



National Conference on ***Aging & Mobility***

Senior Mobility in the 21th Century— What Can We Do To Prepare?



March 25-27, 2002
Scottsdale, Arizona



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ABOUT OUR CONFERENCE SPONSORS

AARP is a nonprofit membership organization of persons 50 and older that is dedicated to addressing their needs and interests. AARP seeks to enhance the quality of life for all by promoting independence, dignity, and purpose through education, advocacy, and service. Founded in 1958 by retired California educator Dr. Ethel Percy Andrus, AARP (formerly known as the American Association of Retired Persons) today represents more than 34 million members. More than half of AARP members are working, either full or part-time, while the remainder are fully retired. AARP excels as a dynamic presence in every community, shaping and enriching the experience of aging of each member and for society.

The American Association of State Highway and Transportation Officials (AASHTO) is a nonprofit, nonpartisan association representing highway and transportation departments in the 50 states, the District of Columbia and Puerto Rico. It represents all five transportation modes: air, highways, public transportation, rail and water. Its primary goal is to foster the development, operation and maintenance of an integrated national transportation system. Committees composed of member department personnel who serve voluntarily do much of AASHTO's work. The Association provides a forum for consideration of transportation issues, and is frequently called upon by Congress to conduct surveys, provide data and testify on transportation legislation. Through its policy development activities, member departments often address federal programs and provide guidance.

The Arizona Department of Transportation's (ADOT) mission is to provide a safe and efficient transportation system, together with the means of revenue collection and driver's licensing for Arizona. The core business functions of ADOT are (1) development and operation of the transportation infrastructure; (2) license and vehicle registration; and (3) revenue management. In carrying out these functions, ADOT emphasizes quality products and services, resource development, and public trust.

The Association of Metropolitan Planning Organizations (AMPO) is a nonprofit membership organization established in 1994 to serve the needs and interests of metropolitan planning organizations (MPOs). As a condition for spending federal highway or transit funds in urbanized areas, federal highway and transit statutes require the designation of MPOs, which have responsibility for planning, programming and coordination of federal highway and transit investments. AMPO offers its member MPOs technical assistance and training, conferences and workshops, frequent print and electronic communications, research, a forum for transportation policy development and coalition building, and a variety of other services.

Blue Cross/Blue Shield of Arizona is one of the state's largest health insurers, dedicated to connecting Arizonans to quality and cost effective health care services for more than 62 years. Today, the company serves more than 700,000 customers with a wide range of health care plans to serve virtually every market segment. Products range from PPO and HMO plans for individuals and groups to corporate health services products that provide large, self-insured employers access to provider networks for both their health benefit plans and workers' compensation programs. Blue Cross/Blue Shield of Arizona is one of 45 independently licensed Blue Cross plans providing health coverage and claims services to one in four Americans. As an independent, not-for-profit and locally managed company, Blue Cross/Blue Shield of Arizona employs more than 1,200 people at its Phoenix headquarters and regional offices in Tempe, Sun City, Tucson, and Flagstaff.

Easter Seals Project ACTION (Accessible Community Transportation in Our Nation) is a Congressionally created, national technical assistance program authorized under the Intermodal Surface Transportation Efficiency Act (ISTEA). The foundational work of Project ACTION is in promoting cooperation between the disability community and the transportation industry. This work enables improved access to transportation for people with disabilities and the provision of accurate and practical information to help transportation operators implement the Americans with Disabilities Act (ADA). Eighty-four innovative demonstration projects and research initiatives in local communities throughout the nation have been funded. Fourteen technical assistance projects have been funded to create concrete solutions to the pressing ADA accessibility issues faced by public transit operators. Project ACTION provides training, resources and technical assistance to thousands of disability organizations, consumers with disabilities and local transportation operators. It maintains a resource center with the most up-to-date information on transportation accessibility.

