Focus groups were conducted with older persons to determine their mobility preferences and how these preferences might be expected to change in the future. Focus group methods are particularly well suited to research that attempts to uncover the motivations, perceptions, and needs of a particular group. Participants with similar characteristics respond to open-ended questions about a chosen topic. The group experience helps to foster an exchange of information, and often a response by one participant stimulates further discussion by others. A trained moderator guides the discussion along a predefined question path, ensuring that all the questions are fully covered and that all of the focus group participants have an opportunity to fully discuss their feelings about the topic at hand.

Key issues discussed in the focus groups concerning the mobility preferences of seniors included:

- Factors the participants considered in deciding how to travel;
- Reasons why public transit is or is not used; and
- Attributes of an ideal public transportation service.

**FOCUS GROUP DETAILS**

Focus groups were conducted in urban, suburban, and rural communities that had good transit services and what could be considered as “transit-friendly” environments. Locations for the focus groups were New York City, a Maryland
suburb of Washington, DC, a suburban area outside of Akron, Ohio, and a rural county east of Cleveland, Ohio. In each area, two focus groups were conducted: the first with seniors who were regular transit riders and the second with seniors who were non-transit users (except in New York City, where the second group was conducted with paratransit riders instead of people who did not use transit). Each group consisted of 8 to 14 seniors, 70 years of age and older. (Forming other focus groups—in communities with little or no public transit service or with people not yet classified as seniors—was an idea considered and rejected because of concerns about the quality of information that would have been produced.) Descriptions of the focus group sites are shown in Table 18.

CHARACTERISTICS OF FOCUS GROUP PARTICIPANTS

Characteristics of all 88 focus group participants (who were not necessarily statistically representative samples of their communities) are listed below.

- Their average age was 77.5 years, with actual ages ranging from 70 to 89.
- 74 percent were female.
- 30 percent were married.
- 48 percent lived alone.
- 43 percent lived in their own home.
- Their usual mode of transportation was
  - Driving (50 percent);
  - Transit (51 percent);
  - Walking (17 percent);
  - Being driven by someone else in household (15 percent); and
  - Being driven by friend or neighbor (9 percent).
- 15 percent had never driven.
- Other than driving, travel modes used in the last year were
  - Public transit (57 percent);
  - Walking (44 percent);
  - Rides from family members (41 percent);
  - Taxi (28 percent);
  - Specialized transit (22 percent);

<table>
<thead>
<tr>
<th>Site</th>
<th>Description</th>
<th>Transit Users</th>
<th>Non-transit Users</th>
</tr>
</thead>
<tbody>
<tr>
<td>New York City, New York</td>
<td>High-density central city core with moderate- and lower-income residents</td>
<td>12</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>• Regular transit riders</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Specialized paratransit riders</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>Rockville, Maryland</td>
<td>Relatively high-income suburban portion of metropolitan Washington, DC</td>
<td>8</td>
<td>10</td>
</tr>
<tr>
<td>Summit County, Ohio</td>
<td>Suburban portion of smaller metropolitan area (Akron); moderate- and lower-income residents</td>
<td>10</td>
<td>11</td>
</tr>
<tr>
<td>Geauga County, Ohio</td>
<td>Rural community east of Cleveland; moderate- and lower-income residents</td>
<td>12</td>
<td>14</td>
</tr>
</tbody>
</table>

| Total Interviewed           | 53               | 35               |

Table 18
Focus Group Sites
– Commercial van, private van, and carpooling (each 10 percent); and
– Rides from volunteers, religious groups, and others (7 percent).
• Their median family income was in the $20,000 to $30,000 range.
• 11 percent were non-White.
• 71 percent had children living nearby.
• Health conditions limited the following abilities:
  – Driving a car (23 percent);
  – Riding a bus (13 percent); and
  – Walking a ½ mile or more (36 percent).

DIFFERENCES BETWEEN FOCUS GROUP PARTICIPANTS

Transit Riders and Non-Riders

In comparison with non-riders in the focus groups, riders were much more likely to

• Live in single-person households;
• Get around by walking and transit, rather than by driving;
• Have used transit, taxis, rides from family members, specialized transit, and walking; and
• Have health or physical conditions that affect their abilities to drive a car or ride a bus.

