



AGING AMERICANS: STRANDED WITHOUT OPTIONS



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April 2004

Acknowledgments

Aging Americans: Stranded Without Options was written by Linda Bailey, with editorial assistance provided by Michelle Ernst, Kevin McCarty, and Trinh Nguyen. The data extraction, research design, and data analysis were conducted by Linda Bailey and Kate Zyla.

Many thanks to the National Household Transportation Survey team, headed by Susan Liss at the Federal Highway Administration, for their help in working with the NHTS 2001 data set, and their work in gathering the data and providing it for public use.

The author would especially like to thank the members of the STPP Board; Jo Reed, Debra Alvarez, and Audrey Straight of AARP; and Art Guzzetti, Demaune Millard, Rose Sheridan, and Mary Trupo of APTA for the valuable insight and information they provided. Thanks also to Chris Zeilinger of the Community Transportation Association of America (www.ctaa.org), and Jackie Gillan and Dr. Gerald Donaldson of Advocates for Highway and Auto Safety (www.saferoads.org) for their review.

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EXECUTIVE SUMMARY

The demographics of the United States will change dramatically during the next 25 years as more baby boomers reach their 60s, 70s and beyond. The U.S. Census Bureau projects that the number of Americans age 65 or older will swell from 35 million today to more than 62 million by 2025 - nearly an 80 percent increase. As people grow older, they often become less willing or able to drive, making it necessary to depend on alternative methods of transportation.

Unfortunately, the United States is currently ill prepared to provide adequate transportation choices for our rapidly aging population. Alternatives to driving are sparse, particularly in some regions and in rural and small town communities. As the number of older people increases, so too will their mobility needs. How the nation addresses this issue will have significant social and economic ramifications.

This report presents new findings based on the National Household Transportation Survey of 2001 and places them in the context of other research on mobility in the aging population.

MAJOR FINDINGS:

More than one in five (21%) Americans age 65 and older do not drive. Some reasons include:

- Declining health, eyesight, physical or mental abilities;
- Concern over safety (self-regulation);
- No car or no access to a car;
- Personal preference.

More than 50% of non-drivers age 65 and older - or 3.6 million Americans - stay home on any given day partially because they lack transportation options. The following populations are more heavily affected:

- Rural communities and sprawling suburbs;
- Households with no car;
- Older African-Americans, Latinos and Asian-Americans.

Older non-drivers have a decreased ability to participate in the community and the economy. Compared with older drivers, older non-drivers in the United States make:

- 15% fewer trips to the doctor;
- 59% fewer shopping trips and visits to restaurants;
- 65% fewer trips for social, family and religious activities.

For trips outside their immediate neighborhood, public transportation is the only alternative to asking for a ride for many non-drivers. Where public transportation is available, older Americans make regular use of it.

- Public transportation trips by older non-drivers totaled an estimated 310 million in 2001;
- Older minority populations account for a significant share of these trips, with older African-Americans and Latinos more than twice as likely to use public transportation as their white counterparts.

A safe and inviting walking and bicycling environment provides mobility and health benefits to many older Americans.

- More than half of older Americans make walking a regular activity, and nearly two-thirds walk a half mile at least once a month.
- Four percent of older Americans ride a bicycle at least once a week.
- Research shows that moderate exercise, such as walking or bicycling, can contribute significantly to a healthy lifestyle.
- Improving the walking and bicycling environment is a priority for the general public.

More livable communities have lower rates of staying home, and higher rates of public transportation use and walking among non-drivers aged 65 and over.

- 61% of older non-drivers stay home on a given day in more spread-out areas, as compared to 43% in denser areas;
- More than half of older non-drivers use public transportation occasionally in denser areas, as compared to 1 in 20 in more spread-out areas;
- One in three older non-drivers walks on a given day in denser areas, as compared to 1 in 14 in more spread-out areas.

THE TRANSPORTATION CONTEXT:

In too many places, public transportation is still not a practical option for older people.

- Half of all adults cannot choose to take public transportation because service is not available in their area, particularly in rural and small towns.

Public transportation depends on federal, state and local government funding to operate. Making public transportation options available to more people will require additional government funding.

- Maintaining the current public transportation system requires a minimum of \$14.8 billion in capital investments annually.
- To improve the public transportation system would require \$43.9 billion annually.

For frail older persons, paratransit and specialized transportation are the only feasible modes of transportation, other than getting a ride from others.

- Under the Americans with Disabilities Act (ADA), public transportation agencies provide complementary paratransit service along fixed routes for people whose disabilities prevent them from using fixed route service.
- The Federal Transit Administration's Specialized Transportation Program for the Elderly and Persons with Disabilities (Section 5310) was funded at \$90.6 million in 2004, or 0.23 percent of all federal transportation funding.

CONCLUSIONS AND RECOMMENDATIONS:

Public Transportation:

- Substantially increase investment in public transportation systems to expand and improve services to meet the needs of older Americans in metropolitan and rural areas.
- Increase funding for existing specialized transportation programs that provide mobility for older persons, such as FTA's Section 5310 program.

