

# Public Transportation for Handicapped Persons— “Comparable” Service Falls Short

by Rick Mashburn and Michael Matros

**A** handicapped person ought to be able to get around in Chapel Hill, the municipality in North Carolina with the most complete public transportation services for elderly and disabled persons. Sixteen of the 32 buses in the town's transit system are equipped with hydraulic lifts, available to persons in wheelchairs and to ambulatory persons who have difficulty with high steps. In addition, Chapel Hill Transit offers “EZ Rider,” a van service that provides personal, door-to-door service.

Any person certified as handicapped by a physician or other medical professional can use EZ Rider for any type of purpose (i.e., not just medical). Currently, two vans are providing more than 1,500 rides a month to EZ Rider's 275 certified clients. Using EZ Rider or the lift on a bus costs the rider the same as a regular bus trip. The Chapel Hill transit system, in theory, represents the ideal “multi-modal” approach

espoused by most handicapped rights advocates—both an accessible, fixed-route bus system and door-to-door van service. This approach, advocates contend, is the only way to provide service comparable to that available to the general public.

In practice, however, even the best public transit system in the state for handicapped persons falls short of this ideal. People rarely use the lifts on the 16 buses, as little as two to three times a year, estimates Alan Tobias, administrative assistant to the director of Chapel Hill's transportation department. Because of their lack of use, Tobias says that he feels certain that lift-equipped buses will eventually be replaced by those without lifts. Currently, a lift adds some \$20,000 to the cost of a bus.

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For a variety of reasons, primarily the lack of accessibility to bus stops and the absence of a large-scale campaign to educate handicapped persons in the use of the special buses, handicapped persons in Chapel Hill rely almost exclusively on the vans. The heavy demand for this service has caused the town to request a reservation 24 hours in advance. Even though supplementary vehicles are used during peak hours, passengers claim that they have to wait too long and that the vans take them too far out of the way of their destination. Chapel Hill may soon have to limit the number of EZ Rider passengers by tightening the passenger certification criteria.

If handicapped persons in Chapel Hill have problems getting around town, what about those in Charlotte? Each town has two vans in its door-to-door system; Charlotte has ten times the total population. Handicapped rights advocates often cite Winston-Salem's door-to-door service as the most efficiently run urban system in the state, but a high demand there forces trips to be limited mainly to medical purposes. Raleigh's transit system offers only lift-equipped buses, which are used less than a dozen times a year, says city transportation planner Bob Olason. Durham's privately owned transit company offers no special services at all for handicapped persons.

Public transportation systems have grown up almost exclusively in urban areas. Consequently, federal urban transit funds have been linked for the most part to relieving urban congestion. As federal regulations and the handicapped rights movement began to force urban transit systems to address the needs of handicapped persons, these urban systems had to add another component to what was basically a commuter system for able-bodied persons. Most transit

authorities fell short in this task, say handicapped rights advocates. State officials contend the record is mixed, with some areas now providing handicapped persons good service. Nevertheless, Doug Sharer, who administers the urban program in the Division of Public Transportation within the N.C. Department of Transportation (DOT), says, "In most urbanized areas of the state, handicapped people don't have very good mobility if they are dependent on publicly provided transportation services."

Handicapped persons in the rural areas of the state encounter similar problems but in a far different context. Historically, public transit systems rarely have existed in rural areas. Only in the last 15 to 20 years have transportation programs sprung up in rural areas to any extent. In virtually all cases, local agencies or non-profit groups—not public transit authorities—provide the public transportation services that exist. "The principal mission of rural public transit has been to provide transportation to disadvantaged people who did not have private transportation," says Rich Garrity, who oversees rural and small urban programs in the DOT Division of Public Transportation.

In rural counties, a variety of private, non-profit groups and local agencies (departments of social services, councils on aging, area mental health agencies, sheltered workshops, community action agencies, and others) offer van service to various disadvantaged persons, including those with disabling conditions. In many counties, these agencies consolidate the use of their vans, serving more handicapped persons than if the vans were used only by a single agency.