Site-to-Site Variations

Comparing focus group participants across the various sites revealed the following:

• People from New York City tended to be older; to drive less frequently; to use taxis, transit, and walking more often; and to have health conditions affecting their ability to walk a ½ mile or more.

• People from the Maryland suburbs of Washington, DC, more often lived with others, more often drove, less often used transit as their usual means of transportation, more often were in the higher income brackets, and less often had health conditions affecting their ability to drive.

• People from the suburbs of Akron, Ohio, were near the average on many factors—they were in the lower income brackets and more often had health conditions affecting their ability to drive or ride a bus.

• People from the rural areas in Geauga County more often lived alone, more often got rides from someone else in the house or from friends and neighbors, less often used taxis or walked, and were in the lower income brackets.

CURRENT TRAVEL PATTERNS

The usual travel mode of the focus group participants varied considerably from site to site. Significant variations were also attributable to individual capabilities as well as to the detailed needs associated with specific trips.

Travel Modes for Transit Users

In the New York City focus groups, regular transit users primarily rode the bus. Their other frequent modes of transportation were subway and taxi. A number of the focus group members had problems using the subway. Many of them walked, but one-third of the group could walk only for short distances.

The paratransit riders in the New York City focus groups primarily used the paratransit services. Nine of the 11 participants used Access-A-Ride (the New York City ADA
paratransit service) and no other form of public transportation. These nine people were officially certified as mobility-limited and seldom walked far.

In the Maryland suburbs of Washington, DC, focus group members who were regular transit riders most often traveled using their own car, followed by the local county bus service, the metropolitan subway/bus service, and lastly, by taxi service. For trips to downtown Washington, the subway was the preferred mode; for errands, most group members would take the car or walk. These older persons said that they would not use public transportation in bad weather, during riots or demonstrations, and if transit did not stop close to their destination.

In the Akron suburbs, most of the focus group members who were transit users primarily used SCAT (a specialized transit service for older people with disabilities run by the Metro Regional Transit Authority which serves the Akron area) or the regular bus service run by the Metro Regional Transit Authority. Unlike the members of other focus groups, many of the participants in this focus group used public transportation to get to the focus group. Some regularly got rides from household members, family members, or friends and neighbors. A Red Cross transportation service and a private transportation service were also mentioned. Several members of the group indicated that they use both fixed-route and paratransit service depending on the trip they are making. The trip destinations, the amount of advance notice available for the trip, the time of day for which travel was planned, and the schedules of other drivers were the major factors listed in deciding how to travel.

In rural Geauga County, the focus group participants who were transit users used the public transportation service regularly. Virtually no other choices were available because transportation services have been consolidated under Geauga County Transit. All participants used public transportation to reach the senior center where the discussion was held. Several members of the group continued to drive to meet some of their travel needs, but others have ceased driving and now rely on public transportation. Some group members travel with family and friends, but do so reluctantly. Many focus group members used public transportation because family members either live too far away or are not available during daytime hours. One member of the group no longer drives but lets several friends use her car to drive her around.

**Travel Modes for Non-Transit Users**

In Maryland, those focus group members who were not regular transit riders most often traveled using their own car. The next most common travel mode was using the local county bus service, followed by riding in a friend’s or relative’s car, and lastly, using the metropolitan subway/bus service. Although public transportation was available to 7 of the 10 focus group members, half of the group had not used public transportation even once in the previous year. They often reported that they “did not know where it went” or that it did not go where they wanted to go.

The members of the focus group from the Akron suburbs who seldom rode transit usually drove to meet their travel needs. Several used public transportation (fixed-route and paratransit) on occasion and also relied on family and friends. Members of the group were aware of public transportation.
services, but were generally uninformed about where service was available, where it went, or how they could access it. Interestingly, one member indicated that her suburban residence, where she had lived for 32 years, was fine, but she now finds herself concerned about the six-block walk she would have to make to catch the fixed-route bus. Seniors expressed similar views in rural Geauga County.

