GETTING IN, OUT AND AROUND:
OVERCOMING TRANSPORATION BARRIERS TO COMMUNITY INTEGRATION

a brief guide to public transportation and private mobility
policies, programs, and practices
that impact the lives of individuals with psychiatric disabilities

from the
Temple University Collaborative on Community Inclusion
Of Individuals with Psychiatric Disabilities

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March 2012

The contents of this Informational Resource Guide were
developed under a grant from the Department of Education,
NIDRR grant number H133B080029 (Salzer, PI). However, those
contents do not necessarily represent the policy of the
Department of Education, and do not imply endorsement by the
Federal Government
Introduction

As mental health systems work toward the promise of community integration – that is, of helping people with psychiatric disabilities to participate in community life like everyone else - they increasingly recognize that they must also address transportation issues. Community integration is not only about where someone lives, but also about his or her relationship with and participation in the surrounding community. But, without a way to get around – to get to the grocery store or the diner, to plan an evening at the movies or with a friend, or to show up at work or school on time - people can become and then remain isolated. It really doesn’t matter whether someone lives in urban, suburban, or rural communities: meaningful community integration depends upon insuring that transportation that helps people get in, out of and around their community is both affordable and available.

Unfortunately, for many people with psychiatric disabilities transportation remains an obstacle to community integration. The problems are familiar ones: those living with psychiatric disabilities are often getting by on very limited incomes, which means both that owning and operating a car may be well beyond their financial means, and that using public transportation can offer similar budget challenges. Some individuals living in mental health residences or participating in treatment, rehabilitation, or social programs in the day may rely on agency vans to get to and from services, but this often limits the individual to group activities and limits opportunities in other life domains. In many suburban and rural communities, public transportation options are non-existent or severely limited, and specialized transportation for people with disabilities may be in short supply as well.

This monograph is designed to provide a brief overview of these issues and to suggest an array of supports and services that can help individuals with psychiatric disabilities overcome transportation barriers to their full participation in community life. The monograph tries to address three types of concerns:

. first, what public policies should consumers and providers unite around?
. second, what programs can mental health provider agencies (including consumer-operated programs) put into place? and,
. third, what can consumers themselves do to overcome these persistent barriers?

We look at transportation issues in two ways in this monograph. The first section discusses a wide array of challenges, responses, and program models that focus on making better use of public transportation resources in our communities. The second section raises the same questions around various forms of independent mobility – of getting in, out, and around on your own - along with some interesting models of policy, program, and practice initiatives.

Solving transportation issues is not easy: every community has special problems and each individual with psychiatric disabilities requires individualized problem-solving. But transportation is an issue that consumer, peer-counselors, rehabilitation practitioners, community mental health programs, and public transportation agencies can solve with a strong and unwavering commitment to community integration.
PUBLIC TRANSPORATION

Public Policy

Public transportation is key for many individuals with psychiatric disabilities. Limited incomes make owning and operating a car unrealistic for many, and the transportation systems operated by some mental health agencies have a very limited ability to meet the individual community integration needs of consumers. The challenge here is for consumer advocacy groups and mental health providers to work with public transportation agencies to insure that existing systems are more affordable, accessible, and amenable to the individual needs of individual consumers. Let’s look at a few of the key issues here.

Access.

**Barriers:** Public transportation systems can be confusing and sometimes frightening, particularly for individuals who are not used to getting around on their own. If you have ever moved to a new area, you know how challenging it can be to figure out how to use a public transportation system, and the ability of individuals with mental illnesses to use public transportation may be further hampered by phobias, panic attacks, anxiety, or other psychiatric symptoms. Unfamiliarity with routes, schedules, and transfers further exacerbate these problems.

**Supports:** Public transportation systems can be encouraged – by consumer groups and mental health agencies – to offer more support to people with psychiatric disabilities, in several ways: a) routes and schedules can be reviewed to make sure, as much as possible, that public transportation goes where people with psychiatric disabilities need it to go; b) fare-takers and bus drivers can be trained to provide more understanding support to new riders who may have psychiatric disabilities; and c) and public systems can offer training to volunteers who can accompany an individual unfamiliar with public transportation or a particular route, a role that peer specialists, recovery coaches, and caseworkers can also play.

