For older adults and people with disabilities, transportation is essential to quality of life. Rides to doctor’s appointments, grocery shopping and social activities can help people stay healthy, independent and engaged in community living. Most NADTC grantees found outreach and engagement of older adults and people with disabilities to be critical to their success in developing community innovations. Grantees also emphasized the importance of building trust among riders, communities and partners, and valued outreach as a way to raise awareness and increase support for new transportation services.

Barriers to trust that affect ridership are numerous and often unpredictable. Riders may have overarching concerns: fear of seeking health care assistance, pride within an independent community, or prior negative experiences with organizations claiming to help yet failing to do so. Riders may have felt left out of the process or consider the transportation options available not to be a good fit for their needs. Riders may also be reluctant to give up their existing ride arrangements for a new program that seems temporary. Organizations may have difficulty trusting potential partners out of concern for their existing riders.

Overall, NADTC grantees found solutions to these challenges. The practices described below present innovations in inclusive planning, accommodating various abilities in focus groups, engaging partners and volunteers to help reach certain populations, and using outreach to identify specific needs. Included are ideas on how to build trust with riders in hard-to-reach communities and within a corporate culture.

### Inclusive Planning

An effective way to build support for your program from the beginning is with inclusive planning. Inviting older adults and people with disabilities to play a role in the creation of your program helps to ensure that the transportation services under development will meet their needs. Focus groups also provide an opportunity to meet potential riders and engage them in spreading news of the program.

**Easterseals DC/MD/VA** provides an example of how to conduct inclusive planning. The project’s goal was to plan for development of a mobile app for users of the Washington Metropolitan Area Transit Authority’s (WMATA) MetroAccess, the paratransit service for riders in the Washington, DC, area. The app would let older adults and people with disabilities know when their transportation would arrive, helping them to better plan their day and be more independent.

Easterseals convened a working group primarily comprised of older adults and people with a wide range of disabilities. This group worked together to identify transportation needs and preferences, ensuring that the final product was accessible and tailored to the needs of the target population.

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This best practice is based on the experiences of grant programs funded by the National Aging and Disability Transportation Center (NADTC) from 2017 to 2019 to support innovative programs to increase the accessibility of community transportation services for people with disabilities and older adults.
of disabilities. Also included were regional government employees, paratransit experts, mobile-app developers and WMATA MetroAccess employees. Approximately 30 group members met monthly for four months. By talking to the people who would be using the app first, before coming up with solutions, the group was able to develop plans for an app that would truly meet riders’ needs. Easterseals also found that keeping group members focused on solutions and giving them specific tasks, such as asking them to narrow down a list of functions for the app, engaged them in the project. While the app has not yet been funded, MetroAccess now has a solid template with which to proceed.

Ensuring Full Participation in Planning

An important part of inclusive planning is making sure that all participants are able to fully participate. Organizations conducting transportation planning may need effective ways to accommodate different types of disabilities in focus groups. Here are two examples.

- **Engaging people with different disabilities.** In researching whether various forms of alternative mobility (such as bicycles) are feasible options for older adults, people with disabilities and veterans, Shared Mobility Inc. (SMI) partnered with the University at Buffalo’s Center for Inclusive Design and Environmental Access (IDeA Center). Together, they hosted focus groups for nearly 40 participants and collaborated on the research findings. Rather than bringing people with various disabilities and life experiences together in one group, they convened small, more homogeneous groups, each representing a different type of disability, then rotated each group among three rooms with different topics—ride sharing, car sharing and bike sharing—to ask participants to identify the challenges they had encountered and what prevented them from using the various services.

- **Engaging partners and volunteers to help reach certain populations.** Two grantees engaged people with disabilities to help create research instruments. The Sanford Center for Aging at the University of Nevada, Reno wanted to increase transportation and mobility options in the Reno/Sparks area to ensure more opportunities for social engagement. They engaged people with disabilities and older adults, as well as members of the transportation, aging, and disability service provider networks, in developing an online and paper survey. One partner organization—a support group for people with visual impairments at the Nevada Center for Independent Living—helped create an online survey design that was easy to navigate on a smartphone for people with visual impairments. This partnership enabled the Sanford Center to obtain needed input from people with vision loss to ensure that the transportation services being planned would meet the needs of everyone.