In rural Geauga County, members of the non-transit-users focus group primarily drove to meet their travel needs. Some relied on family members and friends to travel. A few used public transportation occasionally, under conditions such as bad weather. Several members of the group used public transportation to get to the senior center in the county but not for other trips.

ADVANTAGES AND DISADVANTAGES OF VARIOUS MODES OF TRAVEL FOR OLDER PERSONS

Assessments of Specific Modes

Automobile Driver

The major advantage of driving one’s own car, according to focus group participants, is the accessibility of a wide range of destinations—the ability to go anywhere at any time. These attributes create very strong feelings of freedom and independence, which are highly valued in American culture. As one senior said, “You are your own boss.” Other very positive attributes were door-to-door convenience and the comfort of protection from the weather while traveling. Some other positive attributes often mentioned were short travel times, the ability to carry packages, the ability to conduct linked trips (trip chaining or side trips), not having to depend on others, safety, and the sense of independence afforded by driving. Many persons summed up these advantages under the heading of “independence.” One senior also noted, “It is a pleasure to drive a car . . . not just going from here to there, but actually [enjoying] the journey.”

Some focus group participants saw driving as a relatively inexpensive way to travel, but others were quite concerned about the costs of owning and operating a car. Some seniors felt very secure in their cars; others worried about being targets for crime (like carjacking) and aggressive drivers. Focus group members said that a key negative feature for older drivers is other drivers. Older drivers are extremely concerned about unsafe and aggressive behaviors by other drivers. They were highly disturbed by road rage, cellular telephone use while driving, and lack of courtesy, and they also had problems navigating roads clogged with sport utility vehicles. Seniors reported a lot of stress in driving and seemed quite mindful of the physical requirements (like good eyesight) for successful driving. Parking problems were mentioned as a somewhat less important factor.

Automobile Passenger

Many studies show that, after automobile driver, automobile passenger is the most frequent travel mode for older travelers. Focus group participants saw the major advantages of this mode as the connection to a wide range of destinations and the door-to-door service. Other positive factors mentioned included protection from the elements, being able to see the world around you, being able to relax (by not having to drive), and companionship. Common
negative factors included having to travel at the convenience of the driver, being under some kind of obligation to the driver for the trip, and worrying about the driver’s driving skills. One focus group member noted that one had to “love thy neighbor so that they will be around to take you.”

**Transit**

The older persons’ focus groups included both subway and bus riders; their assessments of transit’s attractions and weaknesses were in some ways similar and in some ways different. Subways were seen as quicker and more often on time than buses but more expensive; buses were seen as connecting to more destinations and (particularly among New York City focus group members) more often accessible to persons with mobility limitations than subways.

Not many seniors in these focus groups identified strong positive transit attributes, but a suburban rider in Ohio spoke highly of the punctuality of the drivers: “You can set your watch by them.” Somewhat positive attributes were the elimination of parking expenses, quick journeys (for subway), independence (“I do not wish to have my family take off work to take me to where I need to go . . .”), and the ability to watch the world go by (bus). One participant noted, “One thing with public transit—you do learn the city.” Companionship was also seen as a positive attribute, as it was with several kinds of passenger modes. Accessibility features were seen as both positive and negative—very good when available, but not reliably available. Transit was seen as sometimes economical (bus) and sometimes not (subway). Seniors saw subways as “the most efficient means of travel in a large city,” but also thought that subway stations were too far apart and too far away from them.

Focus group members reported that transit drivers played a strong role in their assessments of transit services. Driver attitudes toward seniors were said to be a problem in New York and a source of comfort in Ohio. Members of the older persons’ focus groups in Ohio made the following comments about transit drivers:

- “The drivers are so pleasant and nice.”
- “Oh, the drivers are beautiful; I mean we have no complaints about the drivers. It’s the transit service, the transit office [that is the problem].”

