TESTIMONY OF

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BEFORE THE

U.S. Senate Special Committee on Aging

HEARING ON

"Transportation: A Challenge to Independence for Seniors"

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Chairman Nelson, Ranking Member Collins and Members of the Committee, it is indeed an honor to be here today to address the critical importance of transportation in the lives of older adults and the pivotal role coordination plays in increasing the availability of transportation options in local communities across the United States. My name is Virginia Dize and I am Co-Director of the National Center on Senior Transportation (NCST). In our work with communities, we have seen first-hand the importance of coordinating public and private transportation resources across modes and the value of making connections between transportation and health and human services. We are excited to be part of this hearing that will shine a spotlight on this critical need.

NCST Overview

Older adults rely on public transportation to maintain their independence through access to paid and volunteer work, services, supports and entertainment in their communities. Recognizing the need to improve access to public transportation for older adults, Congress authorized the National Center on Senior Transportation (NCST) in 2005 as part of the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU). Congress reauthorized the program in 2012 as part of the Moving Ahead for Progress in the 21st Century Act (MAP-21).

With funding from the U.S. Department of Transportation, Federal Transit Administration, NCST was launched in 2006 and has been administered by Easter Seals, Inc. in partnership with the National Association of Area Agencies on Aging (n4a). In April 2012, the Federal Transit Administration once again selected Easter Seals, Inc. and n4a to continue NCST's vital work. Easter Seals and the n4 are strong partners with extensive experience in providing technical assistance, training and information on senior mobility issues. We each bring different perspectives and complementary strengths to the work. n4a, which represents the 618 Area Agencies on Aging and 246 Title VI Native American Aging Programs in the U.S., is a highly respected national resource on aging services and a recognized expert on local solutions to the challenges of aging in place. Easter Seals brings years of experience in providing technical assistance on accessibility and mobility for people with disabilities and older adults, as well as a nationwide network of service providers for older adults.

The National Center on Senior Transportation's mission is to increase transportation options for older adults and enhance their ability to live more independently within their communities throughout the United States. The mission is based on the well-documented value of increased mobility to older adults, caregivers and communities. NCST achieves this mission by gathering and sharing best practices; providing technical assistance and training; facilitating strategic partnerships and community engagement to support the development and coordination of senior transportation options; developing and disseminating information; and administering

demonstration grants. Our work addresses the full range of transportation options, no matter the funding source.

Since 2006, NCST has reached hundreds of communities and provided more than \$ 1.3 million in grant funding to local communities to develop innovative services and increase coordination of transportation and human services resources to better meet the needs of older adults. The best practices and lessons learned from these grant programs are broadly disseminated and used extensively in our provision of technical assistance to individual communities.

Working with communities, NCST seeks to identify effective and creative approaches for addressing the challenges that impact transportation services for older Americans and strives to build partnerships across aging, human services, and transportation providers to create solutions, breakdown barriers to coordinating federal, state and local funds and harness the collective strength of both public and private resources. Our work supports the full "family" of older adult transportation services, including programs using volunteers both as drivers and to accompany older adults to their destinations; travel training and orientation promoting increased use of public transit; older driver safety; education for older adults and caregivers; coordinated planning efforts and much more.

Local Innovation Examples

Recognizing that each community has different resources and needs, the following stories from the field serve as exemplars of what can be done. These communities not only added new transportation options, but expanded the mobility resources available to older adults as well.

- Dane County, Wisconsin (2012-2013 NCST Grantee): The Dane County Department of Human Services (DHS) developed a partnership between a Time Bank and local Renal Dialysis Centers to address the challenge of providing transportation to dialysis patients in the area. Critical to the success of the program was the work of the Dialysis Center nurses and social workers to identify patients who had difficulty arranging transportation. Developing a volunteer transportation program using the Time Banking concept enables "members" (dialysis patients who received rides) to offer an alternative service in exchange. In Time Banking, one hour of service equals one hour, no matter the service provided. The volunteer drivers in this program are a combination of Retired Senior Volunteer Program (RSVP) volunteers and Time Bank members and have been successful in reducing the number of missed dialysis appointments.
- Florida's United We Guide Project brings together a coalition of state aging, health
 and transportation agencies, including the state's Commission for the Transportation
 Disadvantaged (2008 NCST Coalition/Technical Assistance Recipient). The original pilot
 project trained and provided support to Community Transportation Coordinators (more
 commonly known as Mobility Managers) in St. Johns and Putnam Counties. The project
 developed a "one-call" system which gives residents of these two counties a single
 telephone number to call for information about transportation options, safety and

mobility. Not only are individuals provided assistance with obtaining a ride where and when they need to go, but the information collected from the calls helps to identify service gaps. The program is being expanded to five adjoining counties near Tallahassee, giving residents access to transportation information across the region.