To gain a deeper understanding of the needs and wants of potential users as they considered expanding service hours, 3P Ride in York, PA, prepared to conduct six focus groups by connecting with local community groups to find people who were already invested in the issues. Doing so brought highly engaged volunteers—a person in a wheelchair led one focus group, and a couple with vision loss translated focus group questions into Braille. 3P Ride felt that giving ownership to people who had already shown interest in transportation issues, and practicing active listening, yielded real conversations and much needed input.

Using Outreach to Identify Specific Needs

Focus groups and surveys conducted by the Piedmont Triad Regional Council Area Agency on Aging (PTRC) in rural North Carolina pointed to specific barriers that hindered transportation after hospital discharges. PTRC sought to enable recovering patients to pick up prescriptions and groceries and keep follow-up doctor’s appointments. Older adults, people with disabilities and caregivers were included at every stage of the planning process. They served on the planning committee, participated in focus groups, and completed and helped administer surveys. Many community partners also participated, including the Department of Social Services, county officials, emergency medical services, faith organizations, a disability advocacy organization, transportation providers, hospitals, mental health providers, a veterans’ organization, senior centers, human services organizations and others.

PTRC set up an online portal that potential respondents could use to complete the survey and provided a dedicated call-in line where older adults and people with disabilities could share their thoughts about community transportation needs. These efforts paid off. PTRC learned
that lack of money for bus fare or gas, fear of riding the bus and missing the stop, fear for safety, bad weather, inability to wait a long time for the bus to come, and reluctance to ask family members to take time off work were key barriers. This process shows how thorough and inclusive outreach can inform the design of transportation programs. PTRC continues to seek funding to increase community transportation options to address these needs.

Building Trust with Riders

To embrace a transportation program, riders must trust the provider. Sometimes that trust is built on personal choices, such as not wanting to ride in a stranger’s car. Yet, in some instances cultural considerations and past experiences affect the trust level of an entire community. Here are some examples—and ways to build trust that address cultural concerns.

- **Addressing mistrust and fear.** For Mountain Empire Older Citizens (MEOC) in southwestern Virginia, pride was a barrier to transportation. In remote Appalachian coal-mining communities, people had worked hard all their lives and had seen their fair share of broken promises from government agencies. Asking for help felt culturally difficult to many area older adults and people with disabilities.

  As the public transit provider and Area Agency on Aging, MEOC wanted to provide both rides and at-home support to local older adults and people with disabilities who needed dialysis and treatment for chronic conditions at medical centers located up to 75 miles away. MEOC addressed this challenge by adding a Care Coordinator to its existing transportation call center. The Care Coordinator not only works with a Mobility Manager to arrange rides through an existing transportation service, but also adds a human touch. After conducting a needs assessment, the Care Coordinator connects each rider with a local volunteer from a pool of approximately 35 volunteers who have completed a four-hour training at MEOC. The volunteer accompanies the rider to medical appointments, then continues to check on the rider for the week or month of their volunteer stint to make sure the rider’s basic needs, such as food and medication, are met.

  This additional social engagement and support has made riders more likely to keep medical appointments and has improved the curve of decline. Because the program linked neighbors to neighbors, it built personal relationships that eased the dynamics of asking for a ride and other needed support.

- **Language is critical.** Capacity Builders Inc. (CBI), which connects older adults and people with disabilities living in the Navajo Nation in remote New Mexico, faced similar challenges. Distances are vast, with a food pantry and services in the nearest town up to 70 miles away, and the Navajo often do not trust entities outside the Tribe.

  To fill transportation gaps, CBI formed the Northwest New Mexico Transportation Alliance, made up of four older adults, four people with disabilities and four community representatives, to create a needs assessment and strategy. Thanks to a 20-year history of working in the area, CBI already had longstanding relationships with the Navajo Nation, which helped ensure that Tribal members were included in the Alliance. To gain further input on transportation needs, CBI visited chapter houses and community gatherings along with a Navajo interpreter. Once an interpreter became an integral part of the team, meetings on the Navajo Nation proceeded smoothly and more attendees completed surveys than had been completed without the interpreter.

- **Time needed to build relationships.** The Cancer Justice Network (CJN) in Cincinnati, Ohio, connects people with low incomes and minorities with cancer screenings and treatment. Yet the first step is to address clients’ fear of health care, which is often prompted by a lifetime without health care access and, in some cases, with negative experiences around emergency room visits. As a result, members of the population often are suspicious of authority figures, and this distrust extends to CJN’s volunteer navigators, who apprentice with CJN and meet clients at area churches and community dinners. Navigators undertake the long process of building relationships with clients, talking with them about kids and grandkids and the Cincinnati Reds—the local baseball team—before broaching the subject of trips to the doctor.