Strong negatives across all the older persons’ focus groups were associated with the parts of transit systems that are not as visible as the drivers, such as the dispatchers. Some focus group members commented:

- “The dispatching is most of our problem. The routes are not set up so that they are economical and efficient.”
- “Get somebody in there that knows what they are doing.”

Such complaints fit into the other major service issue, which is on-time service:

- “I wish their time was more regulated—that they would come more the same time every morning.”
- “I wish the transit system would run and take us somewhere.”

Strong negatives were also associated with other transit attributes. Seniors in the focus groups would not travel at certain times of day, to avoid the crowding of rush hours and to avoid interactions with teenagers, who were seen as disrespectful of the elderly. The unreliability of arrival times for buses was a very large concern: “You can’t plan down to the minute. I don’t want to wait, and it’s just as easy to walk.” Lack of comfort was another negative attribute, including the unwillingness of some transit
riders to offer seats to older passengers. Obtaining easily understood information on transit services was often mentioned as a large problem and was intimidating to some seniors:

• “You have to study a lot to figure it out. How can I know how to get there? I could walk easier than figure it out.”
• “The bus is a puzzle.”
• “I like to use them, but I cannot read their schedule. It is hard to figure out what their schedule is.”

Other seniors were more successful in interpreting schedules, although they still had some difficulties:

• “I will get out my little magnifying glass, and I can find it [the times of the vehicles] on this little thing [the printed schedule].”

One senior who had figured out how to use the bus spoke very positively:

• “I know all about all of the buses, and wherever I want to go, I just get on the one from Stow (a suburb), and I go into Akron, and I get my transfer, and I just get on the other bus if I need to go somewhere else. And, you know, there is one that will take you just about anywhere.”

The lack of service during evenings and weekends was often a problem for seniors:

• “My problem is getting home. I can get to a place, but the buses have quit running by the time I want to come home.”
• “You can get a bus on Sunday if you walk up the hill. But not very many of us can walk up the hill anymore.”

Problems with heating and ventilation were important comfort problems for some transit riders. Waiting outside was extremely difficult for some seniors. Excessive travel time was a problem for bus riders.

**Paratransit**

Focus group participants in different communities reported different paratransit experiences. Paratransit riders in the New York City focus groups reported serious problems with waiting times, travel times, and unprofessional or untrained drivers. The serious delays in pickups resulted in many other problems. One participant explained, “I have had so many bitter, bitter disappointments with Access-a-Ride that there are places I don’t go, and my life has become limited. I can’t stand the tension of waiting downstairs.”

Focus group members from the Akron suburbs said that waiting times could be a problem, but drivers were given high marks for assistance, friendliness, and courtesy. One member remarked: “I give them an ‘A’ because I call them my guardian angel. They are guarding me; they are leading me where I want to go because I don’t know where I am going if I go to an unfamiliar place.” Responsiveness to demand was seen as a positive feature, increasing independence. As one focus group member remarked, “It is good because my kids don’t have to take off to take me to the doctor; I can go on my own.” However, the lack of responsiveness on return trips led to complaints about excessive waiting times. Some paratransit services were seen as designed especially for the needs of seniors, and accessibility features were appreciated when they worked. In the rural Geauga County focus groups, one senior spoke of the socialization benefit: “I do have a car, and I can drive, but I enjoy coming on the transit to be with the people, with my friends every morning.”
Restrictions on eligibility for service, number of trips, trip frequency, travel times, trip purposes, and destinations were problems for many potential riders. Problems in scheduling return trips, especially when dealing with the uncertainty of waiting times at doctors’ offices, was a frequent problem. Focus group members also found the paratransit requirement of advance notice problematic:

- “Not good in an emergency: You have to call at least 24 hours in advance.”
- “Transit is bad because you have to call them a week in advance. And how do you know [you’ll need a ride] a week in advance?”
- “You get up in the morning, and you want to go [into town]. It’s a nice day . . . you can’t go that day, not by bus.”

A number of the non-transit riders in Geauga County longed for the “good old days” when the inter-urban trolleys (on fixed routes and schedules) connected them to Cleveland. Cost of service ($4.00 for a one-way trip) was seen as a real problem in Geauga County: “It’s cheaper to drive!”