Planning and Coordination:

- Incorporate the mobility needs of older Americans into the planning of transportation projects, services, and streets. Coordinate with land use planning.
- Improve coordination among human services agencies and between those agencies and public transportation agencies.

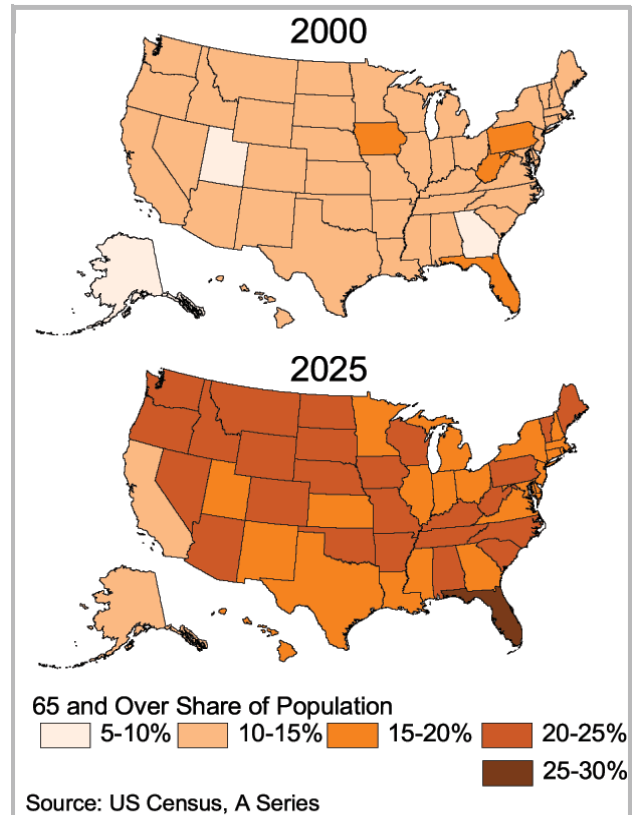
Road and Street Improvements:

- Complete the streets by providing a place for safe walking and bicycling for people of all ages.
- Urge states to adopt federal guidelines for designing safer roads for older drivers and pedestrians.
- Preserve the flexibility of state and local governments to spend federal transportation funds on improving public transportation, pedestrian and bicycle paths, and other alternatives that will meet the mobility needs of older Americans.
- Support the "Transportation Enhancements" program, which is the only federal source of support for pedestrian and bicycle safety projects and facilities.

Older People: A Growing Part of the U.S. Transportation Market

The demographic shape of the U.S. population will shift dramatically in the next 20 years, and transportation agencies will find themselves confronted with a very different customer base. In 2002, 12 percent of the U.S. population was 65 or older. By 2025, the number of seniors will have gone up by 79 percent, and an estimated 18 percent of the population will be 65 or older. The U.S. Census estimates the total population of people aged 65 and over to be 62 million in the year 2025. In 26 states, more than 20 percent - one in five residents - will be over the age of 65.

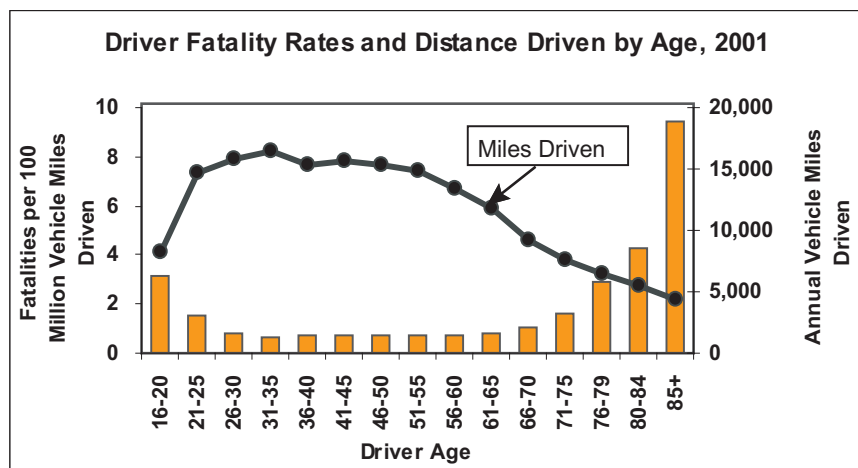
Most older adults in 2025 will have spent their adult life getting around by driving, and in many cases, will have chosen a home in a place where the only transportation mode available is the automobile. People aging in spread-out suburbs will soon be facing the transportation challenges that rural Americans already confront: friends, stores and family are far away and often connected only by car.



Fragility, Self-Limitation Challenge Driving as an Option

Older drivers are more likely than younger drivers to be killed in car crashes relative to the miles they drive, even though drivers aged 75 and over are involved in only about 3 percent of all crashes. Fragility is the largest single cause of this increased mortality (Li, Braver and Chen, 2003). Drivers aged 85 and older have a fatality rate that is 9 times higher than drivers aged 25 to 69 for each mile driven ("Travel Safety Facts 2000: Older Population" NHTSA). The graph at right shows the rates of driver fatalities, by age, per mile driven in 2001. The rate of fatalities begins to climb after age 65, while the total number of miles driven (black line) goes down.

