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AUTHOR Reardon, Michael J.; Frazier, Dennis G.; Tonks, Gary
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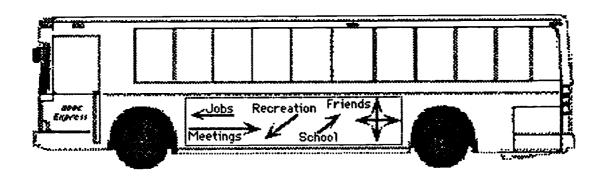
#### ABSTRACT

This final report of the Ohio Developmental Disabilities Council's (ODDC) project on transportation presents an evaluation of the current transportation options available to Ohioans with disabilities and offers recommendations to improve these options. The first section provides an overview of the ODDC transportation project including its underlying principles (such as promoting community life and employment over segregated living and work options) and defines key terms such as "public transportation" and "paratransit." The second section describes the current situation in Ohio regarding: public transportation, agency transportation, Medicaid-funded transportation, recent state and local initiatives, recent federal initiatives, and advocacy and the user perspective. Four major recommendations are made: (1) the disability community needs to maintain an active involvement in transportation issues as a "hanger on"; (2) the ODDC should adhere to and promote its major principles in all Council literature and activities related to transportation; (3) the statewide transportation coordination task force should be formalized and expanded; and (4) the disability community should actively participate in shaping the Ohio workforce development legislation. A separate executive summary is included. (DB)

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# GETTING ON BOARD: A Review of Transportation Options for Ohioans with Disabilities and Recommendations for Systems Change

The Final Report to the Ohio Developmental Disabilities Council on Grant Project 98-4, Transportation

Ohio Developmental Disabilities Council

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**March 1999** 

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# GETTING ON BOARD:

A Review of Transportation Options for Ohioans with Disabilities and Recommendations for Systems Change

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## **March 1999**

## Submitted by

The Ohio Developmental Disabilities Alliance (ODDASE) 197 East Broad Street, First Floor Columbus. OH 43215-3701 (614) 280-1223 Voice/TTY & (614) 280-1229 Fax oddase@ee.net

Michael J. Reardon, Director and Transportation Project Associate and Transportation Project Director

Pennis G. Frazier, Assistant Director

## with assistance from

The Arc of Ohio 1335 Publin Road, Suite 205-C Columbus, OH 43215-1000 (614) 487-4720 or (800) 875-2723 Phone & (614) 487-4725 Fax thearcohio@aol.com Gary Tonks, Executive Director and Transportation Project Associate

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## **CONTENTS**

ACKNOWLEDGMENTS	i
An Overview of the ODDC Transportation Project	1
UNDERLYING PRINCIPLES	4
TERMINOLOGY  PUBLIC TRANSPORTATION  PARATRANSIT	6 6
ADA COMPLEMENTARY PARATRANSIT COORDINATION PROJECTS	
THE CURRENT SITUATION	8
PUBLIC TRANSPORTATION	9
AGENCY TRANSPORTATION	10
MEDICAID-FUNDED TRANSPORTATION	11
RECENT STATE AND LOCAL INITIATIVES	12
STATE-LEVEL COORDINATION	
OHIO WORKS FIRST WORKFORCE DEVELOPMENT	
RECENT FEDERAL INITIATIVESISTEA/TEA-21OVER-THE-ROAD BUS REGULATIONS	20
ADVOCACY AND THE USER PERSPECTIVE DISABILITY ADVOCACY GROUPSINDIVIDUAL USERS	23
Conclusions	30
RECOMMENDATIONS	34



4

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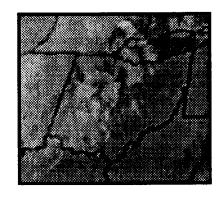
# "The American concept of freedom is strongly tied to mobility."

Administrator for an Ohio nonprofit disability organization

# AN OVERVIEW OF THE ODDC TRANSPORTATION PROJECT

For all residents of Ohio, but especially for Ohioans with disabilities, gaining access to community activities is crucial to our sense of belonging, whether we live in Gallipolis near the Appalachian foothills, in the urban sprawl of Cleveland, in the downtown area of onceprosperous Russells Point, or in a brand-new upscale development somewhere between Dayton and Cincinnati. Transportation is the key to access—access to a job, to family and friends, to adequate health care, to shopping, to fun. It is as true for people with significant disabilities as it is for anyone else, regardless of whether the disability is cognitive, physical, sensory, psychiatric, behavioral, neurological, or aging-related. It is perhaps the most critical, and least appreciated, component of a successful transition from a facility-based living and working life to true presence and participation in the community. The best community-based employment program provides little benefit if people cannot get reliable transportation to work; the most inclusive supported living service will fail if people cannot get to the grocery store, or to the mall, or to the doctor.

Transportation, however, is not a one-size-fits-all commodity. Transportation needs vary by disability, by community, and by income level; people with disabilities who live in small rural regions of Ohio face very different challenges, for example, than do those who live in large metropolitan areas. Transportation therefore does not work well when it is treated as a "program," particularly if it is limited to certain service recipients or categories of people. Traditional, segregated transportation services for people with cognitive disabilities are also at odds with more recent community-based service initiatives. And transportation, unlike inclusive education or most other



Transportation is essential for true community participation—by everyone. It is therefore not so much a disability issue that has implications for the general community as it is a general issue that has unique implications for the disability community.

Because transportation is such an integral part of community life, it does not work well as a "program."



Access to transportation, on the other hand, is to some extent an issue of disability, but it is much more an issue of money (or lack thereof).

disability-related concerns, is less a discrete issue than an integral part of anyone's independence and self-sufficiency. It is an issue of critical import for all people—not so much a disability issue that has implications for the general community as a general issue that has unique implications for the disability community.

Access to transportation, on the other hand, does have a defining characteristic: It is to some extent a disability issue, but it is much more a poverty issue. Individuals with higher incomes (very few of whom have disabilities) have relatively few problems getting around. Put another way, if every Ohioan with a disability had an income of \$75,000 a year, there probably would be little need for us to write this paper. Those of lower income are certainly at a disadvantage. Those of lower income who have physical or mental disabilities, and therefore face physical access issues as well, are at a double disadvantage.

As you will see as you read this paper, although fairly simple to understand as a concept, transportation in practice is very complex. Currently, multiple public and private agencies provide transportation services that vary significantly in terms of eligibility requirements, scope, and duration. Coverage also varies greatly, almost wildly, by geographic location, not only from county to county but often by sections within a single county. Apparently obvious solutions to coverage problems, such as using school buses to transport adults to job locations during non-school hours, come with drawbacks (such as possible insurance liability and union issues) as well as serious concerns about appropriateness.

This paper is one of the principal products of a project funded by the Ohio Developmental Disabilities Council (ODDC) to determine the best approaches to increase the availability and accessibility of transportation for Ohio's citizens with disabilities. The recommendations set forth in this report are directed not only to the ODDC but to many of the state-level agencies currently involved in the funding or provision of transportation services, with particular emphasis on those agencies serving people with disabilities. Another targeted group consists of those organizations that provide advocacy, both consumer-led organizations (such as centers for independent living and PeopleFirst chapters) and the more traditional disability organizations. The sources of information consulted for this report include:



- Reports and position papers from a host of state and federal agencies, providers, and advocacy organizations
- Interviews with representatives from a number of state and local agencies (including the Ohio Departments of Transportation, Human Services, Aging, and Mental Retardation and Developmental Disabilities; the Ohio Rehabilitation Services Commission; the Mid-Ohio Regional Planning Commission; the Ohio Human Service Directors Association; the County Commissioners Association of Ohio; Governor Taft's office; the national office of the Paralyzed Veterans of America; and the national office of the Easter Seal Society)
- A review of the Ohio Works First transportation work plans of twenty-five counties
- Surveys of users of transportation services as well as the directors and staff of local human service departments
- Input from individuals with disabilities collected through a series of forums sponsored around the state

Copies of this material are available upon request from the ODDASE office.

Because of the short duration of this project and the magnitude of the task placed before us, the question we initially faced was to what extent we could, in one year's time, pull together enough information and ideas to develop a reasonable, concrete set of recommendations that could then be acted upon by those entities in a position to do so. Although we have devoted a good deal of space in this report to describing the current situation in Ohio as well as recent state and federal initiatives, this paper was never intended to be a lengthy journal article; rather, it is primarily a persuasion paper. In addition, because of the time limitations, we have opted for recommendations that are structural in nature rather than content-specific. For instance, rather than calling for the increased availability of passenger training for people with cognitive disabilities, we opted for recommending structural changes by which that training and other related activities might be more likely to occur (such as including consumer representation on an expanded and better funded Statewide Transportation Coordination Task Force, which can oversee such activities). We also limited the number of recommendations. It was not our

This report is primarily a persuasion paper. It presents a limited number of recommendations that are structural in nature rather than content-specific, and it identifies who should be responsible for addressing the recommendations.



intent to overwhelm but to persuade key organizations and agencies to move in certain directions with respect to five or six critical issues. We also tried to be cognizant of the need to determine *who* will be responsible for addressing these recommendations once this project is concluded. Recommendations, however sound, without a subsequent commitment to follow-up, will do little to improve the current situation.

As you will see, this paper is not a diatribe against the inadequacies of the current transportation system in Ohio. In many cases, a great deal needs to be abandoned or vastly improved; often, however, we have noted initiatives that should be applauded and expanded. We have found that, in almost all cases, both transportation funders and providers are making positive efforts in trying to assist all of their riders, including those with disabilities. This paper, hopefully, will assist them in those efforts.

#### UNDERLYING PRINCIPLES

Before we outline the current status of transportation for people with disabilities in Ohio, both in terms of what is provided and who is involved, we need first to describe the principles that guided the development of our recommendations. These principles are based, in large part, on more general value statements previously adopted by the Planning Council and the disability advocacy community.

 Promoting community life and employment over segregated living and work options.

Transportation, as we see it, is more than getting an individual from Point A to Point B and back to Point A. It is giving the individual the opportunity to take part in all facets of a community-involved life as independently as possible. We devoted very little time to issues related to transportation to and from county board of MR/DD sheltered workshops, for example. Instead, we emphasized general community accessibility.

 Promoting the use of generic, public transportation services over specialized services.

Some approaches, such as using school buses to transport Ohio Works First recipients to places of employment during non-school hours, were rejected in favor of more generic, less stigmatizing options. We do understand, however, that an argument can be made, particularly in



rural counties, that such transportation options are needed because of the lack of currently available alternatives.

 Promoting increased access for all aspects of a person's life—social as well as employment-related or medical.

The need for accessible, reliable transportation does not end at the conclusion of the work day or when doctors' offices close. True community inclusion requires a comprehensive transportation system that can respond to an individual's full range of daily activities.

 Working on this effort across age and disability boundaries.

Our efforts should be as much geared toward making transportation options available for a young boy with significant mental retardation as for a young professional woman with a spinal cord injury or for an elderly woman with Alzheimer's disease who wants to stay in her own home. The need for transportation is in no way limited only to persons with physical disabilities or only to adults or only to persons with developmental disabilities.

 Promoting user input into the development and maintenance of transportation services, including the development of rules and regulations.

Put simply, transportation services—both locally and at the state level—will not be as responsive to the needs and capacities of people if they do not include significant and meaningful input by those who use them.

• Finding commonality with other groups, such as persons of lower income.

As we have stated previously, difficulty in accessing reliable transportation is primarily an income issue, often compounded by disability issues. Therefore, improved access to transportation is a goal that is shared—or should be shared—by groups representing people of low income, such as community action agencies, as well as groups representing seniors and people with disabilities. In fact, the majority of advocacy for improved transportation has thus far been accomplished by groups and organizations that do not have a disability focus.



#### **TERMINOLOGY**

In order to better understand the history, funding, and availability of transportation for Ohioans with disabilities, it is important to know about the different categories of transportation provision. The following terms and concepts may help clarify the issues we all face in crafting transportation policy.