Awareness.

**Barriers:** Many individuals may not be used to using public transportation and therefore may not be aware that schedules and help are usually available at transportation centers and train stations. In many areas, information about public transportation is not well publicized. While much information and even schedules are often available on the internet, many individuals do not have easy access to a computer. Some may have never used the internet. Also, announcements about public events – concerts in the park or sporting events or civic meetings – may not include public transportation information.
**Supports**: Better publicity about public transportation would greatly help. Helping individuals get schedules and information would help many. Making individuals aware that most public libraries have computers with internet access and even free classes to learn how to use the internet would make information and schedules more accessible. Public transportation agencies might be pressed to develop outreach programs to community mental health centers (or other disability-specific agencies) to increase overall awareness of how public transportation systems can be used.

**Costs.**

**Barriers**: Rising costs have resulted in increased bus, train, and subway fares, resulting in some individuals not being able to afford these forms of transportation. While some transportation agencies have reduced fares for individuals on disability, in many cases these are not well publicized. Some individuals with mental health challenges may not be on disability, and therefore are not eligible for such reduced fares.

**Supports**: More funding for public transportation would help minimize fare increases. Although some transportation agencies have reduced fares for individuals with disabilities, more widespread practice of this would make public transportation affordable, and better publicity of these reduced fares would benefit many. Mental health (and other disability) advocacy groups can press public transportation agencies to provide reduced fares and easier access to reduced fare programs.

**Expanding Rural Systems**

**Barriers**: Living in most urban areas tends to give individuals greater access to buses, trains, and subway; however, individuals living in rural areas often have a difficult time finding access to comparable public transportation services. This gives them fewer opportunities to leave their homes and become active members of their communities. According to the Rural Assistance Center, 40% of rural residents live in areas with no public transportation while 28% live in areas with limited levels of service. One reason for this discrepancy is the fact that Federal funding for transportation services in rural areas is significantly less than for urban areas.

**Supports**: More funding for even limited public transportation in most rural areas would benefit many individuals living there. More widespread use of public transportation in rural areas would generate revenue and possibly lead to more routes. The increased revenue would help minimize fare increases, thereby making public transportation more affordable to many.

**Agency-Based Public Transportation Initiatives**

In addition to playing an advocacy role to increase the access, awareness, and availability of public transportation systems, community mental health agencies – both traditional programs and consumer operated services – can establish their own ‘transportation programs’ to help consumers learn to utilize systems in their own communities in ways that promote community integration. Think about the following list of options:
. Make sure your agency has access to public transportation voucher systems so that you can offer them to the consumers with whom you work.

. Better publicize public transportation availability to the individuals in your agency: this could be accomplished through seminars and special training programs, or having one person on staff identified (and trained) to offer public transportation assistance to consumers of your services – with a particular emphasis on helping people participate in community activities.

. Promote the buddy system: consider having a list of individuals who could serve as public transportation buddies, whether volunteers from the community or other peers who would like to help out: having a defined ‘public transportation buddy system’ is a valuable role for volunteer consumers and be a trusted resource for those who use the service before becoming ‘buddies’ themselves.

. Mental health agencies can take on the responsibility of training for all public transportation employees to make them more aware of the needs of individuals with psychiatric disabilities, using the existing guidelines from the American Public Transportation Association – APTA .

. Create your agency’s own comprehensive public awareness and training program to help individuals learn how to ride the bus, train, and subway system through seminars and presentations. Transportation services should offer one-on-one trip planning services to travelers who may be unsure how to use transportation services. These programs can assist individuals with psychiatric disabilities in navigating transportation systems.

. Accommodate individual needs: Individuals with psychiatric disabilities may be interested in travelling distances outside the normal range of their transportation system, and in order to provide services to this population, regional transportation programs may want to work together and form partnerships to improve the availability of services to destinations outside of the immediate area.

