTER FROM ROBERT H. HARRINGTON, DIRECTOR, STATE OF VERMONT AGENCY OF HUMAN SERVICES, MONTPELIER; TO SENATOR FRANK CHURCH, DATED FEBRUARY 26, 1974**

DEAR SENATOR CHURCH: Thank you for your letter of February 18 advising our office of the hearings to be conducted on "Transportation and the Elderly."

I am pleased to give you a status report about Vermont in this regard. The enclosed charts<sup>1</sup> may help in describing what progress we've made in the past year because of the Title III and VII programs. First off, Chart 1 shows how the entire State is divided into seven regions, each of which has an "Area Agency on Aging" under development and an active Title VII nutrition project. At present we are serving about 550 elderly, five days a week. Our objective is to serve around 1,000 older persons daily by April and we are close to being on schedule.

Our State, being sparsely populated and rural in nature, is limited to the public transportation means shown on the second chart.<sup>1</sup> As one can readily see, much of Vermont is without any public transportation system. For example, the entire county of Essex in Northeastern Vermont has none.

Private taxicab services are indicated on the third chart. These are confined to fairly populated towns throughout the State. These towns are very small however, by urban standards with populations no more than a few thousand.

Title III funds have been utilized to provide some transportation in the State as indicated on Chart 3.<sup>1</sup> The areas outlined represent about 10 minibuses or station wagons for the entire State, each under the operational control of a Title III project. These together with transportation arrangements made through Title VII, now also service the seven nutrition projects in the areas outlined on the last chart.

There is a 1973 bill in our State legislature still under consideration. (H 307 enclosed.)<sup>2</sup> This is to be reviewed by the Vermont House Appropriation Committee at 12 P.M. on March 6. I doubt that it will move out of committee this year because of anticipated reduced revenue into the Highway Fund due to the fuel shortage.

Finally, I have asked Mr. Oliver Twombly, director of the Central Vermont Area Agency on Aging, to describe to you a pilot transportation project in Central Vermont which is just entering its second year under Title III. I'm sure that it will be most interesting to your committee for their consideration.

The Central Vermont Area Agency on Aging utilizes a grant from the State Office on Aging under Title III to provide reduced fare transportation for the

<sup>1</sup> See charts, pp. 151-153.

<sup>2</sup> See p. 154.

elderly of Barre and Montpelier. The two communities comprise a total population of around 19,000 with an elderly (age 65 or better) component of some 2,500. The total annual Title III Grant is just under \$14,000.

The pilot operates on the idea of subsidizing 50% of the cost of existing transportation systems which include both buses and cabs. Anyone 65 or better is eligible to purchase transportation tokens from \$1.00 to 5¢. The Senior purchases these tokens at exactly one-half of the face value. Tokens are purchasable from area banks, drug stores and other private business establishments which are located conveniently to all neighborhoods within the two communities.

All local transportation systems accept these tokens as cash. At periodic intervals, the transportation providers return these tokens received from Seniors for reimbursement from the Area Agency. Reimbursement is at full face value and is comprised at the 50% paid by the Senior and 50% subsidy from the Title III grant. During the second year of project operations we hope to raise 25% of the cost of subsidy from the local governments in Barre and Montpelier. The prospects for success in this endeavor look excellent.

Now in the tenth month of project operation, over 600 Seniors are utilizing the half-fare subsidy. Statistical feedback from the group of 600 shows that the most common types of destination of Seniors utilizing the program are Shopping and Medical Services; the overwhelming majority of individuals utilizing the program are over 70 and live on annual incomes of *under* \$3,000. Most commented that they do not have a friend or relative who can provide a ride when needed.

The program has been well received by Seniors, local officials, the local news media, and the general public.

I am taking the liberty of furnishing Vermont's Senator Stafford with a copy of this report:

Sincerely,

ROBERT H. HARRINGTON,  
*Director.*

[Enclosures.]