#### **PUBLIC TRANSPORTATION**

Public transportation operates within a locality (a city or a county), is publicly funded (often receiving monies such as sales or real estate taxes, but also through general revenue funding or service contracts), and is available for use by the entire community. The vehicles most commonly used for public transportation are buses, vans, and trains. Public transportation may be organized under a regional transit authority or a county transit board, organizations that serve a broad geographic area such as a county or group of counties. Public transportation may also be organized under a city or county transit system, which may serve only a specific city or section of a county. Not all public transportation systems are recognized as regional transit authorities.

#### **PARATRANSIT**

Paratransit ("beyond transit") is a generic term that refers to any type of transportation services not provided over a fixed route (e.g., demand-responsive service). Paratransit services may exceed the specifications of the Americans with Disabilities Act (ADA) and, as they are in coordinated transportation arrangements, may be provided by various agencies independently of a transit system. Generally, such services can be termed paratransit only when there already exists some type of public transportation to supplement. In areas where such transportation for persons with disabilities is the only means of public or agency-sponsored transportation, it is more appropriate to refer to it as specialized transportation than as paratransit.

#### ADA COMPLEMENTARY PARATRANSIT

ADA complementary paratransit is a mandated service established by a public transportation system to meet the needs of its passengers with disabilities who cannot use regular public fixed-route services. ADA complementary

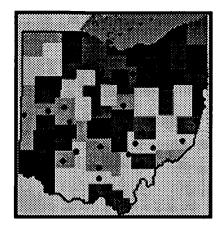


paratransit is set up along federal guidelines as part of the ADA, but with community approval it may deviate from those guidelines in order to meet local needs.

#### **COORDINATION PROJECTS**

Coordination projects (also called coordination systems or coordinated transportation) are long-term activities undertaken by social service agencies, private transportation providers, and public entities either to supplement existing public transportation and paratransit services or to provide transportation within areas where no type of public transportation exists. Coordination projects are usually established to serve primarily persons with disabilities, older residents, and participants in particular programs such as Ohio Works First and other welfare reform efforts. Coordination projects are funded through a number of sources, including grants from the Ohio Department of Transportation, subsidies allotted by county commissioners, various taxes, and agency contributions. Coordination projects are started primarily in rural areas; however, they are being used more and more in both small and large urbanized areas as a way to supplement existing paratransit services.





## THE CURRENT SITUATION

A host of state-level and local agencies are involved to a great extent in the funding and provision of transportation services. The vast majority of the funds for transportation are raised locally. The Ohio Department of Transportation (ODOT), as you would expect, is the largest funder at the state level. (Federal, state, and local funding through ODOT for transportation services add up to approximately \$56,000,000 each year.) In addition to the basic grant program that provides funding for 52 public transportation systems throughout Ohio, ODOT provides matching funding for rural transit, fare assistance for seniors and persons with disabilities, capital, rideshare programs, and planning. Other state agencies that provide a good deal of funding include the Ohio Department of Education (approximately \$230,000,000 for bus purchases, general transportation, and specialized transportation, including transportation for persons with MR/DD), the Ohio Department of MR/DD (\$35,000,000 for CAFS and Title XX transportation), the Ohio Department of Aging (\$12,000,000 for PASSPORT and transportation provided under the Older Americans Act), and the Ohio Department of Human Services (\$33,000,000 for Medicaid-funded ambulance/ambulette and enhanced Medicaid transportation services). It should also be noted that funds that can be used for transportation services are also available from the Department of Human Services Temporary Assistance to Needy Families (TANF) program. That program, which replaces the Aid to Families with Dependent Children (AFDC) program, will be discussed in more detail in this section. Other agencies, such as the Ohio Rehabilitation Services Commission, offer more limited transportation funding for their clients.

These figures represent a great deal of commitment at all levels for transportation. However, there are certainly gaps in service (41 of Ohio's 88 counties, for example, do not have any public transportation service), and the majority of state transportation programs listed are restricted by specific eligibility criteria. In terms of the types of service provided, some agencies are fairly progressive; the Ohio Department of Transportation, for example, has had a good deal of success in local coordinated transportation, and some other agencies, such as the Ohio Rehabilitation Services Commission and the Ohio Department of



GETTING ON BOARD

Aging, are becoming more involved in such areas. Still other agencies, however, have changed very little over the years. Except for a select few county boards of MR/DD, for instance, the MR/DD system continues to transport adults in its own fleet of yellow school buses—but even there things are beginning to change. It also must be noted that of all the agencies listed here, only the Ohio Department of Transportation has a staff person whose sole job is to work on this issue, and it is the only agency with a written policy on transportation.

#### PUBLIC TRANSPORTATION

Transportation for Ohioans with disabilities has historically been fairly limited, especially in rural and small urban areas. This pattern is seen not only in Ohio but across the country. The lack of reliable and accessible transportation has been and continues to be the most often cited barrier to independent living for people with disabilities and seniors. For those persons who require wheelchair-accessible transportation (vehicles with lifts, ramps, low floors, and/or adapted seating areas), choices are even more limited, even in the urban environment.

This picture is changing, to an extent, because of capital-improvement and training programs undertaken by a variety of entities in Ohio. In urban areas, both regional transit authorities and city-based transit systems have quietly moved to comply with the Americans with Disabilities Act and ensure that all newly purchased vehicles are wheelchair-accessible. Paratransit programs have been revised to meet ADA guidelines. Trains and other types of rapid transit vehicles, although very limited in Ohio, have been made more physically accessible.

Even where the buses or trains themselves meet ADA standards, however, portions of urban transit systems are often not accessible. Bus stops along roads without sidewalks, the absence of curb cuts on paths leading to bus or train stops, and platforms that have no means of access from the ground or street level or those that do not have tactile warnings at their edges all pose barriers to riders with disabilities. Operators who do not call stops or who refuse to engage a lift also significantly impede the full use of public transportation. A bus with a lift that does not work reliably is as inaccessible as a bus without a lift.



Paratransit alone cannot meet the demand for accessible transportation.

Paratransit service does solve some accessibility problems in urban areas, albeit somewhat inefficiently, but it cannot come close to meeting all the transportation needs of persons with disabilities. Some of the more frequent shortcomings of paratransit service include the limited availability of trips (because demand far outstrips supply, especially at certain times of the day), cumbersome scheduling procedures (which are sometimes carried out entirely by hand), an overly generous application process that confers eligibility for paratransit on too many people, and, in some systems, limited coverage areas. In addition, paratransit is a separate-but-equal solution that, for the majority of riders, may unnecessarily perpetuate the "special" treatment of people with disabilities. As with other aspects of any traditional service system, what was seen as cutting-edge twenty years ago is now seen, at least in some quarters, as antiquated.

#### **AGENCY TRANSPORTATION**

Social service agencies in urban areas have in many cases over the years developed their own transportation systems to meet the needs of their specific clientele. This development was due, in large part, to the lack of more generic alternatives at the time. Criteria for eligibility vary widely among these agencies, leaving large segments of the population unserved. Many agencies place restrictions on the purpose for which a trip may be taken on their vehicles: medical appointment, employment, or a group social activity.

Some consumer organizations such as centers for independent living or particular disability-based support groups either provide actual transportation services themselves or administer a voucher or coupon system through which individuals can gain access to public transportation or taxi services for events sponsored by or related to the organization.

As federal, state, and local government funding has decreased for social services, nonprofit agencies and consumer organizations find themselves relying on public donations and other funding sources to provide these services. The cost of operating vehicles (including staff wages, maintenance, and insurance) has caused many social service agencies to abandon their specific transportation services.



In urban areas, a practice called "client dumping" is sometimes seen. A social service agency that had previously used its own vehicles to meet the transportation needs of its consumers closes down its in-house transportation service and instead sends its consumers to apply for and use the local paratransit service. Client dumping puts a strain on existing paratransit resources. There are provisions in the ADA complementary paratransit regulations for a certain percentage of trips to be scheduled and charged for agency purposes such as transportation to adult day care or sheltered workshops. However, ADA complementary paratransit trips cannot be prioritized; that is, the purpose of a trip cannot be used as a factor in determining how or even whether to schedule it. So if more and more consumers call to request trips that were formerly provided by an agency, then fewer and fewer general-purpose trips will be available to persons with disabilities. Medical trips such as those for dialysis and cancer treatment may also contribute to the client dumping problem.

In rural areas, persons with disabilities often must depend almost exclusively on friends and family to meet their transportation needs. Social service agencies must contend not only with the cost of operating vehicles but also with the logistics of covering long distances or circuitous routes to reach consumers. One result of these limitations is that persons with disabilities often either congregate in small urban centers or move from their home areas to larger cities in order to receive services and participate in the community.

#### **MEDICAID-FUNDED TRANSPORTATION**

Another category of transportation is distinguished not by the entity that provides the actual ride but by the funding source that pays for it: the federal Medicaid program, administered through the Ohio Department of Human Services. Regulations governing provider operations as well as passenger transport are numerous and complex. Medicaid-funded transportation is often provided by private companies as a means of supplementing their existing taxi or paratransit business.

Medicaid-funded transportation does not, and intentionally cannot, address the entire transportation needs of a person with a disability in the community. It is, after all,



16

nothing more than an existing transportation service that is being paid for with Medicaid money by the Ohio Department of Human Services. It therefore displays many of the shortcomings already mentioned, the most notable of which are the restriction placed on the purpose of a trip and the limited eligibility for the service. Because of the nature of the Medicaid program, trips generally must have a medical purpose (e.g., doctor's appointment, physical therapy session). Trips for other than medicallyrelated reasons are generally not an option. In addition, before they can receive Medicaid-funded transportation services, individuals must be enrolled in the Medicaid program and have been deemed eligible for the services. Contrary to popular opinion, the presence of a disability, even a significant disability, does not nor should it automatically confer Medicaid eligibility.

#### RECENT STATE AND LOCAL INITIATIVES

A great number of interesting activities are under way to improve transportation services in Ohio. Few of these activities are specifically meant for people with disabilities; instead, the target groups are generally those of lower income (which would certainly include the majority of people with disabilities). As you will see, the trend in the last several years has been toward furthering local coordination of effort. Several areas of the state have done well in this respect, whereas others continue to maintain a fairly fragmented approach. The emphasis on local coordination has increased alongside, and perhaps partly because of, the trend toward devolution—putting greater decision-making in the hands of local administrators rather than state and federal policymakers.

#### **LOCAL COORDINATION**

Although coordinated transportation services have ostensibly been part of its charge since the 1970s, the Ohio Department of Transportation in 1991 began in earnest to consider them, asking a host of questions and compiling the answers in a "cookbook for coordination." This manual, A Handbook for Coordinating Transportation Services (referred to simply as the Coordination Handbook), highlights suggested policies and procedures for beginning a coordination project. The manual has received a good deal of well-earned praise and, as a result of the many inquiries and requests for "best practices"

A Handbook for Coordinating Transportation
Services and A Guide for Implementing Coordinated Transportation
Services provide a good blueprint for local transportation.



documentation, ODOT's Office of Public Transportation has published not only a second edition of the Coordination Handbook but also a companion volume of best practices, A Guide for Implementing Coordinated Transportation Services (the Implementation Guide). These manuals, in our view, are well written and user-friendly and offer localities wishing to increase local coordination of transportation services a good blueprint for doing so.

In 1995, limited funding was made available to ODOT's Office of Public Transportation for grants to rural areas in Ohio that met criteria for beginning and sustaining a coordination project. Initially, seven projects were given funding for one year, which could be renewed for a second year. Funding was based on the operational structure of the project and on the commitment of local authorities to continue the project after the grant period. Grant agreements were usually signed under the auspices of county commissioners.

Uncertainty about working with other organizations and concerns about giving up vehicles, providing insurance, assigning staff, and other aspects of coordination arose as agencies and local governments in rural areas became involved in these coordination projects. ODOT, recognizing this potential barrier to progress, encouraged greater diversity in the implementation of its coordination grants. A key to success, expressed by ODOT staff, was that agencies and local governments need not move from a traditional, fragmented arrangement for providing transportation services to a cooperative, coordinated system overnight. They could start coordination slowly, giving all parties involved time to adjust to shared use, to resolve turf issues, and to come to grips with such complex problems as consolidating eligibility applications. (The Coordination Handbook and Implementation Guide were intended as self-contained compendia of information to assist in the development of coordination projects, and they have been widely disseminated. Nevertheless, counties continue to request hands-on assistance from ODOT staff in their respective efforts to develop a coordinated system.)