The drop in commuter miles after retirement may explain part of the reduction in overall mileage. However, many people also choose to reduce



Graph shows increased fatalities per mile driven juxtaposed with decreasing miles driven for drivers of different ages. Sources: NHTS 2001, FARS

More than one in five adults age 65 and over do not drive.

their driving as they age, or to limit it to certain situations. For example, someone may decide to drive only on local streets, or only during the daytime. A 2002 national survey found that one in five drivers age 65 and over do not drive at night (Omnibus Survey, June 2002). A National Institute on Aging study released in 2002 estimated that individuals who are driving at age 70 will stop driving and spend, on average, 6-10 years "dependent on others to meet their transportation needs" (Foley, Heimovitz, Guralnik and Brock, 2002). More than one in five adults age 65 and over do not drive – 21 percent, or an estimated 6.8 million people (NHTS 2001).

Isolation: If you can't drive, stay home?

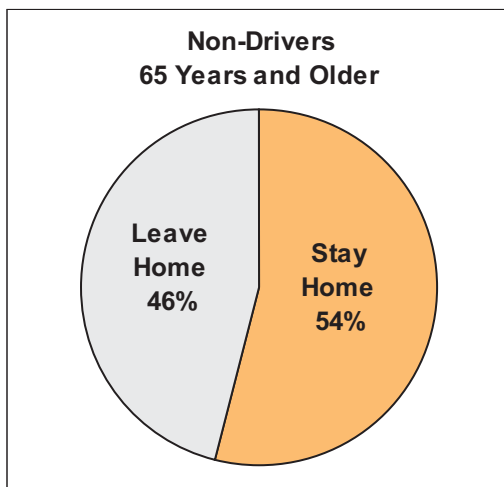


Chart shows average daily pattern. NHTS 2001, STPP analysis.

Over half of non-drivers aged 65 and over stay home on any given day, as shown on the graph, left. This isolation* among older people affects 3.6 million older non-drivers. In contrast, 17 percent of older drivers, or about a third the rate of non-drivers, stay home on a given day (NHTS, 2001). Why is it that so many older people simply stay home when they cannot drive? Some are too ill or frail to travel. However, for many, the only alternative to driving oneself is getting a ride from someone else. A 2002 survey of adults aged 50 and older found that many older people are self-conscious about asking for rides. About half said that "feelings of dependency" and "concerns about imposing on others" were problems (Ritter, Straight and Evans, 2002).

A comparison of trip patterns among drivers and non-drivers is also revealing. While non-drivers make 15 percent fewer trips to the doctor than drivers, they make 65 percent fewer trips for social, family and religious purposes. This means in effect that while drivers go out for these social purposes about 8 times per week, on average, non-drivers only go out about 3 times a week (NHTS 2001).

Lack of contact with others has been shown to be detrimental to the emotional well-being of older people (Findlay, 2003). Not being able to get around also reduces older adults' ability to participate in the economy. Non-drivers 65 and over make less than half as many shopping trips as drivers do. They also make less than half the number of trips to restaurants and other places to eat (NHTS 2001).

Alternative Ways to Travel Independently

Currently, adults 65 and over in the U.S. predominantly use the automobile to get around, and are dependent on getting rides once they stop driving. However, many older adults also walk, bicycle and take public transportation, even if they use the car for most trips.

* "Isolation" in this paper is used to refer to people staying in their homes in part related to their non-driving status.

Nearly two-thirds of older adults walk a half mile at least once a month (Omnibus Survey, October 2003). Four percent, or 1.1 million, ride a bicycle at least once a week (NHTS 2001). About one in ten uses public transportation at least once a month. So why don't older adults simply make up for driving with walking and public transportation when they are not able to drive?

Public Transportation

For many non-drivers, public transportation is the only alternative to asking for a ride when they are going somewhere outside their immediate neighborhood. However, most U.S. residents still do not have the option of using public transportation to get places. In 2001, just half – 49 percent – of all Americans reported that they have public transportation service (American Housing Survey, 2001). In 1995, a quarter of rural counties had below average public transportation service, and 41 percent had none at all (CTAA, 1995).

Where public transportation is more available, however, it is highly used (see graph, page 9). Many older non-drivers take public transportation every day. In fact, they complete an estimated 310 million trips per year (NHTS 2001). The systems that provide these everyday services depend on reliable funding from various levels of government. The U.S. Department of Transportation estimates that maintaining the current public transportation system requires an annual capital investment of \$14.8 billion, an increase of 30 percent over current levels from all funding sources (US DOT, 2002). The cost of improving public transportation service is estimated at \$43.9 billion annually, more than double the current funding level (Cambridge Systematics, 2002). Federal funding for public transportation has increased an average of 2.1 percent annually since 2001.

Public Transportation Services for People with Disabilities

Under the Americans with Disabilities Act (ADA), every public transportation agency is required to provide complementary paratransit service along fixed routes for people whose disabilities prevent them from using fixed route service. But for those living away from fixed routes, there is no guarantee of access to any public transportation service. And the public transportation agency is under no obligation to provide access for older people without disabilities. For older adults, frailty or a chronic condition may rule out the use of traditional public transportation even though they are not eligible for paratransit under the ADA.