- Knoxville-Knox County, Tennessee (2008-2009 NCST Grantee) has developed its unique Volunteer Assisted Transportation (VAT) Program to meet the needs of frail older adults and people with disabilities who need personal assistance in order to travel safely. With Federal Transit Administration New Freedom funds, the Community Action Agency purchased hybrid vehicles and wheelchair-accessible vans. A cadre of new volunteers were recruited and trained to drive the vehicles and provide passenger assistance as needed. The volunteer training was developed and provided in partnership with the American Automobile Association of East Tennessee, the Patricia Neal Rehabilitation Center, and Pilot Travel Centers, among other community groups. The program continues to grow and expand. Last year (ending in June 2013), 50 trained volunteers provided 3,941trips to 196 county residents. Going forward, the program will continue to weave together funding from multiple programs to purchase new vehicles and expand operations.
- Northeast Oklahoma: Pelivan Transit, a partnership of Grand Gateway Area Agency on Aging and Grand Gateway Economic Development Association (a Council of Governments), has created an accessible transportation network serving seven rural counties and Tribal Transit. The rides provided link older adults to medical care, human services and social activities. Pelivan has patched together an array of funding sources, including Federal Transit Administration, Older Americans Act, service contracts with state and local governments, the Medicaid Non-Emergency Medical Transportation Program, nonprofit foundations, for-profit businesses and advertising revenues. Most Pelivan rides are provided on a demand-response basis and may be provided throughout the service area, with a slighter higher charge for travel beyond the city limits. Close coordination with human services supports pooling rides, resulting in improved efficiency while maintaining quality customer service.
- Wichita, Kansas (2011 NCST Grantee): Central Plains Area Agency on Aging (AAA),
 Wichita Public Transit and La Familia, a Hispanic Community Center worked together to
 reach out to Hispanic elders and encourage that community's greater use of transit. As a
 result of these efforts, the AAA and La Familia were invited by the Transit Agency to
 provide sensitivity training on aging and Hispanic culture to all area Transit operators. A
 bi-lingual Mobility Manager is now employed by the Transit Agency to provide personcentered transportation information and assistance to Hispanic older adults and their
 families.

These examples illustrate how some communities have worked to develop unique, local solutions for increasing older adults' mobility. However, it is important that we all understand the value of increasing mobility for older adults in every community.

Value of Mobility for Older Adults

Access to transportation and mobility is key to supporting the health and well-being of older adults. Data suggests that too often people cannot access preventative services, may stay in a hospital longer than necessary or rehabilitate in an expensive institutional setting due to lack of transportation. Ensuring access to care for many people is not yet as easy as driving a car, but thanks to the gains of the Americans with Disabilities Act, for many it is becoming easier. Public buses are increasingly accessible and ADA complimentary paratransit services are available within ¾ of a mile radius of the public transportation route. Yet, we still do not have public transit or other accessible transportation options in every community across the United States. A 2011 Brookings report on access to public transportation found this problem particularly challenging in suburban environments where older adults are most likely to live.

At the 2005 White House Conference on Aging, experts and advocates ranked transportation as the third most pressing need confronting older adults. Since then, the pivotal importance of transportation to older adults' well-being and ability to live independently in the community has been underscored in numerous ways. In response to a 2009 survey conducted by NCST, one AAA Director put it simply: "transportation is the service with the greatest unmet need of anything we do." Between July 2012 and June 2013, the Eldercare Locator (the nationwide toll-free number and website funded by the U.S. Administration for Community Living and administered by n4a) received more than 18,000 calls about transportation, which ranks as the number one reason older adults and caregivers call, surpassing financial concerns and home care services inquiries.

We know that older adults want to age in place. In fact, a 2010 AARP survey revealed that nearly 90 percent of adults over age 65 want to stay in their own homes for as long as possible; 80 percent of survey respondents believe they will always be able to live in their current home. To live safely, independently and comfortably in one's own home and community requires access to medical and other essential services. Missed medical appointments can exacerbate chronic conditions and increase the risk of hospitalization. While the health impact of reduced access to needed medical services is obvious, social isolation due to lack of transportation can have an equally dire effect on health and mental health, and may result in the need for placement in a long-term care facility. Such preventable institutionalization drives up individual and taxpayer costs, as nursing home care is far more expensive that home and community-based services.