In rural and urban areas, handicapped persons are more dependent on public transportation than the general public. Many handicapped people are physically unable to drive their own vehicles. Because of limited employment opportunities, many are financially unable to purchase their own vehicles. The degree of severity of a handicap depends in large part on how the handicap affects mobility. Therefore, the lack of accessibility to public transportation is often a contributing factor to the severity of the handicap itself. In many cases, transportation is the key to employment, and thus to economic self-sufficiency and general independence. Access to religious and recreational activities can mean the difference between mere existence and a fulfilling life. Handicapped people often consider access to public transportation to be a matter of civil rights.

"Pragmatists" contend, however, that providing every handicapped person with public transportation comparable to that available to the able-bodied population is an impossible dream. "What is 'adequate' is a very subjective

Raleigh's modern buses use their lifts rarely.



judgment," says David King, director of the Division of Public Transportation in DOT. "Complete comparability is an unrealistic standard," says King, "unless government has an unlimited amount of money."

Transportation costs continue to rise while federal support for public transit is being cut. Moreover, the pragmatists say, even though every able-bodied person has access to public transportation, only a fraction of those persons actually use it. Public transportation, so the argument goes, thus should serve only a fraction of the able-bodied — or handicapped — population. "The point is to serve the largest portion of the handicapped population in the most cost-effective manner," says King, "not to provide accessibility for its own sake. That usually means door-to-door vans, not lift-equipped buses."

Public transportation programs in both urban and rural areas must comply with certain *federal regulations* regarding handicapped persons. *State agencies* have less control over how public transportation systems function, but nevertheless do have some means through which to shape transit services for disabled persons. The urban/rural distinction is an important one to keep in mind in reviewing public transportation systems because of the historical context of each type of system, the varying regulations that apply to areas of different size, and the demographics of North Carolina. To understand the problems handicapped persons encounter in getting from one place to another — rural or urban — one must first turn to the recent changes in federal requirements regarding public transportation.

### Federal Regulations: An Overview

Section 504 of the Rehabilitation Act of 1973 prohibits discrimination on the basis of handicap in any program receiving federal assistance (see story, page 82). This law has had a particularly profound impact on transportation policies, from airport terminal design to urban transit systems. In 1978, the U.S. Department of Transportation (DOT) under the Carter administration proposed regulations implementing this law, proposals which generated some of the hottest controversy the department has ever faced. Some 650 persons and groups (including the N.C. departments of Transportation and Human Resources) provided written comments to the U.S. DOT, and 250 made presentations at five field hearings held around the country. On May 31, 1979, the department issued its "final rule" implementing the Section 504 requirement for federal transportation funds.<sup>1</sup>

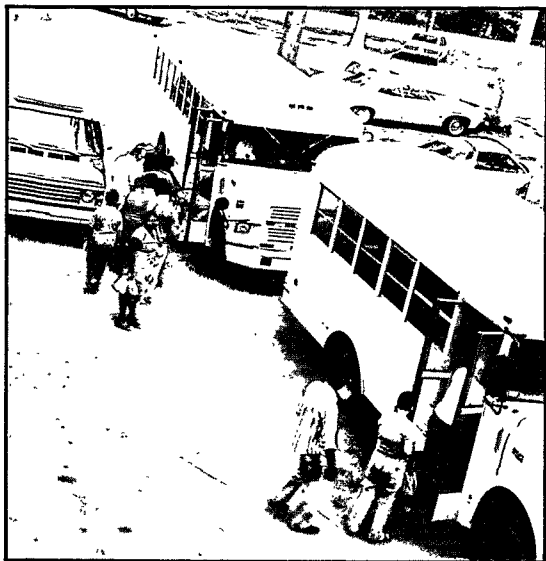
Under the 1979 regulations, all transportation systems receiving federal financial assistance had to be readily accessible to

handicapped persons within 10 years. Bus systems had to make half of their buses accessible to wheelchairs during peak hours. Systems that would not be accessible within three years had to provide special interim transportation that would be comparable to regular mainline service. Recipients of federal mass transit funds had to spend two percent of that money on such interim special service. Door-to-door service could be used as an interim measure, but ultimately lift-equipped buses would be required of every public transit system in the country receiving federal money. If a non-profit group, private agency, or local government received federal assistance for transportation programs, the group had to provide services to handicapped persons that were "comparable" to those provided to regular transit users.