Public Transportation Tips for Consumers

. Consider trying the buddy system
. Develop several supporters for the buddy system
. Get information, county and city maps, etc. at the customer service center of your public transportation agency
. Do a “dry run” before very important first time appointments ( e.g. doctor appointments or job interviews )
. Ask your peer specialist, case manager, recovery coach, residential counselor, etc. to help you with public transportation trips, as well as trip planning, obtaining and interpreting schedules, getting maps, etc.
. Plan your trip
. Ride specific routes
. Read and understand route maps and schedules
. Practice getting to and from your bus stop, train station, and subway station
. Practice recognizing bus stops, bus numbers, and landmarks
. Consider purchasing transportation passes
. Look into discounted fares and passes for people on disability
. Know how and where to transfer to other buses, trains, and subways
. Know who to ask for help
. Learn to travel independently and confidently by bus, train or subway

Innovation Public Transportation Programs

New Foundation Center. New Foundation Center, a psychiatric rehabilitation agency located in Chicago’s northern suburbs, has implemented a community-oriented group that rides together and learns about public transportation within the region. Each quarter a new 12-week segment of the group starts/ends. At the beginning of the quarter, members are asked to decide on places they have an interest in learning how to travel to on the buses. A list is developed and then staff helps members figure out routes to travel to those destinations from the main agency location. Then the bus schedules are consulted and the group leaves together at 10:00 AM every Tuesday. The round-trip destination and return has to be completed within 2 hours, or 3 if it’s a special occasion, because members have other group activities/commitments to be back for. Only driving rain or lightning stops the group from going out. For more information on this program please visit http://www.wilpower.org/aboutus.php.

Onondaga Case Management. Onondaga Case Management, a small non-profit agency in New York, offers a bus training program for individuals with psychiatric disabilities. It is a very intensive, one-on-one endeavor, meant to help individuals learn skills to cope with whatever anxiety they may have related to taking the bus. The purpose of the program is to help people learn how to ride fixed route buses with the idea that this will allow them to be more active and integrated in the community, and everyone who works in the has experienced a psychiatric disability. For more information regarding this program please visit http://www.ocmsinc.com/.

Intercity Transit. Intercity Transit in Olympia, Washington provides a self-paced bus travel training program for anyone who wants to learn how to use the bus system, including individuals with psychiatric disabilities. Participants work with a trainer who will help them find solutions that fit their situation, suit their abilities, and meet their needs. Each training program is individually tailored to individual consumer needs and will help consumers learn how to plan trips, ride specific routes, read and understand route maps and schedules, recognize bus numbers, bus stops, and landmarks, locate and transfer to other buses, and ultimately travel independently and confidently by bus. For more information regarding this program please visit http://www.intercitytransit.com/Pages/default.asp.

INDEPENDENT MOBILITY

Independent mobility – getting in, out, and around independently - is the ultimate goal for many individuals with psychiatric disabilities. We have already outlined the many challenges that relying on
public transportation can pose. For many individuals, buying and maintaining a used car is the ultimate goal. However, the costs associated with a car can be prohibitive for many. This is where help in finding and keeping a job can help many people attain that goal. However, other independent mobility options like provider vans, car pooling, and ride-sharing are alternatives to relying on public transportation.

Five Options

**Using The Agency Van:** Many community mental health programs have their own vans that are used for group trips to various places – shopping, doctor’s appointments, ballgames, etc. While the agency van often cannot accommodate individual needs and are often very conspicuous and stigmatizing (making many individuals uncomfortable and therefore reluctant to use such vans), there are ways to make sure the van meets rather than frustrates consumer goals of community integration. Individuals with psychiatric disabilities and other advocates can effectively present service providers with their first-hand experiences and frustrations with not being able to go to work, school, doctor’s appointments, the grocery store, religious services, visit friends and family, and meet other needs associated with leading an active life. Working with the agency to revise the rules, change schedules, or shift from larger vans to individual cars as a way to meet consumer needs are all viable options in most settings.