Coordination projects took on many different forms—from small projects in which several agencies reduced their individual costs by sharing a fuel source and maintenance personnel to full-blown interagency



ODOT continues to fund regional coordination projects, sponsors monthly coordination roundtable meetings, and has conducted several Ohio Coordination Conferences.

coordination of vehicle use, dispatching, driver assignment, and consumer eligibility determination. Projects were given the freedom to design systems that not only met the needs of their communities but also included the input of social service agencies and public officials.

State funding continues for regional coordination projects. Each year, ODOT makes approximately \$500,000 available in grants of up to \$50,000 per project. These grants, even though relatively small, are intended to fund actual service delivery. One of the stipulations of an ODOT Coordination Grant is that service or program benefits must be realized no later than sixty days after funding is received. Grant applications must be submitted by public entities (usually county commissioners) and must demonstrate a "local buy-in" and commitment to continuation of services. Grant-writing workshops and technical assistance are readily available through ODOT's Coordination Grant process.

To help the first coordination projects relay information and provide peer support to one another, ODOT began sponsoring monthly "coordination roundtable" meetings. In November 1996, the first Ohio Coordination Conference was held in Columbus. Topics included national best practices, insurance, the effects of emerging welfare reform on coordinated transportation, and a consumer perspective. That conference and the monthly coordination roundtable meetings have proved so successful that ODOT held another conference in November 1997 and a third in March 1998. Given the attendance at these conferences and the large number of applications for participation in the program, this effort is clearly seen as worthwhile by the majority of counties.

#### STATE-LEVEL COORDINATION

In early 1996, a group of representatives from several Ohio agencies went to Chicago to attend a workshop on coordinated transportation that was sponsored by the Federal Transit Administration and the U.S. Department of Health and Human Services. Because welfare reform was quickly becoming a reality for individual states and pending federal legislation would require state departments of human services to address transportation aspects of welfare-to-work plans, state agencies were strongly encouraged to work together to provide more efficient systems of transportation for their consumer populations.



Following that conference, it was decided by the attendees that these agencies would work together on an ongoing basis. This new group, the Statewide Transportation Coordination Task Force, currently meets monthly at ODOT's Office of Public Transportation. Task Force members include representatives of the Ohio Departments of Transportation (which also serves as Chair of the Task Force), Aging, Education, Human Services, Mental Health, Mental Retardation and Developmental Disabilities; the Family and Children First Initiative; the Ohio Rehabilitation Services Commission; the Ohio Bureau of Employment Services; and the Governor's Council on People with Disabilities. Representatives of various special projects and programs involving transportation add diversity to the group, and guest speakers are invited to give presentations on specific topics. (For example, staff members of the Ohio Highway Patrol might be asked to discuss certain regulations currently at issue.)

The primary purpose of this group thus far has been to study the policies of the state-level agencies and to eliminate barriers posed by out-to-date or incorrectly perceived regulations concerning the provision of transportation. The Task Force has chosen a study area, Richland County, in which to create a virtually barrier-free environment for transportation coordination. Although not yet completed, this study is yielding an understanding of common barriers for individuals with and without disabilities in a mid-sized county and how they might be overcome.

The Statewide Transportation Coordination Task Force has also worked from within its individually represented agencies to begin to change regulations, the eligibility application procedure, and the flow of information from the state to the local level. The Task Force has conducted a review on welfare-to-work issues for the Ohio Department of Human Services and has developed a series of briefs on various transportation issues as part of a National Governor's Association grant.

In 1998, the Ohio Rehabilitation Services Commission contributed \$250,000 toward the Ohio Department of Transportation's local coordination projects to address employment-related transportation issues for people with disabilities.

The Statewide Transportation Coordination Task Force—whose members include representatives of ODOT, ODA, ODE, ODHS, ODMH, ODMR/DD, Family and Children First, ORSC, OBES, and GCPD—studies policies of state-level agencies and seeks to eliminate barriers posed by out-to-date or incorrectly perceived regulations.



#### **OHIO WORKS FIRST**

In the words of U.S. Secretary of Transportation Rodney Slater, "Transportation is the to in welfare-to-work." At both the federal and state levels, provisions for transportation are being added to welfare reform legislation. Such transportation often reaches beyond existing public transit routes, developing reverse commuting on existing routes (transportation from the inner city, where many welfare recipients reside, to outlying communities, where more jobs are available) and beginning coordination projects in communities not previously familiar with the concept. Ohioans with disabilities may benefit from such enhanced transportation even though they, as a group, are not directly targeted.

In July 1997, Governor George Voinovich signed into law House Bill 408, landmark legislation that fundamentally changed the nature of welfare assistance in Ohio. Welfare reform programs organized under H.B. 408 are commonly known as Ohio Works First. In basic terms, the new law requires welfare recipients to get a job or, after three years, lose benefits. The Ohio General Assembly appropriated an additional \$5 million per year during the FY 1998–1999 biennium specifically for transportation planning and provision of transportation services related to H.B. 408. This funding is spread over all 88 counties in Ohio. Although only a drop in the proverbial bucket of funding needed for transportation planning, this funding was critical in that it brought attention to the need for effective transportation if welfare reform were to work. Local partnerships with employers, metropolitan planning organizations, and existing transit providers cover the remainder of the transportation costs.

H.B. 408 requires each county to develop, as part of its overall welfare reform package, a Community Plan, which is a comprehensive document that describes how the county will implement Ohio Works First. In its Community Plan, a county's vision for operating Ohio Works First is translated into an Operational Plan outlining workforce development strategies, a Plan of Cooperation, and a County Transportation Work Plan. The County Transportation Work Plan was deemed to be of great importance because studies (such as those done by Case Western Reserve University's Center on Urban Poverty and Social Change and by the Mid-Ohio Regional Planning Commission) have clearly shown that a large

House Bill 408 and its associated welfare reform programs (Ohio Works First) may indirectly benefit Ohioans with disabilities by requiring improved planning and provision of local transportation services.

A county's Community Plan includes an Operational Plan, a Plan of Cooperation, and a Transportation Work Plan.



portion of entry-level jobs that could go to welfare recipients are located in outlying areas, away from most public transportation. In one study, for example, less than 15% of recipients could reach the vast majority of posted entry-level jobs within forty minutes using public transportation.

Implementation of various aspects of the Community Plan is based on an individually negotiated system of incentives. Each county works out partnership agreements with the Ohio Department of Human Services to set performance goals. Tracking and performance measurement is crucial to the success of the individual plans, and transportation plays a key role because it provides, both literally and figuratively, the vehicle to get Ohio Works First participants to jobs and other needed services, such as child care.

The Transportation Work Plan details how a county will provide adequate transportation services to Ohio Works First participants. The new welfare environment gives counties the flexibility to develop programs and services that are specifically tailored to the needs of individual communities. Because the Transportation Work Plans are to be based on the particular needs of an area, counties are encouraged to try new and innovative approaches, as well as to establish partnerships with surrounding counties to provide access to jobs. This flexibility means not only increased or enhanced services to Ohio Works First participants but also greater benefit to the community at large. For example, the needs of persons with disabilities for "off-peak" travel, recreational trips, and access to job sites outside existing public transportation routes can be taken into consideration in a county's Transportation Work Plan.

Part of the transportation planning process calls for the involvement of community members—including persons with disabilities, Ohio Works First participants, and agency representatives—on the county's Human Services Planning Committee. In our review of the first 25 County Transportation Work Plans, however, we found very little involvement of people with disabilities in the planning process—due in part to the relatively short timelines for completion, and therefore recruitment, and in part to a lack of previous experience in seeking such input.

Each county has a great deal of flexibility in developing its Transportation Work Plan and tailoring it to the needs of the community. Many factors can be taken into consideration in a Transportation Work Plan. Such flexibility benefits the community at large, including people with disabilities.



The ODOT coordination projects have a direct bearing on the Transportation Work Plans implemented as part of Ohio Works First. Many of the principles of coordinated transportation for persons with disabilities transfer directly to welfare-reform-based transportation. Counties are encouraged to use the ODOT Coordination Handbook and its Implementation Guide to assist in developing their Transportation Work Plans. When staff members of the Ohio Department of Human Services review a county's entire Community Plan, ODOT staff members review the Transportation Work Plan section as well. There is no set structure or approval process for Transportation Work Plans, so reviewers merely give suggestions for improvements and may direct planners to the Coordination Handbook or other supports. Several existing coordination projects, for example, are offering their expertise to make Ohio Works First dovetail smoothly into existing service systems.

As part of the preparation for this paper, we surveyed about two dozen directors of local departments of human services to determine their views on the role of transportation in welfare reform. Almost all were supportive of the intent of the legislation and saw the critical role that transportation needed to play in the process. Several directors commented specifically on the importance of transportation in this effort:

"Since the goal of the new program is to promote self sufficiency, transportation is a major issue, especially in small rural counties which do not have mass transportation. Funding is needed to expand and improve services."

"Current public transportation is not adequate for door to employer [service] in a timely manner, nor to provide services across county lines. Also, it limits the shifts one can work (does not provide for second or third shifts and weekends) and the areas one can work."

"Of all expenditures for participants to accept or keep a job, 45% have been for transportation related expenses. This alone demonstrates that lack of transportation is a significant hindrance to families' self-sufficiency."



"Lack of transportation severely hinders a family's ability to become self-sufficient. Even if public transportation is available, too often daycare is not on the route or not appropriate for young children."

In addition to recognizing the problem, the directors identified part of the solution. When asked what recommendations they would make to help the program work, they said:

"Continue to look for partner organizations that can help you."

"Share ideas that are working in a county. Be creative, fit the needs of the participants."

"Exercise the power of a unified position to influence the allowance of flexibility in coordinating transportation."

"Encourage coordinated transportation, and provide direction. Work with other departments to overcome barriers to effective coordinated efforts."

"Suggest a review of all systems. Determine where these systems are at odds and plan strategies to improve flow. This includes both funding entities and service entities."

These suggestions will be even more relevant with the upcoming introduction of Ohio's workforce development legislation.

#### **WORKFORCE DEVELOPMENT**

The federal Workforce Investment Act of 1998 (WIA) will result in the coordination of most federally-funded job training programs. WIA requires that state legislation be created to implement such coordination in Ohio. The Act also mandates the development of a state-level Workforce Investment Board as well as local investment boards. Ohio may choose to give control of such coordination to a single state agency (it could, for example, choose to consolidate all existing job training programs, including the Ohio Works First program), or it may opt for requiring local coordination.



WIA requires states to implement coordination of most federally-funded job training programs. Such coordination, at either the state or the local level, could bring with it increased access to transportation services.

This Act and the upcoming state legislation are important in terms of increasing access to transportation because they, like welfare reform legislation, provide yet another opportunity for local coordination of transportation services to occur, even if the motive is a little different. As we stated earlier, even if individuals with disabilities are not targeted by this legislation, they can still benefit by increased attention paid to coordinated transportation. Legislation will be developed and introduced early in 1999. It is expected that a version of that legislation will be passed early in the session.

#### **RECENT FEDERAL INITIATIVES**

As promising as the initiatives at the state level have been, the federal outlook has been even better. Although they have a less direct impact on Ohioans with disabilities, federal legislation, appropriations, and policies that support and encourage local coordination and innovation are critical. Two recent federal initiatives are especially noteworthy.

#### ISTEA/TEA-21

In 1991, the passage of the Intermodal Surface Transportation Efficiency Act (ISTEA, pronounced *ice tea*) laid the groundwork for coordination of rural transportation. In June 1998, this far-reaching legislation was reauthorized as the Transportation Equity Act for the 21st Century (TEA-21), providing almost \$7 billion for large- and small-urban programs, rural transit, Section 5310 funding (for transportation for seniors and persons with disabilities), and several other programs. Its provisions and implications for transportation-disadvantaged persons are wideranging and promising. They include funding for everything from the Alaska Railroad to bicycle and pedestrian safety programs.