Throughout the country, transit administrators and local officials complained that lifts were too costly and ineffective. Some transit systems immediately purchased lift-equipped buses, but others asked for exemptions from the regulations and permission to implement "local option" services for handicapped persons. Meanwhile, in North Carolina, the regulations had an immediate impact on 9 of the 11 mass transit systems in areas classified as urban (over 50,000 in population).<sup>2</sup> Two of the 11 areas, Durham and Greensboro, have privately owned bus companies, which did not have to comply with the Section 504 regulations. The federal DOT requirements also affected the six public transportation systems operating in North Carolina towns under 50,000 in population (Greenville, Kinston, Lumberton, Rocky Mount, Salisbury, and Wilson). The regulations, to a lesser extent, also affected rural areas, which depend exclusively on vans and small buses.

The "local option" approach quickly became the alternative hope of those officials opposed to the federal regulations. In 1980, each house of Congress passed a local option bill, but the two houses never worked out their differences; no law was enacted. Then in early 1981, soon after the Reagan administration had settled into Washington, the new Reagan transportation officials reviewed the public transit regulation. They established a clear policy in favor of local option, which means a community may have a choice between providing lift-equipped buses or any alternative form of special transportation for handicapped persons.

Meanwhile, a series of legal battles was underway over the federal regulations. In June 1979, the American Public Transit Association (APTA) and several of its members had sued the U.S. DOT, alleging that the regulations on accessibility to public transportation had



In Alamance County, centralized administration of vans and buses has expanded their use by handicapped persons.

exceeded DOT's authority and were arbitrary and capricious. The Federal District Court for the District of Columbia upheld the DOT regulation, but the U.S. Court of Appeals for the District of Columbia Circuit reversed that decision, ruling in favor of APTA.<sup>3</sup> The Court of Appeals said that Section 504 might require a transit authority to take "modest, affirmative steps to accommodate handicapped persons" but that requirements to make extensive and costly efforts to modify existing systems exceeded the authority of the department.

On July 20, 1981, the Reagan administration replaced the 1979 regulation with a new "interim final rule," which remains in effect today.<sup>4</sup> The new regulation takes the local option approach. It requires a transit authority to do no more than certify with a signed statement "that special efforts are being made to provide transportation that handicapped persons can use, that is reasonable in comparison to the service provided to the general public, and that meets a significant fraction of the transportation needs of such persons."<sup>5</sup> The 1979 regulation required "comparable service" for the area covered by the system, the fares, and the waiting time of passengers. The new rules do not specify such a requirement. Regarding enforcement, the Reagan regulation states that "the Department will accept only those complaints of noncompliance that allege a consistent pattern of failing to make efforts called for under this section."

## The Local-Option Era — What Role for the State?

In the new federal era of local option for accessibility of public transportation, urban

transit systems have turned increasingly to van services and away from fixed-route service for handicapped persons. Moreover, the quality of the service often depends upon the extent of monitoring by advocacy groups. The new federal regulations give local systems a great deal of freedom in determining the quality and scope of their transit services for handicapped persons. State laws and executive branch agencies, in most cases, have little control over the decisions of local transit officials in urban areas.

The new local-option emphasis affects rural areas less than urban areas. Almost all public transportation in rural North Carolina is provided by agencies through vans and small buses.<sup>6</sup> Since hardly any buses are used in rural areas, the Carter-era requirement for lift-equipped buses rarely applied to rural service. Nevertheless, the new local-option approach could give some agencies more leeway in emphasizing service for disadvantaged persons without providing comparable services for handicapped persons.

Independent of the federal shift to a local-option philosophy, the state of North Carolina has some powers and responsibilities in this area. A 1973 state law provides that "the handicapped and physically disabled are entitled to accommodations, advantages, facilities, and privileges of all ... public conveyances or modes of transportation..."<sup>7</sup> The law has no complaint or affirmative action sections, however — no teeth. And the courts have never interpreted it to have an affirmative action intent.

Even if this law were stricter, it would be difficult to enforce because the state has very little financial leverage regarding urban transit systems. North Carolina provides only 10 percent of the capital cost of most public transportation, and it contributes nothing toward operating budgets. "It is one thing to require certain standards," Sharer says, "and another to provide the means to enforce them. We have to look to federal authorities to determine if a transit system is providing adequate service." The Public Transportation Division within the state DOT has a staff of only 16.