  CJN also provided an easy first step into health care: trips to the dentist and eye doctor. Many clients had never been to the dentist before and welcomed the opportunity. Over time, clients warm to the idea
of receiving cancer screenings. Only after building relationships do navigators accompany older adults and people with disabilities to health screenings and treatment. Transportation is provided through a partnership between CJN and the Cincinnati Area Senior Services, which has a wheelchair-accessible van.

Empowering riders. 3P Ride’s engagement with riders grew out of a culture created by the local transportation authority. For many years, the Central Pennsylvania Transportation Authority (CPTA) supported a venue for riders to discuss barriers experienced through riding public transportation. Riders came onsite to the CPTA location and had the opportunity to present challenges and complaints in a public process that typically generated low participation. Staff took notes, but there was not an inclusionary practice that supported joint problem solving, planning and implementation of a resolution. CPTA and 3P Ride later underwent a paradigmatic shift that moved toward a process of empowerment to drive change and establish trust. The two organizations worked diligently to demonstrate that they sought true partnership, so that riders understood they were seeking paired discussion and implementation, not simply responding to complaints. This partnership grew into a positive force in the community.

Trust-Building Among Partners
Trust-building is also critical to unite partners. In Larimer County, CO the North Front Range Metropolitan Planning Organization (MPO) coordinated services in a rural/suburban area. They initiated an ongoing collaboration of regional transportation planners and providers, city and county government officials, nonprofit agencies, business owners and service users, including the Partnership for Age-Friendly Communities. The project piloted two mobility management software systems that would support a one-call/one-click service for older adults and adults with disabilities, then implemented that system. Yet in North Front Range MPO’s bid to unite disparate transportation providers, they experienced issues with trust. Because the partners serve special populations, initially they worried about whether other providers would be as dependable and care for their longtime riders. Partner organizations also feared changing their operations and losing their identities.

Once the partners began to meet and work with one another, they learned that each provider shared a high level of professionalism and care for riders and that no rider would be left waiting for a ride (see the best practice on coordination for additional information). Partners began to trust that each organization would keep its identity, and the concerns dissipated. As none of the organizations had sophisticated technology, they realized the call center could improve their operations and reduce their time spent answering phones. The partners also developed a sense of community, appreciating their new built-in team of colleagues.

Lack of Trust Is a Barrier to Success
Outreach can pinpoint ways lack of trust can stymie a transportation program and suggest ways programs can be structured to earn riders’ trust. In Cumberland County, ME, lack of coordination among transportation, social services and health care providers brought challenges for older adults and people with disabilities who used public transportation to buy food. The Greater Portland Council of Governments (GPCOG) wanted to empower older adults, people with disabilities and people of color to craft mobility solutions for themselves and their communities. GPCOG formed a Steering Committee that included 19 older adults and people with disabilities and engaged more than 400 stakeholders, including members of the target audience, through focus groups, surveys and a Mobility Solutions Workshop. The resulting Shopper Links
A pilot project tested two ways to provide rides to food outlets: a Shopper Shuttle operated by local paratransit, and on-demand rides through GoGo Grandparent, which allows riders to request rides through Uber or Lyft without needing a smartphone (see the best practice on food access for additional information).

Despite good planning and outreach, however, ridership numbers were low. To better understand the reasons why, GPCOG surveyed registrants, collected input from Steering Committee members and held a Community Conversation with 20 South Portland senior residents who had not used the service. Two key findings related to trust. First, residents were reluctant to try new transportation methods, especially in a pilot program that may not continue. They needed to trust that the service would be there when needed. Second, they had safety concerns. Participants in the Community Conversation reported feeling fearful of trying rides through Uber and Lyft. One person commented, “We all grew up being told ‘don’t get in a car with a stranger.’” Many registrants chose only the shuttle, and when surveyed, explained they had no interest in the on-demand rides because of safety concerns.