Human Services Transportation

A portion of the federal public transportation budget is devoted to providing human services transportation for older people and people with disabilities, primarily by enabling human service agencies to purchase vehicles. The Federal Transit Agency's Elderly and Persons with Disabilities Formula Program, also known as "Section 5310," was funded at \$90.6 million in 2004, or 0.23 percent of all federal trans-

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portation funding. According to the most recent FTA report, nearly 60 percent of Section 5310 vehicles were in need of replacement. (FTA, 2001).

Walking

Although over half of older Americans make walking a regular activity, they do not walk very often in comparison with peers in other industrialized countries, where the rate of walking is much higher. Not being able to walk places can become a problem when an older person stops driving. In the U.S., people 65 and over make just 8 percent of their trips on foot or bicycle. In Germany, 50-55 percent of all trips for adults aged 65 and over are on foot or bicycle. The Netherlands shows a similar pattern: 44-48 percent of all trips for those aged 65 and over are made on foot or bicycle (Pucher & Dijkstra, 2003).

Getting places on foot is still difficult in many parts of the U.S., and in far too many cases, unsafe. Recent public health studies have found that per mile, people out walking in the United States are three times as likely to be killed as in Germany, and over six times as likely to be killed as in the Netherlands (Pucher & Dijkstra, 2003, p. 1511). Transportation engineering solutions to the problem of our unsafe walking environment do exist, but implementation has been spotty and slow. Only 1.1 percent of federal transportation funding went to making improvements in pedestrian and bicycle facilities between 1998 and 2003, despite the fact that over 13 percent of all traffic deaths are people on foot or bicycle. In fact, 17 percent of traffic fatalities among people 65 and over were pedestrians and bicyclists in 2002 (FARS, 2002).

Walking and Health: An Added Benefit to Mobility

Researchers have found that moderate exercise, such as walking or bicycling, can contribute significantly to a healthy lifestyle. Traditionally, only exercise activities involving a higher heart rate were considered important. This conception has changed since the Surgeon General announced a recommendation of 30 minutes of moderate exercise daily. A one-mile trip is a twenty-minute walk, or two-thirds of the recommended daily exercise regimen of 30 minutes (US Surgeon General, 2001). In fact, because people may be more apt to walk places than go to a gym, public health researchers are focusing much more now on exercise as an integrated part of getting through the day. The CDC estimates that if 10 percent of adults began a regular walking program, \$5.6 billion in heart disease costs could be saved (CDC 2003).

Improving the walking and bicycling environment is already a high priority among the general population. In a poll released last year, 42 percent of Americans reported that "dangerous intersections make crossing the street difficult in the area close to where [I] live." Almost 9 out of 10 (87 percent) supported the proposal to "use part of the transportation budget to design streets with sidewalks, safe crossing and other devices" (STPP 2003).

Designing for Street Safety

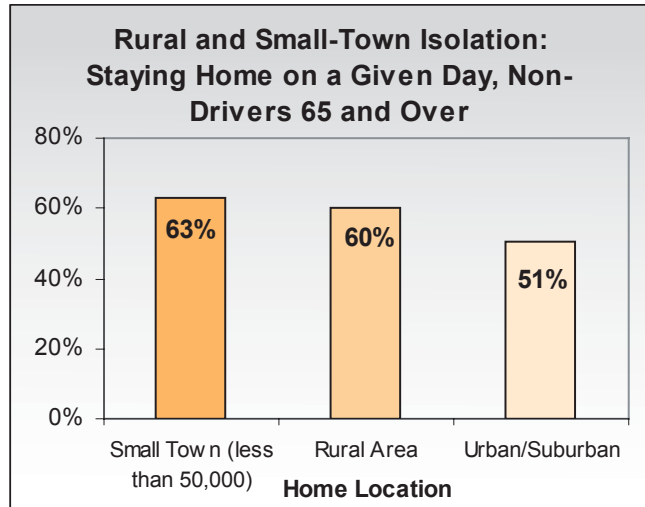
As noted previously, even though older drivers and pedestrians are no more likely than younger people to be in an accident on a per capita basis, they are more likely to be in accidents per mile driven, and more vulnerable to injury

when they are in an accident (Lyman, Ferguson, Braver & Williams, 2002). Older people are among the first to suffer increased injuries and fatalities when streets and highways are not safe.

The Federal Highway Administration has developed guidelines for engineering streets for maximum safety for drivers, such as eliminating difficult turns, making signs easier to see, and improving lighting and pavement markings (FHWA, 2003). At the same time, it is critical to make improvements for people on foot. In neighborhoods, traffic roundabouts and other traffic calming devices have been found to dramatically increase safety by reducing speeds and increasing visibility of other vehicles, pedestrians, and bicyclists. Building and maintaining sidewalks along roadways creates a safe place to walk. Crossing the street can be made safer with a walk signal. Existing crosswalks can be improved by lengthening signal times to allow people to cross more slowly, and by building "refuge" islands on the median so that people who only cross halfway have a safe place to wait for the next walk signal.