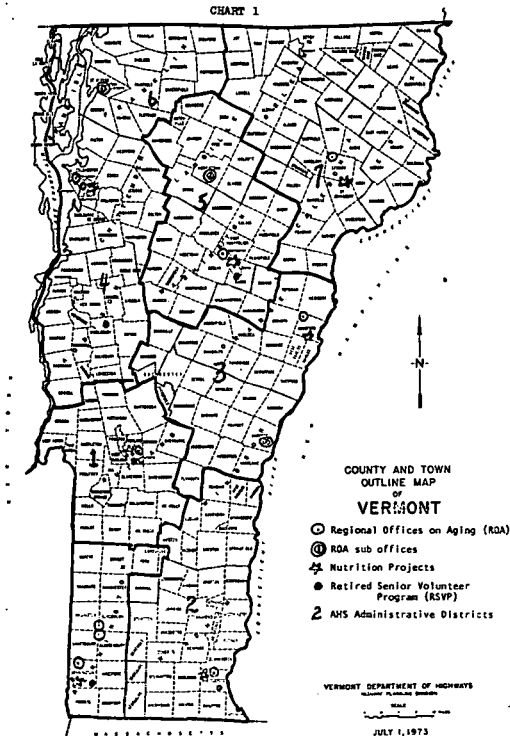


CHART 2

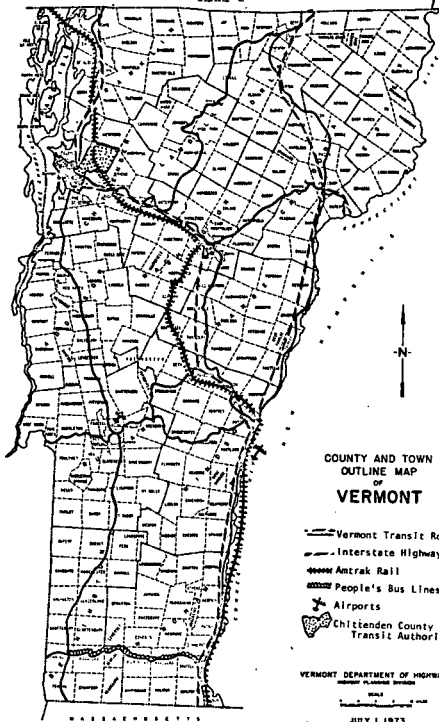
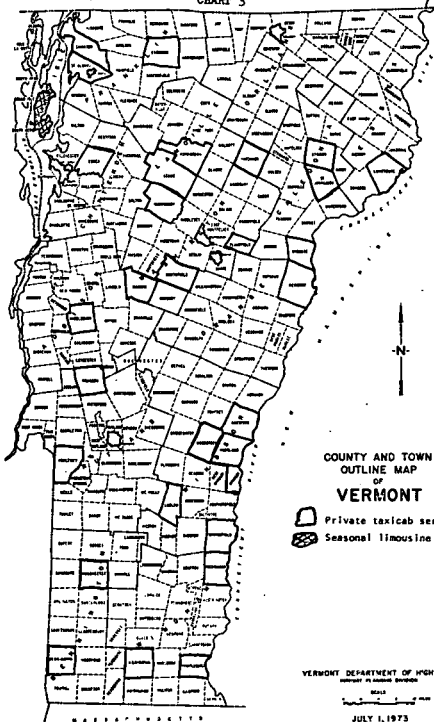
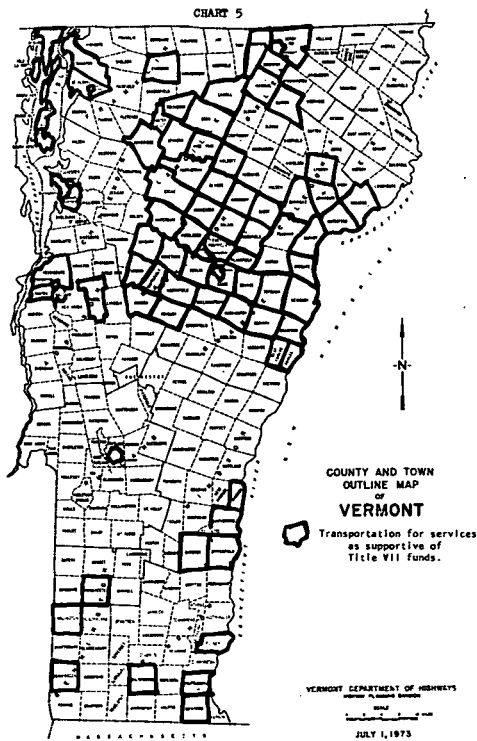
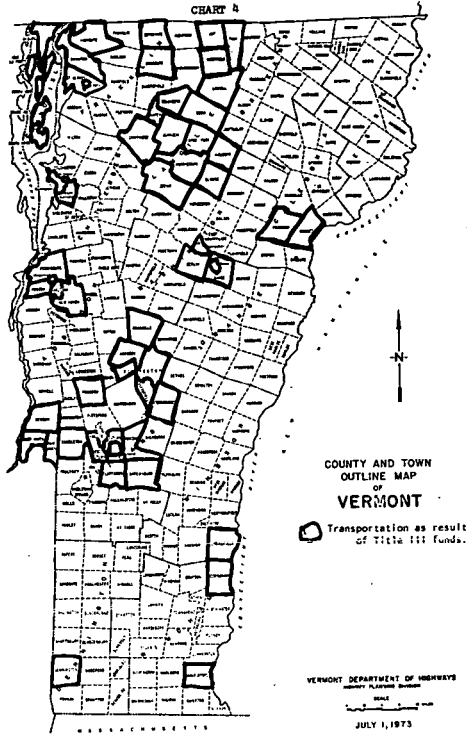