The Federal Transit Act of 1998 (49 USC 5101) is the section of TEA-21 pertaining to funding for mass transit. Several important provisions contained in Section 3000 of TEA-21 are worth noting. Although the legislation is extremely technical, we will try to highlight the relevant components of the Act as they apply to people with disabilities.

 The Formula Grants for Special Needs of Elderly Individuals and Individuals with Disabilities (Section 3013) provides transit capital assistance,



- through the states, to organizations that provide specialized transportation services to elderly persons and to persons with disabilities.
- Section 3013 also continues statutory allocation formulas based on the populations of seniors and persons with disabilities. Funding continues at 90% federal share for the incremental costs of vehiclerelated equipment needed to comply with the Clean Air Act Amendments and the Americans with Disabilities Act requirements and 80% federal share for all other eligible costs.
- The Access to Jobs Program (Section 3037) provides competitive grants to local governments and nonprofit organizations to develop transportation services to connect welfare recipients and lowincome persons to employment and support services. A coordinated transportation/human service planning mechanism is required to develop Access to Jobs programs; transit agencies must approve these programs.
- Section 3037 authorizes a reverse commute program to provide services to suburban employment centers from urban centers, rural areas, and other suburban locations. Criteria for selection include the need for additional services as identified in the transportation plan and the extent to which services will address these needs.

Local governments and private nonprofit organizations are eligible for discretionary grants for operating and capital expenses for Jobs Access transportation service. Section 3037 grants are awarded on the following criteria:

- The percentage of individuals in the population who are welfare recipients
- The need for additional services
- Coordination with and the use of existing transportation providers
- Coordination with state welfare agencies implementing the TANF program
- The use of innovative approaches, the presence of a regional plan and long-term financing strategies, and consultation with the community to be served

These grants fund promotion of employer-provided transportation and use of transit for nontraditional and transit voucher programs.



TEA-21 promotes partnerships, encourages innovation, and provides funding stability.

In general, TEA-21 does much to promote state and local partnerships, innovative practices, and relatively stable transit funding. All these factors are necessary if appropriate transportation services for Ohio's citizens with disabilities are to be expanded. It provides, in essence, a sound federal base from which to increase these options locally.

#### **OVER-THE-ROAD BUS REGULATIONS**

One of the transportation-related barriers most often cited by users and administrators alike is intercity travel. People with physical disabilities, in particular, currently do not have many options when traveling across county lines. Those private companies that do provide specialized intercity transportation offer limited routes at great expense. Intercity and interstate transportation companies, such as Greyhound, have not, up to this point, been required to provide lift-equipped buses for passengers with physical disabilities, nor have they shown the slightest interest in acquiring such buses. Instead, individuals who required assistance in boarding were "accommodated" by being carried on and off the bus.

New OTRBs must be equipped for wheelchair-accessibility.

The situation has now changed. The U.S. Department of Transportation recently adopted Over-The-Road Bus (OTRB) rules requiring that every new OTRB (a bus with a high floor and a baggage compartment underneath) be equipped for wheelchair-accessibility. Although there is no requirement for retrofitting current buses, all OTRB fleets (with a few exceptions) must be accessible within twelve years. Although still limited in terms of the number of routes and the timing of schedules, access to a service that is taken for granted by the rest of the population should greatly enhance the intercity travel options of Ohioans with disabilities.

#### ADVOCACY AND THE USER PERSPECTIVE

Legislative initiatives and administrative policy changes such as the ones already mentioned are critical to the expansion of transportation services in Ohio. Equally important to meaningful change is the existence of a strong advocacy and user movement. At this point, this link in the chain appears to be the weakest. Not discounting individual advocacy efforts, we have found that the most progressive initiatives over the last few years have



OETTING ON BOARD

come from within, rather than outside, the service system.

#### **DISABILITY ADVOCACY GROUPS**

Unlike a few other states, Ohio has no advocacy organization whose primary goal is to increase the availability of and accessibility to transportation services for people with disabilities. (The Pennsylvania Transportation Alliance is the most notable example of such a group.) Many advocacy organizations, of course, do rate transportation high among their priorities. Centers for independent living, in particular, often include access to local transportation services as one of their principal concerns. A few, such as the Tri-County Independent Living Center in Akron, have done particularly good work in this area. Nationally, the Paralyzed Veterans of America, ADAPT, and the National Easter Seal Society spend the most time following transportation-related issues.

For the most part, however, the advocacy movement is not well organized around transportation. There is very little involvement in decision-making at the state level; locally, the majority of input comes from some individuals with disabilities who participate on advisory committees for transportation authorities and, to a lesser extent, on advisory committees for local planning commissions. The state-level advocacy movement in Ohio cannot currently maintain as significant a presence as the other major system players, namely the provider trade associations (such as the Ohio Public Transit Association) and the state agencies charged with developing and funding transportation-related programs and services for people with disabilities.

There does appear to be a willingness on the part of funders at all levels to be more open to user input; the difficulty comes primarily from a lack of organization on the part of the advocates. This lack of organization is not necessarily due to a lack of interest. As we mentioned previously, the lack of transportation consistently rates as the biggest barrier to community living and employment for people with disabilities and seniors. (It rates very low as an issue for the general population, however.) The lack of organization among advocates stems from both a lack of resources and a lack of meaningful collaboration on almost any issue.

Lack of transportation consistently rates as the biggest barrier to community living and employment for people with disabilities and seniors. But no single advocacy organization currently has the resources to maintain an ongoing presence in the General Assembly nor to provide consistent input to state agencies responsible for funding or providing transportation services. And there is a marked lack of collaboration among advocates, not just on transportation, but on almost any issue.



Even for those advocacy groups with a more stable funding base, such as centers for independent living, few resources exist for providing much influence in this area. Transportation must compete with other, equally important issues on the advocacy agenda, such as increasing the availability of personal assistance services. Each advocacy organization may have a few contacts within the General Assembly and within the various state agencies responsible for funding or providing transportation services. No single organization, however, currently has the resources to maintain an *ongoing* presence in the General Assembly, nor to provide *consistent* input to these agencies.

Outside of limited but useful information-sharing funded or coordinated by agencies such as the Ohio Developmental Disabilities Council and the Ohio Legal Rights Service, coordination of effort by advocates is pretty much nonexistent. (This Transportation Project happens to be one of a handful of transportation-oriented efforts that do share a common bond of having been funded by the ODDC; other such ODDC projects have been carried out by the Ohio Department of MR/DD working with several centers for independent living, by the Society for Handicapped Citizens in Medina, and by the Scioto County Board of MR/DD.) This lack of coordination is by no means limited to transportation issues. Over the last two years, a loose consortium of state and local advocacy groups known as Ohio Advocates Together has begun to meet regularly and take coordinated action on certain issues. If that effort continues and becomes formalized, a greater degree of collaboration on transportation issues may yet be possible.

#### INDIVIDUAL USERS

Among users of transportation who have disabilities, we must note a full range of feelings about and levels of satisfaction with transportation services currently received, as well as ideas about what needs to change to improve those services. As part of this project, we conducted a series of forums (in Chesterland, Lima, Cincinnati, Columbus, Dayton, Cleveland, and Sandusky) targeted to people with disabilities who were also users of various forms of transportation services. Although the majority of participants in these discussions had disabilities, the forums also included family members, transportation providers, county commissioners, county



DETTING ON BOARD 25

MR/DD superintendents, school officials, direct service staff, disability rights organization staff, residential providers, and other social service organization staff who provide transportation services. Participants lived in urban, rural, and suburban areas of the state. Some lived in traditional family settings, some in apartments, some in group homes, and some in larger nursing and intermediate care facilities. Participants appeared to come from diverse socio-economic levels and racial and ethnic backgrounds.

In addition, we distributed a user survey to a limited number of self-advocates from around the state. As you would expect, level of use, knowledge, and opinion varied considerably according to the user's location (the most notable differences were seen between rural and urban users), type of disability (people with cognitive disabilities generally were more satisfied with the current options than were people with physical disabilities), and what other services and supports she/he received (people already receiving transportation services as part of a work training program, for example, were more likely to be satisfied with transportation in general).

Each forum was distinct in its makeup of participants. The Columbus forum, for example, consisted primarily of persons with cognitive disabilities; the Chesterland forum had significant representation from the Amish community; the Cleveland forum included primarily people with physical disabilities; and the Cincinnati forum was a good mix of urban, rural, and suburban perspectives with Hamilton, Warren, and Butler Counties all represented. Nevertheless, some general issues surfaced. Following are the major concerns and observations of the forum participants and survey respondents.

 Physical accessibility to transportation services remains a critical issue despite the enactment of legislation such as the Americans with Disabilities Act.

Although it was noted in each of the forums that advancements have clearly been made with respect to accessibility to transportation, a great deal still needs to be done to make such services truly accessible. In addition to buying lift-equipped buses, for example, transit authorities and private providers must pay more attention to the maintenance of those vehicles. Participants also felt that more attention should be paid to getting users to and from the bus stops—fixing (and, in some cases, building)

Transportation users with disabilities have many different, and sometimes conflicting, feelings and ideas about transportation services. However, certain common themes do emerge.

As one Dayton participant stated, "The system [of accessible buses] is now ten years old and breaking down."



30

The system has built-in disincentives to community participation by people with disabilities. For example, transportation for a person in a sheltered workshop is generally free, whereas someone working parttime in the community at minimum wage usually has to pay at least part of the cost.

sidewalks, adding curb cuts, shoveling snow, and so on. An accessible bus stop just one block away might as well be miles away if the path to it is inaccessible.

• Fare structures affect community-inclusive work and recreation options.

Self-advocates and family members commented that in most cases transportation is provided free of charge for persons taking part in segregated programs such as sheltered workshops. As soon as the person becomes involved in competitive employment, however, a charge, however modest, is often assessed for transportation to that job. A recurring theme in these discussions was that competitive employment was usually at minimum wage and less than full time, with few if any benefits. Even a modest charge for transportation was therefore a significant portion of an individual's paycheck. To many families, this charge became a disincentive to move or to work outside of segregated settings.

Participants also commented that reduced-fare or free transportation should be provided to anyone who needs it, regardless of disability. It must be pointed out, however, that these participants would not necessarily support an increase in taxes to pay for that free or reduced-fare transportation, nor would they support increased accessibility to paratransit services if it meant an increase in out-of-pocket expenses for them or a further increase in taxes. This outlook is certainly understandable because of the low income levels not only of the participants but of people with disabilities in general.

(Some transportation services have standard recommended fares but also implement a somewhat informal reduced-fare structure. For example, the Society for Handicapped Citizens, located in Medina County, utilized in its coordinated transportation effort a fare system in which riders were given envelopes, into which they would put whatever fare they could afford.)

 Transportation after six o'clock in the evening or on weekends is virtually nonexistent for most Ohioans without private transportation.

This fact, for the vast majority of Ohio counties and cities, makes community interaction other than employment very difficult, if not impossible. Reliance on family and friends is necessarily limited.

"I don't want to always have to ask for a ride," said one self-advocate in Columbus.



 Users of paratransit services are not afforded any degree of flexibility.

In most cases, paratransit services require that reservations be made as much as two weeks ahead of time. Any community involvement outside of a consistent work schedule is highly restricted by such limited availability.

 There is a great need for sensitivity training among transportation providers, drivers, and fellow passengers.

Public education is essential in this area, but specific training should be developed for those providing transportation services. Each forum elicited several stories of how individuals with disabilities and their families were badly treated. One self-advocate told of an embarrassing experience in the Cleveland area when the lift on the bus would not work. The bus driver had to drive on, leaving the individual stranded at the bus stop and the bus passengers cheering because, on that day, at least, they didn't have to wait those extra few minutes for someone with a wheelchair to be loaded and unloaded. Community acceptance requires empathy.