**Learnings**

- **Building trust is essential—and it takes substantial time.** Effective transportation programs are built on trust and establishing that trust likely will take much longer than expected.
  - Relationship building is done through having coffee with partners and potential riders, going to programs at community centers, walking housing complexes and communities to pass out flyers, and other similar activities.
  - Building trust means consistently delivering on promises to riders. It also means being transparent when, for whatever reason, promises cannot be kept.
  - Trust-building means being dependable, communicating often and maintaining an open relationship with the community throughout the process.
  - Trust also requires working hand-in-hand with partners and maintaining relationships with stakeholders whose buy-in can affect your operations and program funding.
  - Building trust requires that you get buy-in from program leaders, then dedicate substantial time in your day-to-day routine to build relationships, in addition to handling the nuts and bolts of arranging transportation.
  - Expect it to take at least a couple of years for your transportation program to really get rolling. Riders must trust that the new transportation program will be available longer term before they feel comfortable giving up their current arrangements, even if those arrangements are less than ideal.

- **Trust and comfort with drivers and schedulers are important to riders.** One project found that despite access to a central scheduling system, people were afraid to ride with strangers for on-demand rides. It is worth exploring whether a highly personalized experience with a central scheduler can alleviate concerns, as it did for some, but not all, grantees (see the best practice on transportation call centers for additional information).

- **Include older adults and people with disabilities in every stage of your program development process.** Only by having potential riders tell you their needs themselves, starting with the first planning step, will you be able to design a truly effective program to meet those needs.

- **When conducting outreach, consider all segments of the community.**
  - Each disability is unique. Physical, cognitive, vision and hearing impairments all pose specific challenges, so it is important to accommodate each in your outreach and engagement efforts. Tap the expertise of local partner organizations and/or community volunteers to help shape your outreach approach to special populations and fully communicate with the target audience.
  - Community members who are affected by transportation issues often are excited to share their input, so it is important to consider how you will provide transportation to meetings for those who need it.

- **Find and cultivate champions.** As word of mouth is critically important to building trust and promoting a new service, identify allies and cheerleaders and let them help you promote your transportation program.
• Take special steps to surmount trust issues born of cultural experience.
  • Find an insider—a recognized spokesperson in the target community—to advocate for and promote your transportation program. Bridge the trust gap by building a personal relationship.
  • Simplify your services, enabling riders to navigate the system through just one phone call.
  • Make sure both staff and riders know the hours of operation and other critical information, so that everyone feels confident in the reliability of the program.

Outreach
Many grantees said that outreach materials were effective in building awareness of their programs yet were not the primary factor that built ongoing ridership. Instead, outreach materials were often a first step toward enabling trust and relationship-building to take place. True engagement came from old-fashioned efforts to nurture relationships, such as having repeated face-to-face interactions and always delivering on promises to potential riders. Once trust is established, word-of-mouth about the program can be expected to grow.

In the end, most grantees also agreed that they could have benefitted from conducting much more dedicated outreach than they had. Below are some valuable learnings on how to do outreach well.

Outreach Learnings
• Consider how best to reach the target audience. How and where does your audience receive news? Find out, then share your message through those channels. For example:
  • With older adults, paper surveys usually receive more responses than online ones.
  • In areas where radio is a top means of public communication, consider creating and placing public service announcements. For instance, on the Navajo Reservation, where many homes do not have electricity, elders rely on battery-powered radios for their news.
  • Letters signed by the housing authority and posted on residents’ doors carry credibility.

• Go directly to the target population.
  • Visit places like senior centers, senior housing and sheltered workshops.
  • Leaving flyers, posters and postcards and setting up presentations with residents, social services coordinators or resident managers can be effective first steps, then word-of-mouth can take over.

• Work closely with partner organizations to identify shared goals. Test and see what works for you.
  • Some grantees have found this approach successful. For example, one grantee who partnered with a grocery store to give rides to shoppers received permission to put flyers in the store.
  • Other grantees found this approach less effective when partners and their audiences did not share their priorities.

• Use social media to build awareness. Some grantees noted that social media was effective for building awareness, but not for getting direct action such as rider or driver signups. Social media can be more effective in reaching family members, caregivers and younger people with disabilities.

• Big, simple, eye-catching materials with few words work best. Image-based materials with high contrast between text and background are easier for those with visual impairments or aging eyes. Consider using template materials such as those from Every Ride Counts, a collection of customizable advertising materials developed by NADTC to assist transportation providers as they promote their programs in their communities. Available in English and Spanish, these plug-and-play materials can be found at www.nadtc.org/everyridecounts and can be good if the approach matches your community’s culture, size and needs.