For most transit systems, the federal government provides about 80 percent of the money for capital purchases and 50 percent of operating deficits. Urban areas with populations over 200,000 receive the money directly from Washington. In federal FY 83, transit systems in Charlotte, Fayetteville (includes Ft. Bragg), and Raleigh (the three areas classified over 200,000 by federal officials) received a total of \$4.5 million in federal monies. Cities with populations

between 50,000 and 200,000 receive federal assistance according to federal allocation guidelines (about \$7 million total for FY 83). The governor and the state DOT have some discretion over these funds. After the federal formula is satisfied, the state generally has only a small amount of federal funds available to distribute on a discretionary basis to these mid-sized urban areas. Because the state DOT influences the amount of federal funds going to mid-sized areas, it has some leverage in monitoring how these funds are used.

The state has more power over how federal funds — some \$3.7 million in FY 83 — are spent in areas under 50,000 population. About 51 percent of the state's population lives in a rural area (under 2,500 in population), but almost 80 percent live in areas under 50,000. In other words, state transportation officials have discretion over \$3.7 million in federal mass transit funds available to areas serving four out of five people in the state.

The State Board of Transportation and the Department of Transportation have three ways to determine how federal mass transit funds are used in rural and non-urban areas. First, the State Board, generally following DOT staff recommendations, awards "Section 18"<sup>8</sup> mass transit federal funds to any private company, local transit authority, municipality or county, non-profit agency, or local governmental agency in an area serving a rural or non-urban population. In FY 83, the state distributed \$2.5 million in Section 18 funds to various agencies (see list on page 53). These funds are not targeted for disabled persons, but the recipient must comply with federal regulations regarding handicapped persons. The funds may be used for capital or operating expenses. The service has to be available to the general public.

Second, the State Board, again usually following DOT staff recommendations, distributes federal "Section 16 (b)(2)"<sup>9</sup> mass transit funds. These funds are targeted for elderly and handicapped persons and are only available for capital assistance. Grantees must be private, non-profit agencies. In the eight-year history of this program, 16 (b)(2) money has paid for some 500 vehicles used in almost every county. These funds are available to both urban and non-urban areas.

Third, the DOT staff has attempted to encourage agencies in rural areas to maximize the use of the vans that they have. Contracts-for-services, memoranda of understanding, and informal arrangements between local non-profit agencies and governmental units have resulted. "We have tried to combine the transportation resources of various client groups in order to spend less money providing more service," says

Garrity, the DOT rural area coordinator. "We have built up informal transportation networks for disadvantaged persons in every county, and 22 counties will participate in the Section 18 program next year." Because DOT recommends to the State Board of Transportation who should receive the federal Section 18 money, local agencies are generally willing to develop a coordination plan for sharing van services for elderly and handicapped persons. Such a coordination plan in a rural area is a prerequisite for receiving Section 18 funds, says Garrity.

Alamance County receives 16(b)(2) funds. Moreover, services are coordinated there so as to maximize the use of the vans available. The Alamance County Association for Mental Health administers a fleet of 25 vans and 3 buses, some owned and once used exclusively by other agencies and organizations. Many of those vehicles were used very little until the coordination plan took effect. Now the vans are in almost constant demand, carrying 700 passengers a day, about 25 of them clients in wheelchairs requiring a van with a lift.

In June, the State Board of Transportation voted to distribute \$780,000 in 16(b)(2) funds to private agencies in 18 counties (federal approval, which has never been denied, is expected soon). The Alamance County Association for Mental Health received \$80,430 to purchase four 15-passenger vans, one wheelchair lift, and eight mobile radio units.

State officials also have some potential leverage over local transportation policies through the Division of Vocational Rehabilitation Services (VR), part of the Department of Human Resources. This agency generally focuses on an individual's transportation needs, however, not on a public transit approach. VR offices across the state use primarily federal funds to provide a variety of services — including transportation — to help handicapped persons get a job. But VR rarely considers public transportation an option, says Ron Loftin, assistant VR director for operations and support services. "We have found no alternative to helping people get their own [private] transportation," he says. In 1983, VR spent \$87,000 purchasing and modifying private vehicles for its clients, and another \$200,000 on purchased rides, mainly in taxicabs.

Vocational Rehabilitation's four engineers occasionally do offer technical assistance to transportation planners and administrators. Also, VR is the major funding conduit for the Metrolina Independent Living Center in Charlotte, which is presently drawing up an ambitious proposal for a new system of mass transit for handicapped persons there. However, even John Dalrymple, the strongest advocate

within VR for fixed-route service, believes the issue of public transportation falls largely outside the division's mandate. "Unfortunately, I have to devote most of my time and energy to other areas," he says.