It was noted several times that discrimination and insensitivity are also prevalent in the disability community. Persons with cognitive disabilities and their advocates and persons with moderate physical disabilities expressed the observation that they are sometimes viewed as either not disabled enough or too disabled to reap the benefits of the disability movement. One gentleman in Cincinnati, who had a spinal cord injury, commented after the session that he felt uncomfortable riding in the same van as a young woman with profound mental retardation and cerebral palsy: "She drools and wouldn't know the difference in transportation providers anyway."

 Safety issues often conflict with community inclusiveness issues in transportation.

One issue of concern, raised several times, was that, in some areas of the state at least, adults with significant behavior problems ride the same bus as infants and toddlers. Parents, uniformly, felt that this situation was not only inappropriate but potentially dangerous. These same parents of very young children expressed concern regarding the length of time their babies and toddlers had

One participant put it this way: "I have to schedule my flu two weeks in advance if I want to see my doctor."

Acceptance requires empathy—even within the disability community.



To some family members, yellow means caution. A yellow bus is safer.

"I don't care what color the thing is, as long as it gets me where I need to be," said one selfadvocate.

Another self-advocate noted, "Yellow for adults means DUMB!"

Roadblocks to coordination and cooperation often exist only in the minds of the parties involved—not in rule or law.

to spend being transported to programs. In some cases, they spent hours each day just riding the bus.

A particularly hot-button issue, one that clearly produces differing opinions, is the requirement by county boards of MR/DD that adults with cognitive disabilities ride yellow school buses. Comments varied widely. Some participants expressed an indifference to the issue. Others cited the need for safety before other concerns; family members and transportation providers often mentioned that the color yellow meant caution and that they felt better about the safety of their sons and daughters in a yellow bus. Still others voiced a desire to end such stigmatizing practices.

Better coordination among service agencies is needed.

Stories of the failure of service system agencies to work together, even when it would have been clearly logical to do so, abounded: A particular senior citizen program may have space on a van but cannot pick up a twenty-year-old who uses a wheelchair, even if the person lives on the route and the van is accessible. A veteran's home may make regular trips to a hospital outside the county with space on the van, but it cannot take a child who needs medical treatment to that hospital because the three-year-old is not eligible for its services. A work-at-home mom without private transportation is willing to volunteer as an aide on her son's bus if the bus driver would just drop her off at the mall occasionally while her son is in a program, but the transportation provider is afraid of being sued by a "volunteer."

Almost everyone in attendance expressed a desire to cooperate. Transportation providers and county personnel, however, lamented generally that regulations and liability limited and sometimes prohibited effective cooperation. The disparate confusion of funding streams was also identified as a major roadblock. These roadblocks, in reality, are often more self-imposed by the provider agencies than real, but they clearly pervade the system and present barriers to local coordination.

Transportation between counties was of particular concern in every forum. Local funding agents are unwilling to transport persons out of county for things other than emergency medical services, and even then such transportation may be difficult to secure.



Although barriers to transportation were most often cited, it is also clear that, in many cases, people with disabilities are grateful for what they get, however limited. It must be noted that several individuals felt that money spent over the years in *studying* transportation in Ohio could better have been spent by simply buying buses and vans.

Rose Juriga, the Director of the Tri-County Independent Living Center, in her analysis of focus group interviews conducted by her agency in 1997, noted that there exists a tension between users of transportation services, who are somewhat leery of coordination efforts (generally preferring to have more of the same services available to them but with no increase in cost); providers, who would like to do more but do not have the resources or authority to do so; and policymakers, who are faced with potential cuts in transportation services and see coordination as a means to lessen the likelihood of such cuts. These conclusions match our own.



34



## **Conclusions**

Encapsulating all of the initiatives, events, and trends already mentioned, we come to the following general conclusions:

Transportation continues to be an issue of vital importance for people with disabilities, especially as they take their rightful place in their communities.

Transportation is an absolutely critical part of any support provided to an individual with a disability. As more programs and services to people with mental retardation and other disabilities have moved from the developmental centers and other facilities (nursing homes, group homes, sheltered workshops), the natural result is that more and more people are living and working in their own communities. Reliable transportation is integral to all community-based services, including those advocated by the ODDC (supported living, supported work, personal assistance services). The lack of affordable, reliable transportation accounts for many of the "failures" of community-based services, particularly in the more rural areas of the state. Even for those individuals who have moved into the community, the availability of reliable transportation can mean the difference between true participation in the community and a life of isolation.

In addition, the reliance on traditional MR/DD transportation services, such as school buses for adults, perpetuates the notion of people with MR/DD as different and in need of "special" treatment. Although many counties have failed to deal with these issues and continue to deliver the same types of transportation services as they did twenty years ago, others are very much involved in making transportation a part of the movement toward the community. In those counties, working agreements with transit authorities (resulting in express or shuttle service for board clients, for example), greater use of taxi service and private providers, reimbursement to families for providing transportation services, subsidies to clients who are placed in competitive employment, and the leasing of "regular" vehicles are all considered viable options. The "one-size-fits-all" approach fails in transportation just as it does in all other aspects of a traditional service system approach.



There is a lot going on of value in the transportation arena at all levels.

Even a glance at the previous section reveals a great deal of activity. We have been pleasantly surprised by both the breadth and the sincerity not only of the movement toward local coordination of transportation but of the desire for including everyone in that movement. Whereas there has been some uncertainty about enforcement of the public businesses section of the Americans with Disabilities Act, for example, we see very little evidence of a similar hesitancy to implement the provisions dealing with transportation (the recent Greyhound fight notwithstanding). The majority of federal and state initiatives and activities are certainly not directed at people with disabilities, but they do not exclude them either. Many of these initiatives, such as Ohio Works First and workforce development, only tangentially include people with disabilities, but the possible impact on transportation services for them is great.

Many of the recent federal and state initiatives related to transportation will benefit people with disabilities, particularly if advocates are involved in the implementation.

The move toward local coordination of transportation services is clearly a positive trend. In addition, the working relationships engendered on the Statewide Transportation Coordination Task Force are beginning to result in worthwhile activities. Passage of the TEA-21 legislation added federal support to some of these initiatives, and both the Ohio Works First program and the upcoming state workforce development legislation can, if implemented appropriately, result in a more responsive local transportation system that will benefit people with disabilities.

Because transportation is a critical need for so many people, a host of organizations, most of which have little to do with disability-related matters, are already working on this issue. In some instances, it has historically been an ongoing activity; some centers for independent living, for example, have had as a major component of their missions the improvement of public transportation in their area. Some groups have the interest, but not necessarily the means, to participate. For others, the transportation issue is only now coming to the top of their

Although most transportation-related activities are not directed at people with disabilities, they do not exclude them either, and the potential benefit for the disability community is great.

All groups that have a stake in transportation need to be involved in transportation-related matters.



agenda (many people with disabilities and their families, for example, as they enter the competitive workforce also begin to appreciate the inadequacies of many of the existing transportation systems). Although some groups have more to contribute initially, all of these groups have a stake in the outcome and need to be involved. Most of the good work of the centers for independent living has focused on physical accessibility (of the buses, routes, stops) in urban settings for relatively young adults who have no cognitive disability. Although their contribution will be significant, it will by no means be enough.

The disability advocacy movement in Ohio is not particularly well organized or funded and cannot at this time provide ongoing, meaningful input on transportation issues.

As described in detail previously, no organization in Ohio spends the majority of its time specifically advocating for better, more accessible transportation for people with disabilities. Several organizations, some that include people with disabilities and some that do not, have transportation as one of their primary issues of concern, but none currently can provide the staff or other resources to closely monitor legislative and policy activities and to provide meaningful input to the General Assembly and state agencies responsible for transportation programs. This statement is not meant as a criticism of these advocacy organizations. It is merely an observation that, given the large number of equally pressing issues that face these organizations, many of which are understaffed and underfunded, the attention paid to this issue by advocates is not great.

These advocacy organizations are only now beginning to see the value of shared effort. Until a more systemic, cooperative approach is taken, however, we would not expect this situation to change.

The current political situation in Ohio presents both opportunities and limitations to significant change.

Any new gubernatorial administration brings about some degree of change, regardless of whether the party has changed. It presents a new opportunity to influence the political agenda. Knowing what we do about the new administration and the new General Assembly, which has changed very little from the last session, as well as the

No single advocacy organization in Ohio currently has the capacity to have a significant impact on legislation and policy. Such efforts need to be shared.



current economic outlook, we may make certain assumptions:

- It is probably unlikely that agency budgets will increase significantly, although some limited increases in specific line-items may occur.
- The welfare-to-work movement, prevalent across the country and exemplified in the Ohio Works First program, will continue.
- The devolution movement (shifting control from the federal to the state level, and from the state level to the local level) will continue as well.
- Consolidation of work programs, funded at both the federal and state level, will be a much debated issue, with some resolution of where the consolidation occurs (primarily at the state level or at the local level) in this coming year.
- There appears to be no move to introduce any legislation related to any aspect of transportation provision at the state level that would have a significant impact on people with disabilities.

If these assumptions are true, then the opportunities for advocates appear to lie less with developing separate legislation or seeking huge increases in particular lineitems than with "jumping onto" legislation not specifically meant for this purpose and seeking more modest line-item increases. Under any circumstance, it is critical that the new administration be approached early; the next few months will present the best opportunities to stake a place on the gubernatorial agenda.

In the new administration, legislation that is not specifically intended to improve transportation for persons with disabilities will still provide the best opportunity to advocate for such improvements.





# RECOMMENDATIONS

As we mentioned in the introductory section of this paper, we are structuring our recommendations with the understanding that other entities will need to follow through on them. The purpose of this section, as we see it, is to maximize the likelihood of changing the structure of the current policymaking process so that subsequent, more ongoing change can occur. We therefore have chosen (1) to make process-oriented recommendations rather than content-oriented recommendations, (2) to present a limited number of recommendations rather than a slew, and (3) to indicate which organizations would be the most appropriately involved in addressing these recommendations. Such a restricted focus will, we hope, permit the most rational use of this paper. We have also tried to emphasize what role the ODDC can play in furthering these recommendations. Each of the major recommendations comprises several points that we would consider to be the best ways to address it.

### **RECOMMENDATION:**

THE DISABILITY COMMUNITY NEEDS TO MAINTAIN AN ACTIVE INVOLVEMENT IN TRANSPORTATION ISSUES AS A "HANGER ON."

• Disability groups, for the most part, will not be a driving force for change but can play a valuable "me, too!" role.

The great majority of effort toward making transportation more accessible, both geographically and physically, is done by groups having little to do specifically with disability issues—the American Association of Retired Persons (AARP), regional planning commissions, county commissioners, community action agencies). This tendency operates at all political levels (national, state, and local). It is important, however, to maintain a presence in these deliberations so that the disability perspective is considered in—and, one would hope, incorporated into—all critical decisions. This view is shared by the two co-chairs of the Transportation Task Force of the Consortium for Citizens with Disabilities in Washington, D.C. The role of the CDC in most transportation-related legislation and policy change (most recently, the ISTEA reauthorization) has not been that of lead actor, as it were, but rather as a voice in the chorus saying "don't forget about people with



disabilities" after the development—but before the passage—of significant legislation or amendment to existing administrative rules. One small example cited was the inclusion of a mandate for lighted bumps on subway platforms to assist individuals with visual and/or hearing disabilities—overall, a tiny provision in a huge bill but one that is quite significant to travelers who need such cues. When faced with very real resource limitations, a role as "hanger on" is not inappropriate.