**Developing a Personal Support Network:** Casemanagers, peer specialists, and volunteers can often help consumers with psychiatric disabilities to create a Personal Support Network that is specifically focused on transportation. This may include enlisting family members, friends, neighbors, co-workers, other consumers who have their own car, and paid personal assistants to help with transportation to work, school, doctor’s appointments, the grocery store, religious services, visits with family and friends, or other community activities. By creating a network of individuals who may provide transportation help and support, individuals with psychiatric disabilities will not become completely dependent on one person, enabling them to have a back-up in case the primary support is unable to provide them with transportation. In a Wellness Recovery Action Plan (W.R.A.P.), a person is recommended to have several supporters for a wide variety of support needs, and the individual’s transportation needs ought to be one such area.

**Structuring Ride Sharing Options:** Everything about getting around on one’s own seems to cost money: owning and operating one’s own car can be prohibitive for an individual on a limited income; human services agencies are not in the primary business of providing transportation and often lack the financial infrastructure to effectively move people around; volunteer drivers are finding it too expensive to continue driving individuals to activities in the community. However, individuals with psychiatric disabilities can find Ride-Sharing Options: ride-sharing often involves locating other individuals with similar interests and needs with whom the individual can ride. In some cases, it might also be helpful to create an agreement regarding reimbursement for transportation expenses including mileage, gas, tolls, etc. But consumers often have special skills (e.g., lawn mowing, computer repair, pastry baking, etc.) that they can barter for help with transportation. And ride-sharing is also environmentally friendly!

**Establishing Transportation Cooperatives:** Transportation cooperatives take advantage of all available vehicles in a community, linking transportation resources in varied human services agencies in order to
maximize a community’s ability to assist persons with and without disabilities who do not have readily available transportation. A number of cities and communities have centralized transportation co-ops, with one agency serving as the coordinator and/or dispatcher. Cost to the rider can be negotiated, based on normal costs plus charges for travel from the regular route to the rider’s homes, needed assistance, and other factors. Agency and residential program vans could be used for social events, shopping, and other non-medical trips. This can be a particularly important option for consumer-run programs, linking them to other resources in their communities. To learn more about access to transportation within rural areas and communities, visit http://rtc.ruralinstitute.umt.edu

Starting Car Ownership Programs: A few agencies have begun to focus on helping consumers to both get a driver’s license (which gives them access to family or friends cars) and purchase and maintain their own car. Helping people to find, enter, and pass driver’s classes in the community (these are often offered in high schools and community centers) and obtaining a driver’s license can be quite a personal and liberating achievement, particularly in suburban and rural communities. And, with a license consumers then find it possible to rent cars for special events or join the increasing number of ‘car share’ programs that give everyone access to a car exactly when they need it. Helping consumers to get the license and then plan their strategy for getting behind the wheel is an important activity for both traditional and consumer-operated programs interested in community integration. Further, actually owning and operating your own car is a useful, if expensive, next step. “Wheels for Work” is a transportation / employment program funded by the Federal Transit Administration, often locally administered through agencies such as Goodwill and Family Service agencies, and focused on car ownership for people who need a car to get to work. In some cases, donated vehicles are given to those in need who qualify. In other cases individuals are given money to buy used vehicles or given low interest loans. Those who qualify must prove they don’t already own a vehicle, and must also prove they have a safe driving record. Many agencies also offer classes in financial management and car care.

Ideas / Tips for Agencies

- Employing volunteers to offer free or low cost rides: using liability waivers to deal with possible liability issues.
- Using mental health block grant funds to finance various peer-run transportation programs.
- Requesting donations of used vehicles to provide a means of transportation to those with limited income; make sure this program is well publicized, and mention the possible tax breaks it would offer.
- Promoting programs like Compeer that can provide transportation, including use of the buddy system.
- Encouraging and even requiring agencies and residential programs to use their vans and cars more.
- Establishing more “Alumni Programs” that can offer transportation: e.g., in the Philadelphia area, there is a residential program called Circle Lodge that has an
alumni program for past residents that offers transportation and even help with moves to new housing.