## Local-Option Philosophy Takes Hold

In *urban* areas, two central questions dominate the current status of public transportation for handicapped persons. First, does any state or federal agency have the authority or means to

require specific "comparable services" for handicapped persons in local public transit systems? Second, is a "separate-but-equal" van system as good as a fixed-route, accessible system required by the 1979 regulations?

In *rural* areas, handicapped persons and policymakers face two similar, but distinctive issues. First, to what extent can the state Department of Transportation monitor and improve services for handicapped persons? Second, how can advocacy groups work to expand the coordinated-type transit service for handicapped persons (like that used in Alamance County) to more rural areas?

**Urban.** At present, urban transportation administrators and officials decide themselves what they consider to be adequate service and how they will provide it. Generally they can set their own limitations on the money they spend. The Reagan regulation *suggests* that a local transit system spend 3.5 percent of its *federal funds* (i.e., not total budget) on handicapped persons' needs. This suggested level of spending comes at a time when public transportation systems face a variety of financial pressures.

Beyond rising expenses faced by other concerns — wages, fuel prices, etc. — public transit systems are receiving less federal assistance for overall operating expenses due to the provisions of the 1982 Surface Transportation Act.<sup>10</sup> This is not a "federal budget cut" for handicapped persons, per se. However, the action does illustrate how a policy towards reducing federal involvement in all public transit affairs has the possibility of affecting handicapped persons, especially when viewed in combination with the new federal regulation.

Thus far, the best urban system in the state for handicapped persons, in Chapel Hill, still is spending over 5 percent of its *total transit* budget on EZ Rider alone (and don't forget the 16 lift-equipped buses). Meanwhile, Charlotte in 1983 had a \$160,595 budget for handicapped persons, less than 1.7 percent of the \$9.6 million total budget for public transportation in the city. Charlotte plans to triple the number of vans next year (from two to six), but the money to operate the vans will be increased by less than 20 percent. In Winston-Salem, financial stresses on the overall transit system have caused officials to reduce fixed routes and cut office staff for special services from five to two.

Accessible fixed-route service has ceased to be a serious consideration among transit systems that did not buy lift-equipped buses while the 1979 ruling was in effect. Voucher and van systems dominate, if service for handicapped persons exists at all. In Kinston, certified handicapped persons can buy vouchers for rides with the local taxi company (the voucher is

## Recipients of "Section 18" Federal Funds\* For Mass Transit, 1983

Area Served	Recipient
1. Anson County	Anson County Transportation Authority
2. Avery County	Avery County Transportation Authority
3. Bertie, Halifax, Hertford, Northampton counties	Choanoke Public Transportation Authority
4. Cherokee Indian Reservation	Eastern Band of Cherokee Indians
5. Davie County	Yadkin Valley Economic Development District, Inc.
6. Elizabeth City to Manteo bus service (with intermediate stops)	Virginia Dare Transportation Company
7. City of Greenville	Greenville Area Transit
8. City of Kinston	City of Kinston
9. City of Lumberton	City of Lumberton
10. Madison County	Madison County Transportation Authority
11. Mitchell County	WAMY Community Action
12. Pasquotank, Perquimans, Camden, Chowan Counties	PPCC District Health Department
13. Person, Granville, Vance, Warren Counties	Kerr Area Transportation Authority
14. City of Rocky Mount	Rocky Mount Transit
15. City of Salisbury	City of Salisbury
16. Watauga County	Watauga County Transportation Authority
17. City of Wilson	Wilson Transit
18. Stokes County	Yadkin Valley Economic Development District, Inc.
19. Surry County	Yadkin Valley Economic Development District, Inc.
20. Yancey County	Yancey County Transportation Authority

\*Section 18 of the Urban Mass Transportation Act of 1964, as amended.

cheaper than a taxi ride but not as cheap as a bus ride). In Winston-Salem, one of the best service providers, transportation planners hope to supplement the present limited van service with a full-sized bus accommodating groups of people in wheelchairs. The bus would be used for recreational outings, such as the trips by the city's wheelchair basketball team.