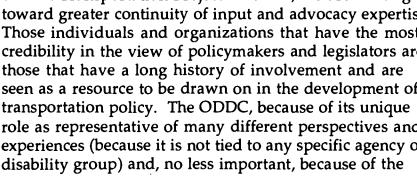
Although there may be the opportunity to play a larger role in Ohio policy decisions, it is not likely that the disability community will be the driving force behind significant change. It is important, then, that the disability community forge alliances with those groups, including advocacy groups such as the AARP or trade associations such as OPTA, that will be more involved in the development and monitoring of transportation policy. Who, then, in the disability community should be responsible for forging such alliances? The simple answer is to look to those entities that have (1) a vested interest in transportation issues, (2) a history of coalition-building, and (3) the resources to maintain a significant degree of involvement. Some entities, such as centers for independent living, have a keen interest in transportation but a relatively short history of working with the more traditional organizations. Still others, such as the Governor's Council on People with Disabilities, satisfy the first two criteria but would probably not have the resources to devote the required attention to the myriad of issues to be faced. We are left, then, with one or more of the following suggestions:

 The Ohio Developmental Disabilities Council (ODDC) should devote staff time, and possibly funding, to this function.

We are not recommending additional funding for the current Transportation Project. Instead, we are looking toward greater continuity of input and advocacy expertise. Those individuals and organizations that have the most credibility in the view of policymakers and legislators are those that have a long history of involvement and are seen as a resource to be drawn on in the development of transportation policy. The ODDC, because of its unique role as representative of many different perspectives and experiences (because it is not tied to any specific agency or

"THERE REALLY IS STRENGTH IN NUMBERS." Katy Neas, National

Easter Seal Society





resources at its disposal, is in a position to provide that continuity. Because the need for continuity is so great, the best use of ODDC resources would probably be to devote a significant amount of staff time toward this effort. Although more than one staff member could be assigned to work on transportation-related matters, a large percentage of a single staff person's time would be preferable to a smaller percentage of time devoted by each of several staff members. The role of the staff person(s), which would be separate from any funded project, would be to represent the disability community on as many transportationrelated boards and committees as possible, to monitor legislation that pertains to this issue, and to maintain ongoing contacts with policymakers who will eventually need someone to call upon to represent the disability community.

We need to make clear that this point is in no way a criticism of how the current ODDC staff members spend their time; rather, it represents our best thoughts on how to address this very important issue. DD councils in several states, for example, use staff for similar purposes (not for transportation per se, but in different substantive areas).

The ODDC, of course, would first have to determine the importance of this issue in relation to all the other issues it must address. We believe that this issue justifies such significant involvement for two principal reasons: (1) The importance of transportation to Ohioans with disabilities warrants such attention. (2) No other entity is currently devoting the amount of time and resources that are required. The Council can, of course, contract with or otherwise fund an outside project or agency to perform this function. Selecting the mechanism for input is not as important as doing something to assure that input is ongoing.

 The ODDC should devote some resources toward public awareness of transportation.

Unlike other entities with a stake in this effort, the ODDC has the resources to influence at least somewhat the public perception of transportation as it relates to people with disabilities. One role for the ODDC, therefore, would be to provide funds, possibly on a matching basis, for public awareness efforts such as brochures, PSAs, and press releases (in various accessible formats, of course). Its

"FREEDOM OF MOVEMENT
IS ESSENTIAL IN ENABLING
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INDEPENDENTLY AS THEY
CHOOSE; TO ENGAGE IN
PRODUCTIVE SELFSUSTAINING ACTIVITY;
AND MOST IMPORTANTLY,
TO BE FULLY INTEGRATED
WITHIN THEIR
COMMUNITIES."

Position statement of the Ohio Developmental Disabilities Council on the subject of transportation, November 1998



primary grantee for public awareness, AXIS, could assist in this activity if it were provided the funding to do so.

 The ODDC and other agencies should support, with both money and staff time, the efforts of advocacy organizations that are attempting to influence transportation policy on behalf of people with disabilities.

Although several Ohio organizations are involved in limited advocacy efforts related to transportation and have had some individual successes, particularly at the local level, the advocacy movement in Ohio is in some disarray and has not achieved the level of success it could—and probably should. If you believe, as we do, that the advocacy role is essential to maximize positive change in this area, then the advocacy community needs to be bolstered. Traditionally, Ohio's disability advocates have not seen much of a need to work together, not only on transportation issues but on other issues as well.

Successful coordination of effort around transportation has simply not been done very often in Ohio, at least not to the extent required. There are a few examples of successful collaboration on particular issues, to be sure (one example being the passage of H.B. 569, which expanded eligibility for county board of MR/DD services). There are also examples of cooperative working relationships between a few similarly-minded organizations, such as the sharing of office space. There have not been, however, the types of ongoing collaboration envisioned in this paper, at least not on the advocacy side. The strength for advocacy groups has always been the power of the numbers—several hundred letters can often turn an issue or defeat a bill, but, with no coordination of effort and no common direction, those letters will not be forthcoming.

As we mentioned previously, a new "group of groups" known as Ohio Advocates Together, consisting of the majority of the most familiar advocacy organizations (ODDASE, The Arc of Ohio, Cerebral Palsy Association of Ohio, Ohio Advocates for Mental Health, and several others) is now trying to pattern itself to some extent after the Consortium for Citizens with Disabilities. If it is successful, that group may provide a vehicle for ongoing collaboration, thereby increasing the likelihood of meaningful input on transportation issues (and other issues as well).

"I'M A BIG BELIEVER IN COALITIONS, EVEN THOUGH THEY ARE A PAIN IN THE NECK."

> Curt Decker, National Association of Protection and Advocacy Services



"THE MORE SOPHISTI-CATED GROUPS CAN BOTH DO THEIR OWN ADVOCACY AND PARTICIPATE IN A COALITION AND SHOULD DO BOTH."

> Susan Zierman, National Association of Developmental Disabilities Councils

Any staff or financial support in assisting that group to become a more stable force would help. This commitment to assist Ohio Advocates Together or any other viable consortium or coalition should not be the sole responsibility of the ODDC. Other organizations, such as the Ohio Legal Rights Service, the Ohio Rehabilitation Services Commission, or any of the other state agencies can logically take a role in that effort. A role for private corporations and foundations may also be appropriate. A stronger advocacy community in Ohio should benefit everyone.

#### **RECOMMENDATION:**

THE ODDC SHOULD ADHERE TO AND PROMOTE THE FOLLOWING PRINCIPLES IN ALL COUNCIL LITERATURE AND ACTIVITIES RELATED TO TRANSPORTATION:

- JUST AS COMMUNITY LIFE AND EMPLOYMENT ARE PREFERABLE TO SEGREGATED LIVING AND WORK OPTIONS, SO ARE GENERIC PUBLIC TRANSPORTATION SERVICES PREFERABLE TO SPECIALIZED SERVICES.
- TRANSPORTATION SHOULD PROVIDE INCREASED ACCESS FOR ALL ASPECTS OF A PERSON'S LIFE—SOCIAL AS WELL AS EMPLOYMENT-RELATED OR MEDICAL.
- EFFORTS TO EXPAND THE AVAILABILITY, ACCESSIBILITY, AND AFFORDABILITY OF TRANSPORTATION SERVICES SHOULD CUT ACROSS AGE AND DISABILITY BOUNDARIES AND SHOULD FIND COMMONALITY WITH NON-DISABILITY-SPECIFIC GROUPS, SUCH AS PERSONS OF LOWER INCOME.
- USER INPUT INTO THE DEVELOPMENT AND MAINTENANCE OF TRANSPORTATION SERVICES, INCLUDING THE DEVELOPMENT OF RULES AND REGULATIONS, SHOULD BE INCREASED.

The ODDC is a state agency responsible for providing some guidance and input to other agencies serving people with developmental disabilities. As such, it needs to react to funder and provider actions on an ongoing basis with certain principles in mind. If an agency develops a disability-specific transportation service, for example, the



GETTING ON BOARD

ODDC should take a more reactive role asking why a more generic service would not have sufficed. Proactively, the ODDC should publicly recognize those efforts that are exemplary (and there are a lot of examples, including but by no means limited to the Ohio Department of Transportation's local coordinated transportation program, the Delaware County Board of MR/DD's working relationship with the Central Ohio Transit Authority, the Richland County Demonstration Project, the Ohio Rehabilitation Services Commission's match for local coordination, and Project SCAT in Seneca County).

It should also encourage change where it is clearly needed, especially for those agencies for which it carries the most influence (and there are also examples here, including the antiquated use of school buses for adults in most county MR/DD programs). We are not suggesting that the Council is not already involved in advocacy related to transportation—the existence of this paper, together with other efforts by staff members, testify to such advocacy. What we are suggesting is that those efforts be expanded and formalized.

"IMPORTANT ROLE FOR ADVOCATES: FRAME THE ISSUES FOR THOSE OF US 'INSIDE THE BOX.'"

State agency representative

## RECOMMENDATION: FUNDS SHOULD BE INCREASED FOR LOCAL COORDINATION EFFORTS.

It is almost universally agreed that increased local coordination of transportation is sorely needed, for the benefit not only of people with disabilities but of everyone. State administrators see it as a practical solution to several problems, not the least of which is tight budgets; local human service administrators understand its necessity (although not all have shown full cooperation); advocates for improved transportation are in favor; and users are generally supportive (but worried that they might lose some of what they already have). Several counties, primarily under the auspices of the Ohio Department of Transportation's Coordination Program, have, with very little money, done very good work promoting cooperation and sharing of resources and have greatly improved the situation locally. In addition, the federal government has included in TEA-21 incentives for continued coordination.

Unfortunately, the Ohio Coordination Program's budget for FY 1998 was only \$500,000. Each year, the Office awards approximately ten grants to counties at about

"COORDINATION, COORDINATION, COORDINATION, COORDINATION. ANY COORDINATION EFFORTS WILL BE VALUABLE IN ENSURING THE STABILITY AND INCREASE OF TRANSPORTATION SERVICES."

Rose Juriga, Tri-County Independent Living Center, November 1997



\$50,000 per grant. This grant-making process, in effect, draws attention to those counties that would like to do some innovative things and affords them the assistance at least to begin the process. Some counties will take advantage of that attention; some will not. With such a limited amount of funding, these efforts still have the "feel" of experiments when, in fact, everyone has agreed that coordination is both needed and inevitable. In addition, these efforts tend to target riders with disabilities more than is usually the case. Increased attention to local coordination, then, will likely increase the attention to riders with disabilities and the often unique difficulties they face.

Coordination in and of itself, however, is obviously not a panacea. Some areas of the state have only one transportation service available (provided by the county board of MR/DD) or possibly two. For many Ohioans, the existence of a restricted transportation service is akin to having no transportation service at all.

Realizing the value of local coordination in the many areas where it is possble, and acknowledging the clear abilities of the staff of the Office of Public Transportation in assisting counties in their respective efforts, we would make two suggestions:

 The budget for the Ohio Coordination Program of the Ohio Department of Transportation's Office of Public Transportation should be increased.

The budget needs to be substantially increased in two areas: first, in the amount of funding awarded to counties; second, in the number of staff members to assist counties in local coordination efforts.

The current award amount—\$50,000 or less—is too low for most counties. (In 1997, the total budget of \$500,000 was spread among thirteen counties.) This amount is disproportionately small in relation to the increasing importance of the work. If more funds are made available, then increasing the amount awarded per county is preferable to increasing the number of counties given awards.

The Office of Public Transportation staff developed the two voluminous coordination handbooks as self-contained "how-to" tools for counties to use in their own coordination efforts—and they are very useful tools indeed. It was expected (or at least hoped) that their use would also lessen the time that an undersized staff spent

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HUMAN OR FINANCIAL, TO
STUDY AND ADDRESS THIS
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TO WHO TO TURN TO,
WHERE THE EXPERTISE CAN
BE FOUND, IS A
CHALLENGE."

Director of a county department of human services



GETTING ON BOARD

providing personal, usually on-site assistance. Instead, the counties wanted both the handbooks and technical assistance. For any new, creative project such as coordination, that request is understandable. But it also makes sense to have enough staff to actually provide the assistance. (It has also been our experience that as more counties are added each successive year, more technical assistance is needed; the most thoughtful counties never stop asking for assistance, even after they are no longer among the targeted areas.)