Transportation is the most frequent type of assistance provided by family caregivers: the National Alliance for Caregiving (NAC) found that 83 percent of caregivers provide or arrange for rides. In 2011, according to AARP, family caregivers provided 1.4 billion rides per year to older adults. Still, older adults who live a long distance from family or who need frequent rides (such as people receiving chemotherapy or renal dialysis) depend on more formal services to meet their needs. The NAC Caregiving Study also indicates that while the level of transportation provided by caregivers has remained fairly constant, a higher percentage of caregivers (from 18 to 29 percent between 2005 and 2009) are also seeking out alternative transportation services.

The economic impact of frequent caregiver absences from work, as well as the fact that many caregivers cannot take time off from work without negative consequences, indicates the need to provide transportation services even when a family caregiver is present.

It is important to remember that many older people live active lives and are still safe drivers or able to use public transit. There is no universally accepted age at which people are no longer safe drivers, even though chronic conditions and disability, which occur more frequently in old age, certainly impact that skill. As we know, the U.S. is a highly mobile culture, valuing the independence to go where you want and when you want to go. It's no wonder, then, that the impact of giving up the keys is profound. More than half of older nondrivers do not leave their homes on most days, make 15 percent fewer trips to the doctor, 59 percent fewer shopping trips and 65 percent fewer trips for social, recreational, family or religious purposes.

While public transit is a viable option in many communities, in most rural and suburban communities—where older adults are most likely to live—transit is either nonexistent or so limited that only certain destinations are served. In areas where transit is more robust, use has increased slightly among older adults but we know that many more could benefit from this service. Communities are doing more to encourage transit use, including offering **travel training** designed to introduce transit to people who have never used the system; adding **transit routes** convenient to where older adults live and want to go; improving the safety and security of **walking routes** to transit stops; and adding **shelters and benches** at bus stops to make waiting for rides more comfortable.

While we need to maximize older adults' successful use of existing transit systems, doing so won't meet everyone's needs. Additional options are necessary. Community transportation options are often creative solutions meant to fill identified gaps and may include such services as **dial-a-ride** which offers curb-to-curb service at an agreed-upon time, **volunteer driver programs** and **assisted transportation** (called "door-to-door" or "door-through-door") for older adults who need more than a ride, providing assistance from the door to the car or an "escort" to stay with them throughout the trip. Such programs are typically funded with a combination of federal, state and local funds. The Federal Transit Administration's 5310 Program and the Older Americans Act Title III B are two federal funding sources that frequently support such programs.

Value to Communities of Mobility for Older Adults

Beyond the obvious benefits to older adults themselves, supporting older adults' mobility has an economic value to the community. Improvements in transit and roadways that address the needs of older adults (such as bus shelters, sidewalk improvements, kneeling buses, etc.) may benefit the community as a whole by making it easier, safer and more comfortable for everyone to get where they need and want to go. An increasing number of older adults continue working in their 60s and 70s, which adds to the tax base of their communities but may require new transportation options for these workers. Furthermore, older adults who are able to get out in the community contribute to the economy by patronizing shops, grocery stores and other local businesses. Older adults make up an increasing proportion of the overall population in most communities; therefore, their economic and social contributions cannot be ignored. Missed

medical appointments are just one example of the economic impact of not providing sufficient transportation services. Another is the missed hours of productivity of family members having to take time off work to transport loved ones to appointments when no alternative is available.

Harnessing the Power of Older Adults: Volunteerism and Leveraging Life Experiences

Older adults, even into their 80s and 90s, extend the reach of community services through their work as volunteers. They lend their expertise and lifetime of experience to schools, hospitals, libraries and community kitchens. In many communities older adults themselves are the volunteer drivers and escorts who give rides to other older people; serve as travel trainers to help their age peers learn how to use transit; answer phones and help others arrange rides; and as volunteer trainers and recruiters, help to expand and ensure the quality of these valuable services. Finally, the wisdom older adults bring to countless community advisory groups, their participation in community planning and as advocates for services cannot be overstated. It is important to note that all of these volunteer efforts depend on access to transportation. Without transportation options, communities are poorer for being unable to tap into the knowledge and enthusiasm of older adults who but for a ride, would continue contributing to improve the lives of neighbors, friends and the community at large.