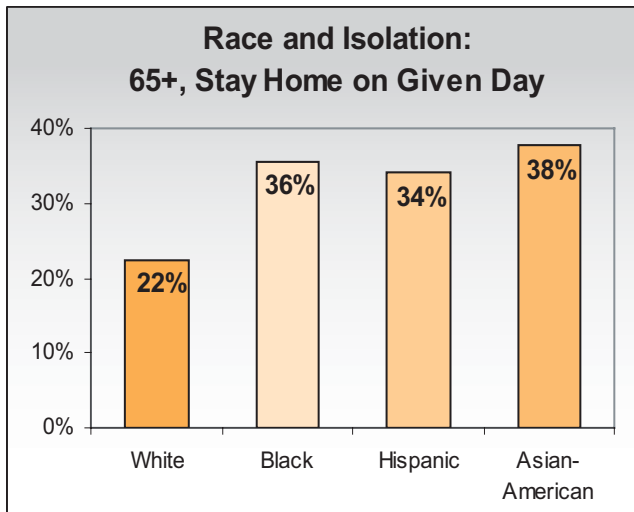
Disparate Impacts: Rural, African-American, Latino and Asian-American Populations More Isolated

Rural and small-town older Americans who do not drive are more likely to stay home on a given day, as shown on the graph, right. In effect, these non-drivers are much less likely to get out than their urban and suburban counterparts, reducing their contact with the community. Spread-out land development patterns and poverty in rural areas are primary factors in staying home for older non-drivers. When it is available, public transportation contributes significantly to the mobility of older rural non-drivers. However, public transportation is considerably less available in rural areas and small towns than in larger cities and their suburbs. Bicycling and walking facilities, such as sidewalks, benches and bicycle paths, are also often lacking.



African-American, Latino, and Asian-American elders are disproportionately affected by the lack of options because many more do not drive. While just 16 percent of white persons 65 and over do not drive, 42 percent of older African-Americans, 39 percent of older Latinos, and 45 percent of older Asian-Americans do not drive. This may explain why over a third of the total population of older Latinos, African-Americans and Asian-Americans stay home on any given day - 34, 36 and 38 percent, respectively. In comparison, just 22 percent of all older white people stay home on any given day (see graph, next page).

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NHTS 2001, STPP analysis

The isolation of these older minority populations reflects an increased rate of poverty, especially for older African-Americans and Latinos. Sixteen percent of both older African-Americans and older Latinos live in households beneath the poverty threshold (Current Population Survey, 2003). Less accumulated wealth is also reflected in the lack of automobiles in the households in which older African-Americans and Latinos live. More than one-quarter of older African-Americans live in households with no cars - 28 percent. One in five, or 19 percent of older Latinos, and 9 percent of older Asian-Americans live in households with no cars.

On the other hand, older African-Americans, Latinos and Asians are much more likely to use public transportation regularly than their white counterparts. While 10 percent of older whites use public transportation at least occasionally, 21 percent of older African-Americans, 21 percent of older Latinos, and 16 percent of older Asian-Americans use public transportation at least occasionally.

Livable Communities



Ferndale, California

Photo: www.pedbikeimages.org/Dan Burden

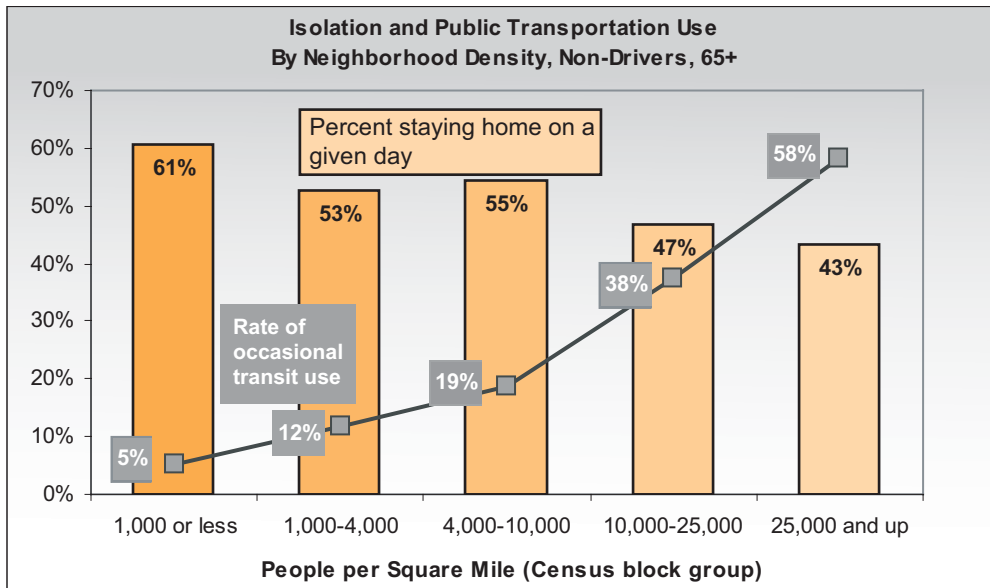
In some places, of course, people who cannot drive have better options than others. They have many public transportation options, they can walk and bicycle to many destinations safely, and special transportation services for older people are available.