Urban officials, even in cities that have lift-equipped buses, have turned to vans or voucher systems primarily because of lack of use of fixed-route service. The apparent failure of the lift-equipped buses to be used in Chapel Hill, Raleigh, and other cities stems from two things: a failure to market the service adequately and a lack of accessibility to the service. Merely providing equipment is not enough. If a person cannot get out of the house without assistance, or is hindered by curbs or hills between the house and the bus stop, he or she will be unable to use the bus.

Furthermore, handicapped persons have to know where the service exists and how to use it. To shrug off fears and dependence, to venture out alone, handicapped persons need assurance that the transportation system will be safe and reliable. Waiting in a wheelchair for a tightly scheduled bus, filled with able-bodied persons going to work, requires far more boldness than getting personal assistance in boarding a van.

Developing a regular clientele of handicapped bus riders takes time and effort, as the experience of the Seattle, Washington transit system illustrates. In 1980, Seattle had 100 lift-equipped buses. Handicapped persons used each lift about five times a week for a per-ride cost of \$26 to the bus company. Then Seattle hired a

full-time marketing coordinator. He put on a series of public demonstrations for handicapped persons at shopping centers and other locations and developed special training for the drivers on mechanical and inter-personal issues. In three years, the average number of lift-use rides in Seattle more than tripled, from 1,800 to 6,000 per month.

If riders have made Seattle's investment in lift-equipped buses worth the time and money the city has spent, such a success story does not appear to be on the horizon in North Carolina. Chester Helms of the Metrolina Independent Living Center in Charlotte has developed an ambitious plan that would make use of both accessible buses on a fixed route and a door-to-door van system that could take a person to a convenient bus stop and directly to some destinations. Helms believes that accessible fixed-route service is essential to the independence of handicapped persons and is the only means of offering service truly comparable to what is available to able bodied persons.

City transit planners in Charlotte do not agree that a fixed-route service can work. "We have looked at Mr. Helms's plans before, and we decided that we are committed to what we are doing now," says Lilla Hoefer, manager of the administrative division of the city's transportation department. "We decided that our van service, which is being expanded, would be able to serve more handicapped persons than the fixed-route service he proposes."

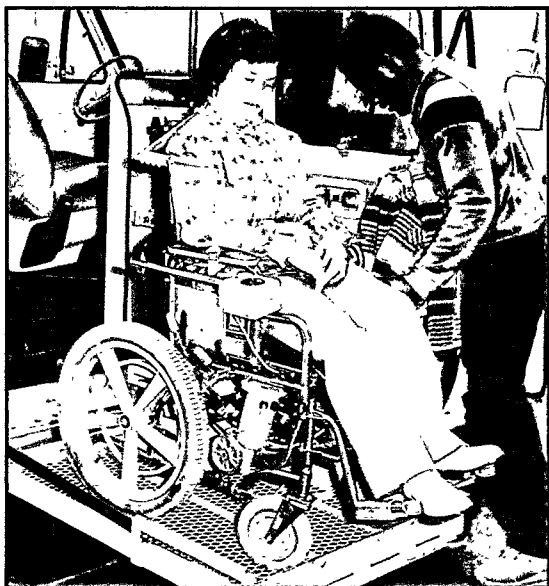
**Rural.** The state Department of Transportation has more influence over public transportation for handicapped persons in rural areas than it does in urban areas. The amount of federal funds available to rural areas, however, is far smaller: \$3.7 million in areas under 50,000 compared to \$11.5 million in areas over 50,000. Because 80 percent of the state's population lives in areas under 50,000 in population, the state has a far greater challenge in those areas.

The state has some very real leverage in controlling the quality of transit service that exists in rural areas, but it has far less funds with which to work. Consequently, the more visible and organized the handicapped community is in certain areas, the more likely that public transit service will improve in that area. Like urban areas, the strength of the handicapped advocacy community may well determine the quality of service available in particular communities.

### Advocacy for Handicapped Persons

The lack of strong federal or state control over local transit systems in rural or urban areas leaves two groups currently shaping transit policies affecting handicapped persons — the local transit authorities and advocacy groups

Charlotte planners feel that their van system can benefit more handicapped persons than fixed-route service.



Courtesy City of Charlotte.

for handicapped persons. The Reagan administration *does require* transit authorities to consult with the local handicapped community before deciding what approach to pursue in providing service. Moreover, current enforcement practice depends entirely upon *receiving complaints*, which puts an additional responsibility on the handicapped consumer of the transit service.