Customer service was often seen as a key problem. Some paratransit providers were not responsive to complaints; some even refused service to persons who complained. Although older persons generally have a high regard for drivers, they are rather uniform in their criticism of the staff that take trip reservations and schedule the trips. Seniors do not feel that they are treated with patience. Timeliness in getting through on telephones to schedule a trip is a problem as well. Additionally, many seniors did not seem to understand (perhaps because the transit system did not explain) that pickup times may be approximate.

**Taxis**

Participants in the older persons’ focus groups viewed taxis as possessing both strongly positive and strongly negative attributes. The strongly positive aspects of taxis are much like those of driving a car: accessibility to a wide range of destinations and the ability to go anywhere at any time. Other very positive attributes were door-to-door convenience and the comfort of protection from the weather while traveling. Positive attributes were short travel times, the ability to carry packages, and having a professional driver.

The costs of taxi rides were generally seen as highly negative. (But one focus group member remarked: “A taxi is really not that expensive . . . this is going to be cheaper than owning a car.”) Concerns about the drivers were also expressed in strongly negative terms. Many older persons were afraid that a driver would not speak English, would charge them unfairly, would discriminate against them based on race or disability, or would fail to show up at all. Problems with driver hygiene and attitudes were mentioned. Accessible vehicles were often lacking.

**Walking**

For seniors who are physically able, walking is a feasible travel mode for short trips. They enjoy the exercise but worry that other pedestrians might try to hurt or rob them: “Don’t be in the wrong place at the wrong time.” Problems with poorly maintained sidewalks and highway construction also interfere with the pleasures of walking.

**Overall Assessments**

The ratings of various travel modes by seniors, according to the service attributes of those modes, are shown in Table 19. Results of all focus groups are combined in this table, which rates specific travel
Table 19  
Assessments of Travel Modes by Older Persons

<table>
<thead>
<tr>
<th>Measures</th>
<th>Acceptability</th>
<th>Accessibility</th>
<th>Adaptability</th>
<th>Availability</th>
<th>Affordability</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Automobile</td>
<td>Transit</td>
<td>Paratransit</td>
<td>Taxis</td>
<td>Walking</td>
</tr>
<tr>
<td></td>
<td>Driver</td>
<td>Passenger</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reliability: departure and arrival times</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Origin/destination connectivity</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trust and confidence</td>
<td>/</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Image/attractiveness</td>
<td>/</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amenities: passenger experience</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safety/security</td>
<td>/</td>
<td>/</td>
<td>/</td>
<td>/</td>
<td></td>
</tr>
<tr>
<td>Service quality: vehicles clean</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comfort: vehicles</td>
<td>/</td>
<td></td>
<td></td>
<td></td>
<td>mixed</td>
</tr>
<tr>
<td>Comfort: protection from weather</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service quality: drivers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service quality: dispatchers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can physically use the system</td>
<td>mixed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proximity</td>
<td>/</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can get information on services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>mixed</td>
</tr>
<tr>
<td>Flexibility</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responsiveness of service</td>
<td>mixed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assistance with special needs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eligibility</td>
<td>/</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public participation in service planning</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service span (hours/days)</td>
<td>/</td>
<td>/</td>
<td></td>
<td></td>
<td>mixed</td>
</tr>
<tr>
<td>Sufficiency</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frequency</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independence</td>
<td>mixed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$ Cost per ride [or per month or year]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>mixed</td>
</tr>
<tr>
<td>Time required</td>
<td></td>
<td>mixed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level of effort</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>/</td>
</tr>
<tr>
<td>Obligations to others</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>mixed</td>
</tr>
</tbody>
</table>

KEY:
- Strongly positive
- Positive
- Neutral
- Negative
- Strongly negative

Measures most highly valued by seniors
attributes for a given mode from strongly positive to strongly negative. Looking at the table, it is immediately evident that the seniors in these focus groups had a much more favorable opinion of automobile travel than they did of travel by public transportation. Many attributes of travel by automobile received strongly positive ratings including connections with many origins and destinations, protection from adverse weather conditions, door-to-door connections (proximity), flexibility, responsiveness, availability at all hours, and personal independence. Automobiles also received positive ratings on a number of other factors; the only negative ratings were in terms of cost and personal safety (primarily concerns about other drivers). Taxis had the next most strongly positive ratings, but had strongly negative ratings on trip cost.