For example, in the Philadelphia metropolitan area, only a third (35 percent) of non-drivers age 65 and over stay home on a given day. In comparison, over half (53 percent) of older non-drivers in the Los Angeles metropolitan area stay home on a given day.

Being closer to destinations is an important part of mobility for older people who cannot drive or whose driving is limited. People 65 and over living in areas where houses are built closer to shops and services are less likely to stay home on a given day, and are more likely to use public transportation and walk to get around. The graph, opposite page, contrasts isolation and public transportation use across a range of residential densities.

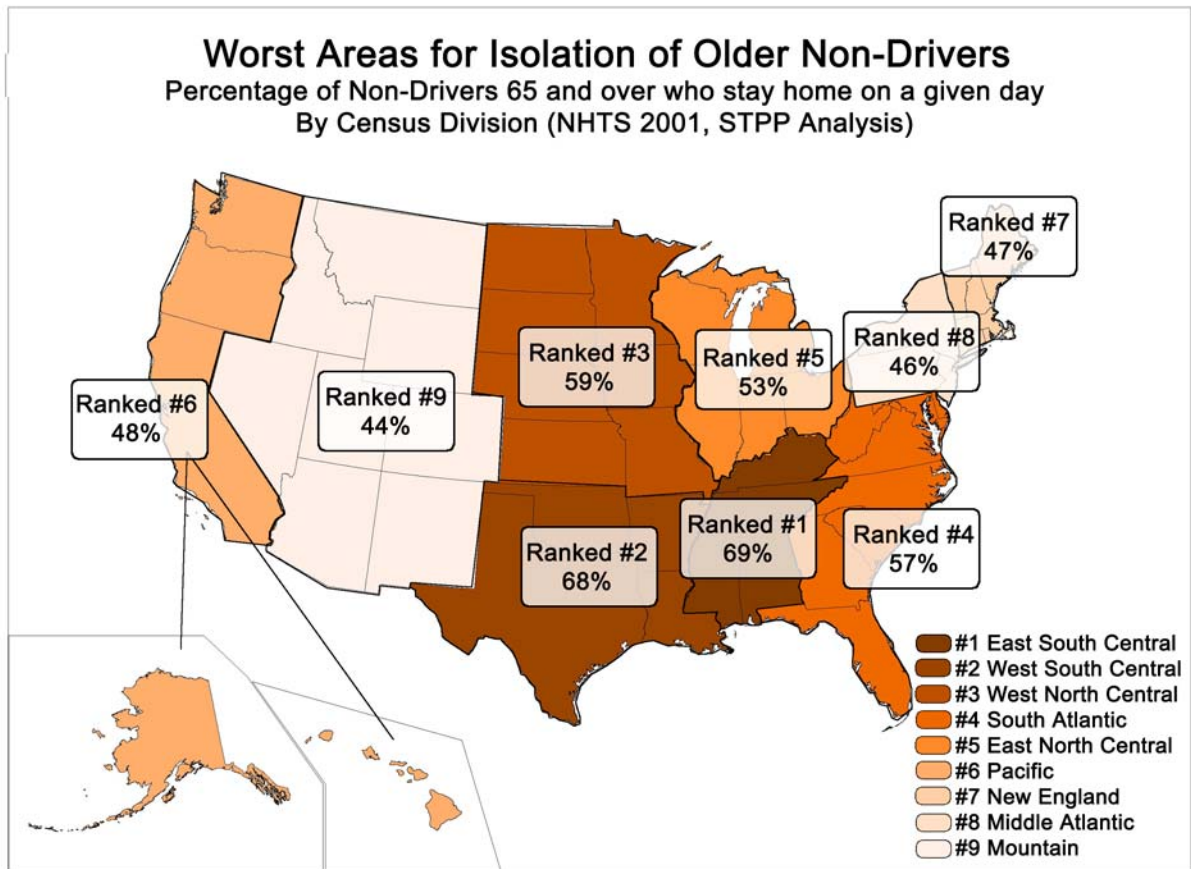
The range of neighborhood (block-group level) densities shown on the graph are representative of most metropolitan areas covered by the National Household Travel Survey. Even low-density metropolitan areas such as Atlanta contain some neighborhoods with a density of 25,000 or more people per square mile. (Population density is used here as a stand-in for other measures of land use because of data availability.)

Many more older non-drivers are occasional public transportation users in higher density neighborhoods, as shown in the graph. Similarly, older non-drivers in more densely built neighborhoods are much more likely to walk on a given day. While about one in three - 35 percent - of older non-drivers living in the densest neighborhood category walk somewhere on a given day, just 8 percent, or 1 in 13, of those living in the most sprawling or rural neighborhoods walk on a given day.



NHTS 2001, STPP Analysis

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Regional Differences

Within the U.S., there is a wide range of relative isolation of older non-drivers. The worst two areas for isolation of older non-drivers are in the central southern area of the United States - encompassing Alabama, Kentucky, Mississippi, and Tennessee; and Arkansas, Louisiana, Oklahoma, and Texas. In these areas, over two-thirds of older non-drivers stay home on a given day (see map, above).

Providing options to non-drivers is crucial, and will be a growing problem as the population 65 and over increases. Even now, for instance, an estimated 69,247 people aged 65 and over in the Houston metro area do not drive - about 1 in 5. Policy-makers and transportation planners need to ask, "How well is this population being served?"