Our communities need to do a better job of coordinating programs and funding streams and be more efficient in utilizing public and private mobility resources at the local level to help older people get where they want to go and when they need to get there. This is both financially and programmatically sound. Coordination must be across the health, social services and transit sectors, as well as across geographic boundaries, and must also include the full participation of older people and their caregivers. From our work with local communities, we have examples of how broad and comprehensive this work can and should be.

Recommendations

There are several things that Congress can do within existing frameworks to help support communities looking to enhance mobility for older adults.

First, there needs to be continued attention to breaking down the federal and state barriers to local public-private coordination of mobility assets. This includes looking at program rules, geographic boundaries and other limiting factors. The United We Ride initiative at the Federal Transit Administration, and the technical assistance, coordination and expertise housed there, provides an excellent framework for inter-agency work looking at barriers to coordination. The Federal Transit Administration (DOT) and the Administration on Community Living (DHHS) are to be commended for their excellent coordination. More agencies and departments need to be encouraged to work together on this cross-cutting issue.

Second, this hearing can be the beginning of a longer discussion about senior transportation and offer the following policy recommendations as a starting point. Discussion should explore the following activities.

- The formation of a small working group made up of key decision makers and advocates to develop recommendations in support of consistent coordination guidance to recipients of federal transportation funding would be very helpful.
- Congress should craft consistent legislative language on transportation coordination in the Older Americans Act, MAP-21 authorization, the Workforce Investment Act and other upcoming authorizations. As coordination across federal funding streams is a multijurisdictional issue with no single Committee or Department primarily responsible for addressing it, the Special Committee on Aging might well seize the opportunity to address this cross-cutting issue on behalf of older adults.
- And finally and possibly most importantly, all of us need to work together as policy
 makers and advocates to drive systems change to ensure that all transportation
 resources in the community are responsive to the needs and preferences of older adults.
 One way to do this is to infuse the concept of person-centered mobility management in
 federal programs. Existing resources, such as the Enhanced Mobility of Seniors and
 Individuals with Disabilities program in MAP-21, are available as vehicles for making this
 happen. We define person-centered mobility management on two levels:
 - Individual level One-on-one or group education and counseling on transportation options and alternatives to driving.
 - Systems level A service to facilitate coordination among transportation and human services providers and ensure the availability of a range of transportation options and modes to support older adult mobility needs in communities throughout the U.S.

This construct provides a framework for the effective coordination and enhancement of services for people with disabilities and older adults. We appreciate the opportunity provided by this hearing to spread understanding of person-centered mobility management as an effective model that federal, state and local officials and communities might embrace in their efforts to better serve the mobility needs of older Americans.

Thank you so much for this opportunity to testify today. I look forward to your questions and the opportunity to work together in the future.

About NCST

The National Center on Senior Transportation's mission is to increase transportation options for older adults and enhance their ability to live more independently within their communities throughout the United States. NCST achieves this mission by gathering and sharing best practices; providing technical assistance and training; facilitating strategic partnerships and

community engagement to support the development and coordination of senior transportation options; developing and disseminating information, including the use of web-based and social media; and administering demonstration grants. A collaborative approach involving a wide range of expert partners and consumers underlies all NCST activities.

About Easter Seals

Easter Seals provides exceptional services, education, outreach, and advocacy so that people living with autism and other disabilities can live, learn, work and play in our communities. Easter Seals has been helping individuals with disabilities and special needs, and their families, live better lives for more than 90 years. From child development centers to physical rehabilitation and job training for people with disabilities, Easter Seals offers a variety of services to help people with disabilities address life's challenges and achieve personal goals.

Easter Seals programs such as adult day services, in-home support and services, community mobility options, wellness programs and support for family caregivers help people live as independently as possible for as long as possible. The Easter Seals family of services is ever expanding to meet the needs and help promote wellness, independence and connectivity among the growing number of older Americans.

About n4a

The National Association of Area Agencies on Aging (n4a) is the leading voice on aging issues for Area Agencies on Aging (AAAs) across the country and a champion for Title VI Native American aging programs. Through advocacy, training and technical assistance, we support the national network of 618 AAAs and 246 Title VI programs. n4a's primary mission is to build the capacity of its members to help older persons and people with disabilities live with dignity and choices in their homes and communities for as long as possible (www.n4a.org / www.facebook.com/n4aACTION).