Traveling as an automobile passenger shared many of the strongly positive ratings with driving an automobile and riding in taxis. However, traveling according to the schedules of others (independence) and being obligated to those persons were strongly negative features of automobile passenger travel.

Older persons viewed public transit services as having very few positive attributes. These were low cost, the ability to come and go on one’s own schedule (independence), and the amenities associated with traveling as a passenger (reading, watching the world go by, etc.). Strong negative attributes of transit were the lack of reliable service, difficulties in getting travel information, and problems in dealing with transit staff (other than drivers). Paratransit services received positive ratings on assistance from drivers, door-to-door service, and assistance with special needs, but these services had strongly negative ratings on reliability, interactions with dispatchers and other non-driving staff, and trip speeds (trips were too slow). Transit and paratransit services had negative ratings for hours of service availability, and paratransit services had negative ratings on eligibility requirements.

The contrast in preferred travel attributes could hardly be more striking. At least for those seniors participating in the focus groups, the strengths of automobile travel are often juxtaposed directly against the weaknesses of public transit—at least, as public transit services are offered at the present time. But there are ways of addressing transit weaknesses. These will be discussed in subsequent sections and chapters.

A few caveats are worth noting (but probably do not change the overall conclusions presented here). First, the ratings of specific modes of travel are based on the results of the older persons’ focus groups conducted for this project (these results might differ somewhat in other communities, but they generally correspond with the findings of other researchers). Slightly different ratings might also be obtained if seniors were asked to rank each of the travel modes on each of the specific attributes.

**DRIVING AS AN OPTION**

Seniors in all but the New York focus groups—both those who did and those who did not use transit—were strongly attached to their cars. (All but one of the focus group participants in New York City did not drive. The lone driver drove primarily on long-distance trips, not around the city.) One of the women in the transit users’ focus group said, “When they tell me I can’t drive, that will be one of the worst events of my life!”
Other comments about cessation of driving were the following:

- “If Maryland tells me I can’t drive, I’ll move to Florida where they’ll let me drive.”
- “When you can’t drive, you go into a deep malaise.”
- “I don’t want to hear about it.”
- “What a horrible thought!”
- “It is the hardest thing in the world [giving up the car keys].”
- “I’d stay in bed!”

As found in focus groups for numerous other reports, almost no one plans to stop driving. One woman commented, “We’re always going to be drivers, but we could be bus riders TOO.” In other words, transit would be used as a supplemental mode when it has a demonstrable advantage over driving.

This suggests that hopes of seeing a large number of older persons “transitioning” from driving to public transit use may be disappointed. A more likely pattern is that older persons will continue to drive until that time when continued driving is physically impossible. At that point, the infirmities that prohibit driving are also highly likely to prohibit the use of many current mass transit services—especially those configured with large vehicles on fixed routes and schedules.

**FEATURES OF IDEAL TRANSPORTATION SERVICES**

**Site-by-Site Assessments**

**New York City**

Three-quarters of the focus group members from New York City who were transit users thought that the reliability of service was the most important attribute of an ideal transportation service. No other factor was even close in terms of preferred attributes.

The paratransit users in New York City thought that ideal transportation services would provide greater driver awareness of the needs and vulnerabilities of the elderly, door-to-door service, on-time reliable service, places to sit while waiting for the vehicle to arrive, and the flexibility to change schedules.

**Suburban Maryland**

The most important features of an ideal transportation service to the transit-rider focus group in Maryland were frequency, reliability, well-managed services, and adequate equipment. Even if an ideal service were implemented, most members of this group would prefer to use their own automobiles for their travel, but they would use public transit more often than they do now.