Just as centers for independent living did a good job making the case for additional funding from the General Assembly (which they received), so too should a host of agencies and organizations, including the ODDC, make a case for expanding the Ohio Coordination Program. The leadership for this effort should be shared between the ODDC and groups such as Ohio Advocates Together. Members of the Statewide Transportation Coordination Task Force should also be involved, but it is often difficult for state agencies to advocate successfully for substantial increases for their own programs. Such advocacy may necessarily be limited to outside support. This fact of political life is particularly true for the agency most affected by such advocacy, the Ohio Department of Transportation.

 Other state-level entities should be encouraged to pool resources, especially for demonstration projects.

The Ohio Rehabilitation Services Commission's commitment of \$250,000 to the coordination program set a precedent that should be matched by other state agencies. All of the major agencies included on the Statewide Transportation Coordination Task Force (the Ohio Departments of MR/DD, Aging, Human Services, Education, Mental Health, and Transportation; the Ohio Bureau of Employment Services; as well as the Ohio Rehabilitation Services Commission) would certainly be justified in doing the same. The Ohio Department of MR/DD, as one example, would benefit greatly from such involvement. (It must be noted that, although some county boards of MR/DD provide local leadership in this area, many boards are either not involved in local collaboration efforts or are only tangentially involved.) Transportation is a critical component of almost every community-based program, whether administered by a county board of MR/DD, an area agency on aging, a community mental health board,

"IT'S HARD TO GET PEOPLE TO FOCUS ON 'MEETING THE NEED' RATHER THAN 'WHO DOES IT.'"

State agency representative



or a bureau of vocational rehabilitation. Therefore, each of the state agencies should recognize the need to work across age, disability, and income boundaries and "ante up" in a cross-disciplinary effort. If there is a single issue that cuts across all these service areas, it is clearly transportation. The existence of the Statewide Transportation Coordination Task Force is itself evidence of a desire to work together and to see transportation as more than just an ODOT issue, but it is now time for a greater sharing of resources as well.

## RECOMMENDATION: THE STATEWIDE TRANSPORTATION COORDINATION TASK FORCE SHOULD BE FORMALIZED AND EXPANDED.

At this point, the Statewide Transportation Coordination Task Force is a voluntary convention of state agencies working jointly on an issue. It has no authority to enforce the compliance of any of its members, no formal procedure for reporting its findings, and no direct access to the Governor's office or to the General Assembly. We recommend that the Task Force be formalized in some significant respect. It probably is not necessary to provide that formalization in law (which perhaps is too formal and mechanistic for this purpose). Instead, an interagency agreement signed by the directors of each of the state agencies would likely suffice. The purpose would be to provide this group with a greater degree of attention and clout. In our interviews with entities outside of the Task Force, the only consistent concern we heard about it was its lack of influence outside of, and in several cases within, its own member agencies. The interagency agreement should be more than just an expression of willingness to work together; rather, we envision the agreement containing several substantive components:

The Task Force should include user representation.

We understand why the Task Force does not currently include users of transportation services. Although a case can be made for continued exclusion (after all, it is a consortium of state agencies and in some respect is an internal working group), it nevertheless needs that perspective in its deliberations. Some of the agencies involved in the Task Force do make good efforts to include user feedback, but we believe that greater participation is still warranted. Each user representative

"Fund ODOT to address these problems. This is a real 'reach' for human Service providers. ODOT should share, or be given, this responsibility—in conjunction with county commissioners and local providers both of Services and of transportation."

Director of a county department of human services



included on the Task Force should do two things: (1) provide input from the perspective of someone who actually uses the services and (2) act as a conduit for information to advocacy organizations. We would recommend a minimum of two user representatives one from the disability community and one from the aging community. These individuals would sit on the Task Force itself. In addition, we would recommend the formation of an advisory committee (discussed in the next point) to provide the Task Force with further input. Currently, a representative of the Governor's Council on People with Disabilities sits on the Task Force; it makes sense also to include a representative of the ODDC. (If the ODDC adopts our recommendation that more Council staff time should be devoted to the transportation issue, then serving as ODDC representative would be an appropriate role for that individual.)

• The Task Force should consider convening a state-level advisory committee on transportation issues.

Although we believe that creating an advisory committee is ultimately necessary, we are also cognizant that the Task Force may not yet be in a position to spend the time and energy required to make it work effectively. Once the Task Force is more formalized and has had time to develop some of the proposals included in this report and developed on its own initiative, this recommendation becomes more critical. This advisory committee, when created, should be far less formal than the Task Force. Meeting quarterly, it would consist of users with and without disabilities and representatives of private providers (such as intercity and intracity transit operators), public transportation providers (such as transit authorities), planning commissions, and advocacy organizations.

The purposes of the group would be to provide a sounding board for the Statewide Transportation Coordination Task Force on specific proposals it has developed, to bring proposals to the Task Force that committee members would like to see addressed, and to act as the first step in information dissemination not only to the agencies and groups represented but to the public at large. The advisory committee would thus give all the relevant parties (funders, providers, advocates, users) some ongoing involvement with the Task Force as both initiators and reviewers. The approximately twenty representatives should be convened by staff of the Ohio

"[PEOPLE WITH
DISABILITIES] HAVE GOT
TO BE AT THE TABLE."

Maureen McCloskey, Paralyzed Veterans of America



Department of Transportation but should elect their own chairperson.

• Each agency of the Task Force should have a written transportation policy that accords to a joint vision; each should devote at least one full-time staff person to the effort.

One of the first activities of the expanded Task Force would be to update, and possibly enlarge upon, current vision statements to better direct its efforts and those of the agencies represented on it. We would suggest the adoption of general principles—such as the ones listed in the second recommendation—as well as a number of objectives for the coming year or biennium. In addition to the formulation of a joint vision and general objectives for the Task Force, each of its members should agree to adopt that vision for its own agency and add any other more specific objectives that comport with that vision.

As we said earlier in this report, none of the agencies included on the Task Force, with the exception of the Ohio Department of Transportation, has a staff person whose sole job is to work on this issue nor has a written policy on transportation that provides it with a clear sense of direction and a yardstick by which to measure its progress. The majority of representatives who currently serve on the Task Force, although they are quite competent, are faced with an assortment of responsibilities beyond transportation and thus cannot give this issue the full attention it deserves. Given the importance of this issue and its relation to almost every service provided by those agencies, such a situation is not tenable. In addition, we have found that those services and programs with advocacy capabilities built into their internal structure generally progress the fastest. Therefore, we feel that each agency should devote a minimum of one full-time staff position to this issue. Those individuals should sit on the Task Force and report to their respective agency director and all relevant division chiefs as warranted.

## **RECOMMENDATION:**

THE DISABILITY COMMUNITY SHOULD ACTIVELY PARTICIPATE IN SHAPING THE OHIO WORKFORCE DEVELOPMENT LEGISLATION.

Although one of the charges of this project was to develop a piece of legislation for transportation reform,



our discussions with representatives of the County Commissioners Association of Ohio, the Ohio Human Service Directors Association, the Ohio Department of Transportation, and other state agencies indicate to us that there appears to be no desire for significant stand-alone transportation legislation. Primarily because the likelihood of passage of such a stand-alone bill is fairly low at this point, and because there is not at this point an organization prepared to carry it, it is our recommendation that the disability community instead pursue legislation that will be part of a larger initiative. Fortunately, it also appears that there will soon be a good opportunity to influence legislation that, as it happens, must be introduced and must be passed.

As mentioned earlier in this report, the Federal Workforce Investment Act of 1998 (WIA) will result in the coordination of most federally-funded job training programs. WIA requires that each state develop legislation to implement such coordination. As of January 1999, discussions related to the structure and some of the components of the bill were already well underway. (A committee of the Legislative Service Commission recommended that a single state agency unify the job training programs. The County Commissioners Association, among others, lobbied for local control in lieu of a topdown approach. The new Governor, although not yet committed to a specific approach, has already combined the Ohio Department of Human Services and the Ohio Bureau of Employment Services.) It is expected that a version of this legislation will be introduced early in the session and passed in mid 1999.

Just as the transportation component of H.B. 408 (including \$5 million per year for the biennium) was added relatively late in the process, so too can the inclusion of transportation as an important component of workforce development be promoted now by the disability and senior communities, perhaps with a much bigger impact than stand-alone legislation would have had.

 A work group should be formed immediately to try to influence the content of the upcoming workforce development legislation.

The ODDC, together with staff and consultants from this project, should approach the Statewide Transportation Coordination Task Force, Ohio Advocates Together, and other relevant organizations (such as the Ohio "[T]HE MAJORITY OF THE ENTRY-LEVEL JOBS THAT WELFARE RECIPIENTS AND THE POOR WOULD BE LIKELY TO FILL ARE LOCATED IN SUBURBS THAT HAVE LITTLE OR NO ACCESSIBILITY THROUGH EXISTING PUBLIC TRANS-PORTATION SYSTEMS."

"Welfare Reform: Transportation's Role in Moving From Welfare to Work," General Accounting Office Report, May 1998



Association of County Boards of MR/DD, the County Commissioners Association of Ohio, the Ohio Human Services Directors Association, the Statewide Independent Living Council, and the Ohio Public Transit Association) and propose to work jointly in an intensive but shortterm effort to develop a transportation component on behalf of the disability community that could be included in the workforce development legislation. The timing is such that an intelligent and coordinated approach can have a much greater impact in a much shorter amount of time than would normally be the case. Regardless of the outcome of this particular effort, this example is another good reason for developing a mechanism, as called for in the first recommendation, by which the disability community can take advantage of such unforeseen opportunities in the future.

 The disability community should support a legislative approach that would ensure greater local attention to transportation issues by funding staff positions under the county commissions.

As stated numerous times in this report, local coordination of transportation services is critical for persons with disabilities, particularly in the more rural counties. In those counties that have begun such coordination efforts, the lead agency varies greatly. In some counties, for instance, a senior center has taken the lead role; in others, the local department of human services or a county board of MR/DD. Clearly, restricting leadership for local coordination to a single agency is not the answer. Some agencies, in large part because of individual personalities and priorities, are simply more inclined to lead than are others. One county board of MR/DD, for instance, might provide the leadership in coordination whereas a county board in another region might want only to participate. Some locus of responsibility, however, is still needed (otherwise no one may pick up the ball). In addition, because so few counties have staff members who view transportation as the major focus of their jobs, there exists a greater need for local attention to the issue—even if coordination is seen as a good thing, someone still has to actually do it or to see that it gets done.

The most appropriate locus of responsibility in those instances would be the county commissions. Even now, the commissions, for the most part, apply for the Ohio Coordination Program grants, although they appoint

"WITH THE SPECIAL TANF ALLOCATION TO **COUNTIES FOR TRANS-**PORTATION AND THE MANDATE TO DEVELOP TRANSPORTATION PLANS, THE STATE TOOK A MAJOR STEP FORWARD IN **INCREASING A COUNTY'S** ABILITY TO ADDRESS TRANSPORTATION NEEDS. THE NEXT TARGET SHOULD BE KNOCKING DOWN THE **BARRIERS THAT PREVENT** PUBLIC AGENCIES FROM **COOPERATING WITH EACH** OTHER."

Director of a county department of human services



county agencies or local organizations to administer them. We propose that the commissions be given separate funding, through the workforce development legislation, to provide at least one full-time staff position per commission. This staff person's job would be to act as liaison to the county's various transit authorities and providers, agencies, and organizations in matters of local transportation coordination. Leadership by local agencies should continue to be encouraged. The role of this staff person would be to assist wherever possible or to provide leadership when it is lacking. Such an appropriation would "build in" local attention to the issue (including the attention of the county commissioners by moving the issue up their agenda), create a clear point of contact, and ensure a greater degree of consistency from county to county. The workforce development legislation should provide a good opportunity to accomplish this outcome.

Other recommendations, of course, could be made. There probably is not sufficient justification at this point, however, to consider consolidating transportation efforts under a single department (such as North Carolina and Iowa have done). Nor is there sufficient justification, in our view, for mandated transportation coordination at the local level—the momentum toward such coordination is already strong enough. And although other states have done some interesting things related to funding transportation (such as Pennsylvania, which allocates a significant share of lottery profits to the provision of transportation for seniors), what has been presented here seems the most likely to succeed in Ohio, at least in the next few years. Hopefully, greater attention to the issue will result in more ambitious ideas.