- Having providers help consumers more with vocational training, job coaching, and help finding jobs. This would help individuals afford to purchase and maintain cars, as well as the cost of public transportation.

Tips For Consumers

- Encourage your agency or residential program to use their vans and cars more, and to get more input from individuals about where and when they would like to go to various places. Contact your county mental health office and have them contact the agency or residential program directly about using their vehicles more. Let your county mental health office know you would like increased funding for these transportation programs. Make sure funding for these transportation programs is a priority in your county mental health office’s annual plan. Attend focus groups your county mental health office may offer on the year’s annual mental health plan, and make sure your voice is heard.
- Join organizations like Compeer that provide transportation, and use the buddy system.
- Encourage residential programs that you may have been a part of, and ask them to start an alumni program for former residents, that would include a transportation component. Most such residential programs already have vehicles that they could use.
- Consider working part-time. This will increase your income, and possibly enable you to purchase a used car, as well as give you more income for public transportation. If necessary, get vocational training, job coaching, or further education. This will make you more employable, give you a higher salary, and help you establish a career.
- Many consumers would like to date and have a more active social life. Getting a car makes this much easier and greatly enhances that aspect of community integration.
- Give paid rides to individuals needing a ride. This can benefit both parties.

Innovative Programs

New Foundation Center Thresholds

Thresholds is Illinois’ oldest and largest provider of services to people living with severe mental illness. Several years ago, Thresholds started a Bike and Walking Club for their members. These forms of active transportation have made it more affordable and healthy for persons in recovery from mental illness to attend community activities, work, school, etc. In addition to providing members with walking shoes, bikes, bike helmets and bike locks, Thresholds also provides them with education around physical health and bicycle safety. The “Getting Started with Exercise
Class” has been taught by a University of Illinois at Chicago Nurse Practitioner. In addition, the City of Chicago’s Dept. of Transportation has a ‘Safe Bicycling in Chicago’ manual that is used as part of bicycle safety instruction. For more information regarding this program please visit www.thresholds.org or contact Ronald Otto (see contact information at end of document).

Riverbank Transportation

Riverbank Transportation (in Burlington County, New Jersey) is a consumer operated transportation service enabling mental health consumers who lack transportation to return to work. In operation since 2003, this service not only provides the needed transportation to consumers who otherwise could not get to work, but also enables the dispatcher and drivers to be ‘consumer providers’ of care. Consumers are transported each week to work at 11 different geographic locations in Burlington County, NJ. The service operates 7 days each week, employing 3 drivers who work a total of 75 hours, and a dispatcher who works 10 hours a week, creating the schedule and being available to the drivers, as well as the customers they transport.

Daymark Recovery Services

Daymark Recovery Services in Lexington, NC has implemented a Motivational Incentive for Transportation Program. Vouchers in the form of gas cards successfully address both the problem of transportation as a barrier to treatment and provide a motivational incentive to those clients with transportation to pick up clients without such resources. Daymark program allows funding for 30 clients (approximately one in every other group) a week to be paid $5.00 for bringing 1-2 clients to those 30 sessions for 50 weeks. Thus a minimum of 30 (up to a maximum of 60 clients) could receive services weekly that might otherwise be unavailable due to transportation problems. That is 1,500 sessions minimally and up to 3,000 group therapy sessions (if each paid client brought two clients) annually that clients have the support to attend. For more information on this program please visit http://www.daymarkrecovery.org/index.html

Community integration, transportation, and mental health recovery are all inter-related topics. Transportation need not be a barrier to community integration and participation for individuals with mental illnesses. Programs such as the ones mentioned above and other innovative solutions help break down the barriers facing individuals with psychiatric disabilities and focus on integrating them into the community through the use of public transportation, utilization of provider vans, and other independent mobility solutions. By overcoming the barriers to transportation and providing the right supports, much progress can be made. It is important that public transportation systems, mental health agencies, and consumers recognize the transportation problems that individuals with psychiatric disabilities face and give the development of solutions to these problems a high priority, so that individuals can remain active, independent members of society.