For those focus group members from the Maryland suburbs who did not regularly use transit, the most important attributes of ideal service were door-to-door service, frequent service (every 15 to 20 minutes), services accessible to people with disabilities, comfortable services (reserved senior seating, well air-conditioned vehicles, clean equipment), reliable and predictable service, and low costs ($0.50 per ride). If such services were available, most of the focus group members would use transit

---

2 In England, headways of less than 10 or 12 minutes are considered to be frequent enough that passengers do not need to know the timetable and can arrive at random times (thus waiting 6 minutes is average). For headways of greater than 10 minutes, passengers time their arrival at the stop to the timetable (and the average wait is still 6 minutes).
more often, but two persons would still not use it at all.

**Akron Suburbs**

The focus group members in the Akron suburbs who regularly used transit thought that ideal service would include trips available on the same day as called, (especially in emergency situations), service on weekends and late in the day, courteous treatment from customer service representatives and drivers, and reliable on-time service. (“You don’t want to stand around, especially where you can’t sit down. You don’t want to stand and wait and wait, especially when you don’t feel good or something.”) A comfortable place to wait indoors was preferred.

The focus group members in the Akron suburbs who seldom used transit thought that ideal service would include the following attributes:

- Frequent and flexible service (service that was available 7 days a week and responsive to same-day requests for travel);
- Door-to-door service (“By the time you can’t drive anymore, you can’t walk that much anymore.”)
- Accessible service (“If it is not easily accessible, then it is of no value to us, because the people who need this service are people who are not driving any more. And they need the help.”)
- Affordable service (“If it is very expensive, then you won’t ride anything. So nothing else would be relevant anymore . . . my pay isn’t going to go up . . . and if all of the utilities are going to double like they say, all of our income is going to be going in other directions.”)

One respondent summed this up as “everything that a car can give us.”

**Geauga County, Ohio**

In rural Geauga County, the participants in the transit-user focus group saw an ideal service as one that would offer convenient pickup and dropoff times 7 days a week; offer convenient and reliable service; provide personal attention in both scheduling and providing rides (this includes assistance on and off the vehicles); offer long-distance trips (for example, to Cleveland); and use vehicles with comfortable rides. Advance reservations should not be required: “But we don’t want to have to sign up for it!” Some respondents felt that such ideal service would be difficult to achieve.

For seniors in the Geauga County focus group in which few participants were transit riders, the most important feature of an ideal service was convenience. Door-to-door service, reliability, travel when and where needed, comfort, and safety were the other features mentioned.

**Overall Assessments**

The focus groups of older travelers discussed which components of the long list of transportation system attributes are of the highest priority. Table 20 shows which transportation features were classified as “first priority” and which were classified as “other priorities.” This classification was based on the priorities reported by the focus groups and the frequency with which specific items were mentioned as key features. According to the combined results of all the focus groups, the most important service attributes of transportation systems to older travelers are

- Reliable departure and arrival times (one “first priority,” six “other priorities”);
<table>
<thead>
<tr>
<th>Key Features of Ideal Transportation Services</th>
<th>Transit users</th>
<th>Non-transit users</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ACCEPTABILITY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reliable departure/arrival times</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Origin/destination connectivity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trust and confidence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Image/attractiveness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comfort/amenities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Security</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cleanliness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Courteous treatment</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ACCESSIBILITY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can physically use the system</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proximity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can get information on services</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ADAPTABILITY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flexibility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responsiveness of service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assistance with special needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eligibility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public participation in service planning</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>AVAILABILITY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service span (hours/days)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sufficiency</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frequency</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independence</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>AFFORDABILITY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$ Cost per ride [or per month]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time required</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level of effort</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obligations to others</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Legend**
- First priority
- Other priorities

Table 20

Mobility Preferences Reported by Older Persons
• Door-to-door service (two “first priorities,” three “other priorities”);
• Flexible service available on demand (no 24-hour waits for trips) (one “first priority,” four “other priorities”); and
• Comfortable vehicles and waiting areas (five “other priorities”).