If the work of the Ohio Department of Transportation and at least some of the other state agencies is any indication, something of significance will occur in the transportation arena notwithstanding this paper or the degree of involvement of organizations such as the ODDC. If, however, the recommendations described here are seriously addressed, we believe that the results will be more profound. The importance of the issue in the lives of all Ohioans, including Ohioans with disabilities, certainly justifies the effort.



# EXECUTIVE SUMMARY

OF

# GETTING ON BOARD:

A Review of Transportation Options for Ohioans with Disabilities and Recommendations for Systems Change

The Final Report to the Ohio Pevelopmental Pisabilities Council on Grant Project 98-4, Transportation



**March 1999** 

## Prepared by

The Ohio Pevelopmental Disabilities Alliance (ODDASE) 197 East Broad Street, First Floor Columbus, OH 43215-3701 (614) 280-1223 Voice/TTY & (614) 280-1229 Fax oddase@ee.net

Michael J. Reardon, Pirector
and Transportation Project Associate

Pennis G. Frazier, Assistant Pirector
and Transportation Project Pirector

"The American concept of freedom is strongly tied to mobility."

- Administrator for an Ohio nonprofit disability organization



#### **OVERVIEW**

Transportation is not so much a disability issue that has implications for the general community as it is a general issue that has unique implications for the disability community. *Access* to transportation, on the other hand, is to some extent an issue of disability, but it is much more an issue of money (or lack thereof).

The principles that guided the development of our recommendations are based, in large part, on more general value statements previously adopted by the Ohio Developmental Disabilities Council (ODDC) and the disability advocacy community. These principles emphasize the use of generic transportation services to gain access to employment, housing, and other resources in the larger community.

#### THE CURRENT SITUATION

A host of state-level and local agencies are involved in the funding and provision of transportation.

PUBLIC TRANSPORTATION. The situation is improving to some extent in urban areas. Transit authorities and transit systems have quietly moved to comply with the Americans with Disabilities Act. Paratransit programs have been revised to meet ADA guidelines. But paratransit service cannot meet all the transportation needs of persons with disabilities. In addition, paratransit is a separate-but-equal solution that may unnecessarily perpetuate the "special" treatment of people with disabilities.

AGENCY TRANSPORTATION. Many social service agencies have developed their own transportation systems to serve their specific clientele. Eligibility criteria vary widely among these agencies, leaving large segments of the population unserved. These systems usually provide trips only to work placements or medical appointments.

MEDICAID-FUNDED TRANSPORTATION. Medicaid-funded transportation is simply existing transportation that is paid for with Medicaid money. It displays many of the shortcomings of the existing service, the most notable of which are restrictions placed on the purpose of a trip and limited eligibility.

**RECENT STATE AND LOCAL INITIATIVES.** Several recent cooperative efforts show great promise, including:

Local Coordination. The Ohio Department of Transportation's Office of Public Transportation has published a coordination handbook and a companion volume of best practices. ODOT continues to fund coordination projects, sponsors monthly coordination roundtable meetings, and has conducted several Ohio Coordination Conferences.

**State-Level Coordination.** The Statewide Transportation Coordination Task Force, formed in 1996, studies policies of state-level agencies and seeks to eliminate barriers posed by out-to-date or incorrectly perceived regulations.

Ohio Works First. Transportation provisions that are being added to welfare reform legislation may benefit Ohioans with disabilities even though they, as a group, are not directly targeted.

Workforce Development. The federal Workforce Investment Act of 1998 (WIA) requires states to implement coordination of most federally-funded job training programs. Even if individuals with disabilities are not targeted by this legislation, they can still benefit by increased attention paid to coordinated transportation.



RECENT FEDERAL INITIATIVES. Although they have a less direct impact on Ohioans with disabilities, federal legislation, appropriations, and policies that support and encourage local coordination and innovation are critical.

**ISTEA/TEA-21.** Several important provisions contained in Section 3000 of the Transportation Equity Act for the 21st Century (TEA-21) are relevant to people with disabilities. In general, TEA-21 does much to promote state and local partnerships, innovative practices, and relatively stable transit funding.

Over-The-Road Bus (OTRB) Regulations. The U.S. Department of Transportation recently adopted rules requiring every new OTRB (such as Greyhound uses) to be equipped for wheelchair-accessibility. Although retrofitting is not required, all OTRB fleets (with a few exceptions) must be accessible within twelve years.

ADVOCACY AND THE USER PERSPECTIVE. Equally important to meaningful change is the existence of a strong advocacy and user movement.

Disability Advocacy Groups. The lack of transportation is the most often cited barrier to independent living for people with disabilities and seniors, and many advocacy organizations rate transportation high among their priorities. Yet no single advocacy organization in Ohio focuses *primarily* on transportation nor is able to maintain *ongoing* and *consistent* contact with policymakers. And advocates generally do not collaborate on any single issue, including transportation.

Individual Users. Transportation users with disabilities have many different, and sometimes conflicting, feelings and ideas about transportation services.

#### **CONCLUSIONS**

- Transportation continues to be an issue of vital importance for people with disabilities, especially as they take their rightful place in their communities. The lack of affordable, reliable transportation accounts for many of the "failures" of community-based services. Even for individuals who do live in the community, transportation can mean the difference between participation and isolation. Although many counties still provide segregated transportation services, others are considering a wide range of options.
- There is a lot going on of value in the transportation arena at all levels. Transportation is increasingly seen as critical to the success of many federal, state, and local efforts to increase employment and reduce dependency on government programs. Although most transportation-related activities are not directed at people with disabilities, they do not exclude them either, and the potential benefit for the disability community is great.
- Many of the recent federal and state initiatives related to transportation will benefit people with disabilities, particularly if advocates are involved in the implementation. Because transportation is a critical need for so many people, a host of organizations, most of which have little to do with disability-related matters, are already working on this issue. (The most progressive transportation initiatives over the last few years, in fact, have generally come from within, rather than outside, the service system.) Although some groups have more to contribute initially, all groups that have a stake in transportation need to be involved in transportation-related matters.
- The disability advocacy movement in Ohio is not particularly well organized or funded and cannot at this time provide ongoing, meaningful input on transportation issues.
   No single advocacy organization in Ohio currently has the capacity to have a significant impact on legislation and policy. Such efforts need to be shared.



• The current political situation in Ohio presents both opportunities and limitations to significant change. Legislation that is not expressly intended to improve transportation for persons with disabilities will provide the best opportunity to advocate for such improvements. So it is critical to act now to stake a place on the gubernatorial agenda.

#### RECOMMENDATIONS

These recommendations (1) are process-oriented rather than content-oriented, (2) are purposefully limited in number, and (3) indicate which organizations would be the most appropriately involved in addressing them.

- 1. THE DISABILITY COMMUNITY NEEDS TO MAINTAIN AN ACTIVE INVOLVEMENT IN TRANSPORTATION ISSUES AS A "HANGER ON."
  - Disability groups, for the most part, will not be a driving force for change but can play a valuable "me, too!" role. It is important for the disability community (1) to maintain a presence in efforts to make transportation more accessible and (2) to forge alliances with those groups that will be more involved in the development and monitoring of transportation policy.
  - The Ohio Developmental Disabilities Council (ODDC) should devote staff time, and possibly funding, to this function. The ODDC, because of its unique role as representative of many different perspectives and experiences and because of the resources at its disposal, is in a position to serve as a resource for policymakers to draw on in the development of transportation policy.
  - The ODDC should devote some resources toward public awareness of transportation. The ODDC could provide funds, possibly on a matching basis, for public awareness efforts such as brochures, PSAs, and press releases.
  - The ODDC and other agencies should support, with both money and staff time, the efforts of advocacy organizations that are attempting to influence transportation policy on behalf of people with disabilities. A consortium of advocacy organizations is currently being formed in Ohio. Support for this Ohio consortium, or for any other viable collaboration or coalition, should come from appropriate organizations and agencies, such as the ODDC, and from private corporations and foundations.
- 2. THE ODDC SHOULD ADHERE TO AND PROMOTE THE FOLLOWING PRINCIPLES IN ALL COUNCIL LITERATURE AND ACTIVITIES RELATED TO TRANSPORTATION:
  - JUST AS COMMUNITY LIFE AND EMPLOYMENT ARE PREFERABLE TO SEGREGATED LIVING AND WORK OPTIONS, SO ARE GENERIC PUBLIC TRANSPORTATION SERVICES PREFERABLE TO SPECIALIZED SERVICES.
  - TRANSPORTATION SHOULD PROVIDE INCREASED ACCESS FOR ALL ASPECTS OF A PERSON'S LIFE—SOCIAL AS WELL AS EMPLOYMENT-RELATED OR MEDICAL.
  - EFFORTS TO EXPAND THE AVAILABILITY, ACCESSIBILITY, AND AFFORDABILITY OF TRANSPORTATION SERVICES SHOULD CUT ACROSS AGE AND DISABILITY BOUNDARIES AND SHOULD FIND COMMONALITY WITH NON-DISABILITY-SPECIFIC GROUPS, SUCH AS PERSONS OF LOWER INCOME.
  - USER INPUT INTO THE DEVELOPMENT AND MAINTENANCE OF TRANSPORTATION SERVICES, INCLUDING THE DEVELOPMENT OF RULES AND REGULATIONS, SHOULD BE INCREASED.



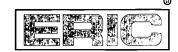
- 3. FUNDS SHOULD BE INCREASED FOR LOCAL COORDINATION EFFORTS.
  - The budget for the Ohio Coordination Program of the Ohio Department of Transportation's Office of Public Transportation should be increased. There needs to be a substantial increase both in the amount of funding awarded to counties and in the number of ODOT staff members to assist counties in local coordination efforts.
  - Other state-level entities should be encouraged to pool resources, especially for demonstration projects. Each of the state agencies on the Statewide Transportation Coordination Task Force in particular should recognize the need to work across age, disability, and income boundaries and "ante up" in a cross-disciplinary effort. If there is a single issue that cuts across all service areas, it is clearly transportation.
- 4. THE STATEWIDE TRANSPORTATION COORDINATION TASK FORCE SHOULD BE FORMALIZED AND EXPANDED. The Task Force is currently a voluntary association. An interagency agreement signed by the directors of each of the state agencies would provide this group with a greater degree of attention and clout.
  - The Task Force should include user representation. At least two user representatives should be added—one from the disability community and one from the aging community. Each user representative on the Task Force should (1) provide input from the perspective of someone who actually uses the services and (2) act as a conduit for information to advocacy organizations.
  - The Task Force should consider convening a state-level advisory committee on transportation issues. Once the Task Force is more formalized, an advisory committee should be created to provide a sounding board for the Task Force on specific proposals it has developed, to bring proposals to the Task Force that committee members would like to see addressed, and to act as the first step in information dissemination.
  - Each agency of the Task Force should have a written transportation policy that accords to a joint vision; each should devote at least one full-time staff person to the effort. General principles—such as the ones listed in the second recommendation—should be adopted, as well as a number of objectives for the coming year or biennium. Each agency should invest at least one full-time staff position with responsibilities solely related to transportation.
- 5. THE DISABILITY COMMUNITY SHOULD ACTIVELY PARTICIPATE IN SHAPING THE OHIO WORKFORCE DEVELOPMENT LEGISLATION.
  - A work group should be formed immediately to try to influence the content of the upcoming workforce development legislation. The ODDC, together with its Transportation Project grantees, should join with other relevant organizations in drafting, on behalf of the disability community, a transportation component for the state legislation that is required by the Workforce Investment Act of 1998 (WIA) to implement the coordination of most federally-funded job training programs.
  - The disability community should support a legislative approach that would ensure greater local attention to transportation issues by funding staff positions under the county commissions. Each county commission should be given separate funding, through the workforce development legislation, for at least one full-time staff person to act as liaison in matters of local transportation coordination, to assist other local agencies wherever possible, and to provide leadership when it is lacking.





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