A full table of areas, the states they contain, and the percentage of older people who do not drive in selected metropolitan areas is provided in the Appendix. Information on public transportation service and funding in the same metropolitan areas is also provided.

Next Steps to Better Mobility for Older People

Communities across the country need to work hard to serve a growing older population. Thinking now about how to provide safe mobility will save communities time and money in the future. Such planning now for the mobility of people who will be 65 and older in twenty years will help reduce unnecessary isolation and dependence in the future.

Transportation is one part of getting people to the places they want to be. Community design and land use planning are the larger picture: creating places where older people are able to get around safely and easily, whether by using public transportation or by walking to destinations that are closer to home.

Below are some recommendations for policy-makers that will help make transportation a part of the solution:

Public Transportation

- **Public transportation:** Substantially increase public transportation agencies' funding to provide better public transportation options for everyone. Public transportation agencies need support for improving their services to meet the growing needs of older people and people with disabilities in both metropolitan and rural areas.
- **Senior transportation:** Increase funding and flexibility for existing programs that provide mobility for older people. Significant among these is the Federal Transit Administration's Section 5310 program for the elderly and persons with disabilities, currently funded at \$90.6 million per year. Explore alternatives, such as volunteer driver programs.

Planning and Coordination

- **Better Planning:** Communities and transportation agencies need to start planning now to integrate mobility for the aging population into transportation projects, services, and streets. Land use planning should be coordinated with transportation planning.
- **Improved Coordination:** Support coordination among human services agencies, and between those agencies and transportation agencies at the federal, state and local levels.

Roadway and Street Improvements

- **Complete Streets:** Make streets safe and inviting to walk and bicycle as well



Photo: [www.pedbikeimages.org/Dan Burden](http://www.pedbikeimages.org/Dan_Burden)

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as drive. Too often, "incomplete" streets are built, where people only feel comfortable in cars.

- **Improve Roadway Design for Safety:** Encourage states to implement the Federal Highway Administration's design guidelines for older drivers and pedestrians.
- **Preserve Flexibility:** Preserve the existing flexibility provisions in federal transportation law that allow states and metropolitan governments to use transportation dollars for public transportation investments, pedestrian and bicycle improvements, and other investments to support mobility needs of older people.
- **Support Transportation Enhancements:** Transportation Enhancements, the only federal program that focuses specifically on pedestrian and bicycle safety and facilities, provides vital resources to these projects and should be preserved.



Photo: Montana Department of Transportation Transportation for the Elderly and Persons with Disabilities (TransADE).

Notes on Methodology

Unless specifically mentioned otherwise, figures provided are based on STPP's analysis of the 2001 National Household Travel Survey (NHTS 2001). The NHTS consists of a national travel survey and travel diary tracking daily mobility across a representative range of geographies and regions.

For the regional analysis, census divisions were used because of the sampling model of the NHTS in 2001. Information is presented at the metropolitan level as much as possible. Metropolitan areas include cities, their suburbs, and the counties that include them. State maps showing metropolitan area boundaries can be found at: <http://www.census.gov/geo/www/mapGallery/stma99.pdf>

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**Worst Areas of the Country for Isolation of Non-Drivers 65
and Over, Ranked**

Ranking	Area (Census Division)	Non-Drivers 65+ Staying Home	States
#1	East South Central	69%	Alabama, Kentucky, Mississippi, Tennessee
#2	West South Central	68%	Arkansas, Louisiana, Oklahoma, Texas
#3	West North Central	59%	Kansas, Iowa, Minnesota, Missouri, Nebraska, North Dakota, South Dakota
#4	South Atlantic	57%	Dist. of Columbia, Delaware, Florida, Georgia, Maryland, North Carolina, South Carolina, Virginia
#5	East North Central	53%	Illinois, Indiana, Michigan, Ohio, Wisconsin
#6	Pacific	48%	Alaska, California, Hawaii, Oregon, Washington
#7	New England	47%	Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont
#8	Middle Atlantic	46%	New Jersey, New York, Pennsylvania
#9	Mountain	44%	Arizona, Colorado, Idaho, Montana, Nevada, New Mexico, Utah, Wyoming

Source: NHTS 2001. See also map, page 10, above.

Appendix

Driving among 65 and Over Population Selected States

State	Non-Drivers 65+ Staying Home*		Percent of 65+ who are non-drivers	Non-Driver 65+ Population (2000)
Alabama	n/a		18%	104,207
Arizona	n/a		16%	104,371
Arkansas	n/a		21%	77,652
California	46%		22%	782,932
Colorado	n/a		20%	82,428
Connecticut	n/a		28%	132,047
Florida	51%		19%	539,310
Georgia	n/a		27%	210,088
Illinois	57%		22%	330,731
Indiana	n/a		19%	143,255
Iowa	62%		10%	44,249
Kansas	n/a		13%	47,798
Kentucky	75%		23%	114,981
Louisiana	n/a		35%	178,646
Maryland	68%		28%	170,107
Massachusetts	n/a		21%	176,915
Michigan	50%		17%	208,338
Minnesota	n/a		13%	74,753
Mississippi	n/a		16%	55,674
Missouri	n/a		22%	162,786
New Jersey	53%		27%	299,749
New York	43%		34%	820,610
North Carolina	n/a		20%	195,786
Ohio	51%		13%	197,432
Oklahoma	n/a		20%	91,771
Oregon	n/a		11%	46,229
Pennsylvania	49%		27%	509,906
South Carolina	n/a		21%	102,730
Tennessee	n/a		20%	139,337
Texas	66%		16%	339,048
Utah	n/a		8%	15,968
Virginia	n/a		17%	133,299
Washington	n/a		17%	110,349
Wisconsin	53%		16%	110,989

Source: NHTS.