It is important to note that, although there are other features that are not highlighted in Table 20 (meaning that they were not identified as the most important ideal transportation service attributes), seniors still expected acceptable levels of performance on nearly every one of the remaining transportation system attributes.

**FINDINGS FROM OTHER FOCUS GROUPS**

The findings from the focus groups with older persons conducted for this research project were compared with the findings of other transportation studies that have conducted focus groups of older persons. The findings of the other studies are nearly identical to those reported here.

One of the most well-documented studies is the *Transportation in an Aging Society Focus Group Project* conducted by the Beverly Foundation (Kerschner and Aizenberg, 1999). The Beverly Foundation interviewed a total of 203 men and women; nearly half were from Florida, with about one-quarter each from California and Michigan. About 41 percent of the respondents were 65 years of age or older and from transportation-rich environments (defined as areas known to provide seniors with access to transportation at least 6 days of the week within 1 mile of their homes). Thirty-five percent were age 65 and older and from transportation-deprived communities (defined as areas known to not provide seniors with access to transportation at least 6 days of the week within 1 mile of their homes). Twenty-four percent of the respondents were family and friends of older persons who were concerned about an older person’s driving or ability to get around.

Four overall themes emerged from the Beverly Foundation work (Kerschner and Aizenberg, 1999).

• The automobile is the most frequently used mode of transportation for seniors, and other transportation options are perceived to be inadequate.
• Most people do not make plans for how they will travel late in life; this lack of planning can adversely affect the quality of life for some seniors.
• Some older persons have serious problems traveling to the places they need to get to.
• Older people who no longer drive for health reasons don’t become walkers.

The recommendations that participants said were of the highest priority were those addressing alternative transportation options. Sixty-four percent asked for transportation specialists that provide “one-call-does-it-all” information; 54 percent asked for personalized transportation services using vans; and 50 percent asked for assistance on how to use public transportation including special kits, map routes, and free passes (Kerschner and Aizenberg, 1999, p. 16). These findings are consistent with the findings of the older persons’ focus groups conducted for this project.

Although local transportation resources and problems are somewhat different from community to community, the Beverly Foundation researchers did not find significant region-to-region differences on overall transportation issues regarding older persons. More important determinants
of travel needs are factors such as density of development, recency of development, length of residency in the community (obtaining rides from friends, neighbors, and families is easier for residents who have lived in one place for a long time), and available transportation options. This finding is consistent with the results of the older persons’ focus groups conducted for this study. This suggests that basic high-priority issues of travel for older persons—automobile dependence, high levels of concern about transportation issues, significant travel problems for people who do not drive, and the need for user-friendly and high-quality transportation options—depend little on geography or climate and more on settlement patterns and transportation options available.

**CONCLUSION**

The transportation services that seniors most highly value are reliable, frequent, comfortable, low-cost, door-to-door, spontaneous services that access a large variety of destinations over extended periods of time. Responding to these values may be difficult for some transit systems. According to the reports of seniors on ideal transit system features and their assessments of travel modes, transit services are weak in the four primary ideal service features: reliability, proximity, flexibility, and comfort.

It is relatively easy to imagine how to improve reliability and comfort. Addressing accessibility and flexibility will most likely be a greater challenge. Moreover, many current transit operators have found it difficult to provide door-to-door services or services that are highly flexible for changing demands.

If the “best of all possible worlds” scenario—reliable, frequent, door-to-door, spontaneous, extensive, low-cost service—is not now available, there are still many steps that transit providers can take to make their services more attractive to current and potential older riders. These steps are discussed in subsequent chapters.

Participants in the older persons’ focus groups emphasized both their common and unique features. They asked, “Are the travel needs of seniors really that different from anyone else’s?” Then they remarked, “Don’t put seniors all in one category—we come in all flavors, colors, abilities, and disabilities.” Perhaps a key is recognizing the personal variability that aging can impose on any of us: “Whether and how I travel on a given day depends on if my body feels like it.” Some visible, obvious acknowledgment that older riders might be facing such considerations could be one of the best definitions of senior-friendly public transportation services.