The extent to which local officials and agencies will provide comparable services for handicapped persons depends largely upon the sophistication and commitment of the handicapped advocacy groups themselves. Some advocates think that too much is expected of handicapped persons. "Handicapped persons haven't known what resources are available to them, what the regulations say, who they should talk to," says Ron Mace, a handicapped architect and consultant to handicapped advocacy groups. "Handicapped people have been taught to accept whatever is offered from service agencies. It's a new concept to go out and get what you need yourself."

The issue of advocacy and transportation presents something of a vicious cycle. If handicapped persons do not make their needs known, then transportation administrators do not know how to provide for those needs. On the other hand, when handicapped people lack transportation, they also lack the ability to organize and to make their voices heard. As Alan Willcox of the Western Alliance: A Coalition of Disabled and Concerned Citizens puts it, "We're having enough difficulty getting active membership and fighting to stay alive as an organization. How can we address issues such as transportation when people don't have a way to get to a meeting?"

Despite widespread comments about the inadequacy of public transportation, no major complaints have been officially lodged with any agency beyond local authorities. Lockhart Follin-Mace, director of the Governor's Advocacy Council for Person with Disabilities, says the council has directly addressed no issues pertaining to public transportation. "We don't solicit cases, and we simply haven't had many complaints about that."

## Conclusions

A lot of initiative must rest with the handicapped rights movement regarding public transportation. Nevertheless, policymakers in North Carolina have at least four ways to address the quality of public transit service for handicapped persons.

**1. The state Department of Transportation should continue to allocate funds to rural areas that provide efficient services to handicapped persons.** Twenty-two counties will receive

federal Section 18 monies in 1983-84. More counties should be encouraged to apply for these federal funds, which so far have not been cut.

**2. The state Department of Transportation should monitor local transit service in urban areas.** If handicapped persons are not being served, the department or the State Board of Transportation can formally report the lack of service to the Governor's Advocacy Council for Persons with Disabilities and to the federal Department of Transportation.

**3. The Division of Vocational Rehabilitation Services should consider spending some of its transportation funds for public transportation.** Especially in urban areas where lifts already exist (like Raleigh), VR could make a significant difference in how much they are used by conducting workshops to familiarize mobility-impaired persons with that service. In the process, VR might have much more impact with its funds than it does "paying the way" of individual clients.

**4. The Governor's Advocacy Council for Persons with Disabilities could take more initiative in monitoring the public transit systems in urban areas.** If the service does not meet even the "local option" requirements of the current federal regulations, the council could seek to pressure the system into compliance.

The trend in Washington is in the direction of local option, with enforcement at a minimum. Handicapped persons, and to some extent, state agencies, can help affect what option a local transit system chooses. Through education, advocacy, and monitoring, state agencies can compensate for some of the teeth missing in current federal regulations. Through organization and a clear set of goals, handicapped persons can continue to influence the development of federal policies and the quality of local service. □

## FOOTNOTES

<sup>1</sup>49 CFR Part 27, as published in 44 Federal Register 106, May 31, 1979.

<sup>2</sup>The 11 systems are in Asheville, Chapel Hill/Carrboro, Charlotte, Durham, Fayetteville, Gastonia, Greensboro, High Point, Raleigh, Wilmington, and Winston-Salem.

<sup>3</sup>*American Public Transit Association v. Goldschmidt*, 485 F. Supp. 811 (D.D.C., 1980) and *American Public Transit Association v. Lewis*, 655 F.2d 272 (D.C.Cir. 1981).

<sup>4</sup>49 CFR Part 27, as published in 46 Federal Register 138, July 20, 1981.

<sup>5</sup>49 CFR 27.77 (a)(1).

<sup>6</sup>Between Elizabeth City and Manteo, full-sized bus service exists for rural residents, provided by the Virginia Dare Transportation Company.

<sup>7</sup>NCGS 168-3.

<sup>8</sup>Section 18, Urban Mass Transportation Act of 1964, as amended, 49 USC Section 1601 *et. seq.*

<sup>9</sup>Section 16(b)(2), Urban Mass Transportation Act of 1964, as amended, 49 USC Section 1612.

<sup>10</sup>PL 97-424.