*Data availability in NHTS only allows some state-level specification.

Driving among 65 and Over Population, Transit Service, and Federal Transit Spending Selected Metropolitan Areas

Metropolitan Area (MSA/CMSA)	Non-Drivers 65+ Staying Home	Percent of 65+ who are Non-Drivers	Estimated Population of Non-drivers 65+ (2000)	2002 Transit Service (Revenue Service Miles) (000s)	Service Hours per Person 65 and Over	Average Annual Transit Spending, 98-01, Federal
Atlanta, GA MSA	N/A	32%	99,516	55,729	178	\$124,553,049
Austin-San Marcos, TX MSA	N/A	10%	9,157	17,801	195	\$15,725,140
Boston-Worcester-Lawrence, MA-NH-ME-CT CMSA	N/A	19%	140,888	99,495	136	\$155,903,682
Buffalo-Niagara Falls, NY MSA	N/A	23%	41,749	9,582	52	\$10,377,158
Chicago-Gary-Kenosha, IL-IN-WI CMSA	57%	28%	278,436	215,161	216	\$284,540,150
Cincinnati-Hamilton, OH-KY-IN CMSA	N/A	15%	33,756	18,089	78	\$24,964,775
Cleveland-Akron, OH CMSA	N/A	9%	39,019	37,083	88	\$50,307,037
Dallas-Fort Worth, TX CMSA	N/A	16%	66,534	54,522	129	\$189,061,737
Denver-Boulder-Greeley, CO CMSA	N/A	24%	54,750	47,107	205	\$79,192,730
Detroit-Ann Arbor-Flint, MI CMSA	N/A	20%	129,581	48,160	75	\$44,866,765
Honolulu, HI MSA	53%	31%	36,234	25,294	215	\$25,956,531
Houston-Galveston-Brazoria, TX CMSA	N/A	19%	69,247	61,420	171	\$104,696,265
Indianapolis, IN MSA	N/A	13%	22,394	8,979	51	\$15,113,297
Kansas City, MO-KS MSA	N/A	24%	48,058	11,884	59	\$15,578,257
Las Vegas, NV-AZ MSA	N/A	23%	43,016	22,329	121	\$13,812,580
Los Angeles-Riverside-Orange County, CA CMSA	53%	22%	357,597	234,238	145	\$317,972,580
Miami-Fort Lauderdale, FL CMSA	N/A	27%	153,590	83,927	149	\$109,248,103
Milwaukee-Racine, WI CMSA	52%	19%	40,862	29,836	141	\$27,381,201
Minneapolis-St. Paul, MN-WI MSA	N/A	15%	41,423	42,443	149	\$73,353,840
New York-Northern New Jersey-Long Island, NY-NJ-CT-PA CMSA	48%	37%	1,024,230	821,416	305	\$1,197,320,673
Philadelphia-Wilmington-Atlantic City, PA-NJ-DE-MD CMSA	N/A	26%	221,069	99,615	119	\$144,831,412
Phoenix-Mesa, AZ MSA	N/A	15%	57,634	29,687	77	\$34,868,002
Pittsburgh, PA MSA	N/A	32%	134,584	48,479	116	\$93,107,766
Portland-Salem, OR-WA CMSA	N/A	18%	44,289	42,056	174	\$97,414,085
Rochester, NY MSA	N/A	20%	27,759	6,778	48	\$10,736,213
Sacramento-Yolo, CA CMSA	N/A	20%	40,269	15,243	75	\$33,603,655
San Antonio, TX MSA	N/A	19%	32,968	28,462	167	\$26,485,721
San Diego, CA MSA	N/A	31%	98,972	47,302	150	\$37,367,691
San Francisco-Oakland-San Jose, CA CMSA	N/A	23%	177,569	195,418	250	\$447,304,936
Seattle-Tacoma-Bremerton, WA CMSA	N/A	21%	77,611	94,402	258	\$149,014,410
St. Louis, MO-IL MSA	N/A	21%	69,289	31,909	95	\$86,428,190
Tampa-St. Petersburg-Clearwater, FL MSA	N/A	21%	97,420	18,313	40	\$16,105,293
Washington-Baltimore, DC-MD-VA-WV CMSA	66%	27%	210,413	166,317	216	\$370,028,681
West Palm Beach-Boca Raton, FL MSA	N/A	15%	39,195	-	-	N/A

Source: NHTS 2001. Metropolitan areas generally include cities, their suburbs, and the counties they are in.

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