CHART 3





An Act to add 33 V.S.A. Chapter 44 relating to senior citizen transportation assistance

It is hereby enacted by the General Assembly of the State of Vermont:  
Sec. 1. 33 V.S.A. chapter 44 is added to read:

**CHAPTER 44. SENIOR CITIZEN TRANSPORTATION ASSISTANCE**

**§ 3301. Definitions**

(a) As used in this chapter:

(1) "Highway fund" means the fund established under section 8 of Title 19;  
(2) "Office" means the office on aging established under section 3088 of Title 3;

(3) "Senior citizen" means an individual who is 65 years or older.

**§ 3302. Transportation Passes**

(a) Upon application to the office on aging, a senior citizen shall be issued a transportation pass allowing him to utilize any transportation service operating within the state at one-half the normal fare, provided that the transportation service has been authorized by the office on aging. All applications submitted to the office shall have a recent photograph attached.

(b) The office on aging shall promulgate the necessary rules and regulations governing the issuance and use of transportation passes.

**§ 3303. Appropriation; Funds**

The sum of \$100,000.00 shall be appropriated for the purposes of this chapter during the first year, no more than 10 percent of which shall be used for administration. Thereafter, a sufficient amount shall be appropriated annually from the highway fund to administer the program.

**§ 3304. Transportation Companies; Refund**

In accordance with the rules and regulations promulgated by the office, the transportation companies shall report to the office the number of senior citizens carried and the amount of revenue loss resulting. Upon receiving the report the office shall reimburse the transportation company.

**§ 3305. Penalties**

A person who obtains or uses a pass unlawfully shall be fined not more than \$500.00.

Sec. 2. This act shall take effect July 1, 1973.

**ITEM 19.—LETTER FROM MARY M. ADAMS, CHIEF, OFFICE ON AGING, DIVISION OF STATE PLANNING AND COMMUNITY AFFAIRS, COMMONWEALTH OF VIRGINIA; TO SENATOR FRANK CHURCH, DATED MARCH 6, 1974**

DEAR SENATOR CHURCH: In response to your letter of February 18, 1974, regarding Transportation and the Elderly, the gas shortage in Virginia has already begun to impair the State's aging programs.

Throughout the Commonwealth transportation components have had to be curtailed. In Waynesboro and Staunton, several of our high priority sheltered workshops for the handicapped elderly have had to cut back operations from five to three days per week. Staff and drivers then wait in line one to two hours to purchase \$3.00 worth of gas for mini-buses and vans. Similar conditions prevail in Richmond, Tidewater, and Northern Virginia. While mass transit systems operate in these three areas, they are not effective in meeting the many particular needs of seniors.

At present, Southwestern Virginia is the most drastically affected by the gas shortage. The Green Thumb Programs there have been suspended until such time as workers can get gas for transportation. It is reported that gas allocations in the coal mining area are being directed almost exclusively to company-owned gasoline stations. There is, of course, no public transportation anywhere in that region of the State.

Throughout the State, the Title VII Nutrition projects are suffering from lack of volunteer drivers. In the southwestern counties of Buchanan, Dickenson,

Russell, and Tazewell, the Nutrition Program has closed down for lack of gas to meet transportation needs. Moreover, even with adequate supplies of gas, volunteer drivers are finding they cannot meet automobile operating expenses with the State's allowance of 10 cents per mile. Legislation is currently before the General Assembly to raise this to 13 cents.

Retired Senior Volunteer Programs across the State are being severely restricted. Most projects have only one vehicle assigned to them and, hence, depend largely upon individual volunteers with privately owned cars for transportation.

To relieve this critical situation, the State Office on Aging is working with the Fuel Allocation Office, attempting to secure gas allocations specifically for aging programs. It appears that this is feasible, provided we can secure storage facilities throughout the State for such supplies. In addition, we are asking the Governor's Office to designate, as essential, those personnel working with aging programs, and thus entitling them to exemption from Executive Order No. Two.

Your concern with the transportation needs of Virginia's elderly citizens is greatly appreciated. We shall endeavor to keep you informed of further developments.

Sincerely,

MARY M. ADAMS,  
*Chief, Office on Aging.*

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