The Federal Highway Administration (FHWA) provides expertise, resources, and information to continually improve the quality of our nation's highway system and its intermodal connections. The FHWA is part of the Department of Transportation and is headquartered in Washington, D.C., with field offices across the United States. The two major programs of the FHWA are the Federal Aid Highway Program and the Federal Lands Highway Program. The FHWA provides technical expertise to its partners and customers in areas such as roadway and bridge design; construction and maintenance; value engineering and other project and program evaluation tools; policy and planning; highway safety; intelligent transportation systems; environmental protection and enhancement; innovative financing; and land acquisition.

The Federal Transit Administration (FTA) is part of the Department of Transportation and is the agency that helps cities and communities nationwide provide mobility for their citizens. Through its grant programs, FTA provides financial and planning assistance to help plan, build, and operate rail, bus and paratransit systems. The agency also assists in the development of local and regional traffic reduction and serves as a clearinghouse for FTA documents and information on issues of mass transit and public transportation.

The Roy P. Drachman Institute is a research and public service unit of the University of Arizona. The Institute was established in 1986 to promote the environmentally sensitive and resource conscious development of land and communities in the urban, rural, and suburban Southwest. The Institute is active in service, education, and training in current and emerging issues in planning, housing, urban design, and community and economic development. The Institute also maintains a funded research program addressing key land use and transportation issues.

The Hartford Financial Services Group, Inc. (NYSE: HIG) is one of the nation's largest insurance and financial services companies. The Hartford Group is a leading provider of investment products, life insurance and group and employee benefits; automobile and homeowner products; business insurance; and reinsurance. The company is the largest seller of individual annuities in the United States and has been a provider of auto and homeowners insurance to members of AARP since 1984.

Introduction

“Old,’ ‘aged,’ ‘elderly’ all mean well along in years. An old person has lived long, nearly to the end of the usual period of life. An aged person is far advanced in years and is usually afflicted with the infirmities of age. An elderly person is somewhat old, but usually has the mellowness, satisfactions, and joys before him.”

Random House Dictionary of the English Language, Unabridged Ed. 1973 (p.1002)

“Madrid, Spain – The predictions are almost cataclysmic; in 50 years, if trends continue, the number of people older than 60 will triple. Those 2 billion seniors would outnumber the world’s youths. By 2150, one third of the world’s population would be older than 60. But long before that, gains in longevity could bring a worldwide economic crisis, experts warn.” So began an article on the United Nations Second World Assembly on Aging where representatives from 160 countries met for a five-day summit in Spain. The United Nations says older populations will significantly change patterns of “savings, investment and consumption, labor markets, pensions, taxation ... health care, family composition, living arrangements, housing and migration. Such a global demographic transformation has profound consequences for every aspect of individual, community, national and international life.”



What should also be added is that older populations will significantly affect the demand, design and delivery of transportation infrastructure and services. While world leaders



were discussing the implications of the booming population trend in aging on a worldwide basis, the Maricopa Association of Governments (MAG) was hosting the National Conference on Aging and Mobility in Arizona and discussing the transportation implications for the United States. More than 205 attendees

from across the country and representatives from Canada, Australia and the United Kingdom convened to discuss this issue.

There were many key themes that evolved during the conference. The evolving process of global aging needs to be integrated within the larger process of development and growth. Changes in attitudes, policies and practices need to focus on the empowerment of older persons to fully and effectively participate in the economic, political and social life of their societies. The aging population is a universal force that has the power to shape the future as much as globalization. It is, therefore, essential to recognize the ability of older persons to contribute to society. Forward thinking will enable us to embrace this potential.



Transportation is the means by which seniors can actively participate and contribute. Currently, there are nine wage earners supporting each senior. By 2050, that ratio will be four wage earners supporting each senior. The fabric of society will necessitate a larger role for part-time work and volunteering. The sooner governments act, the better. By 2030, it is unlikely that

there will be sufficient public funds to support the wide range of services needed. Seniors will want to be mobile because not being able to get around restricts access to economic, social, and health care services and reduces the ability for self-care. The economic impact associated with lack of mobility includes lost income, reduced employment opportunities, increased costs of delivering goods and services, increased costs of transport for medical care, and macro-economic losses due to decreased discretionary spending (shopping, cultural events, restaurants, and recreation).

The impetus for hosting the national conference began when MAG updated its Long Range Transportation Plan and recognized elderly mobility as a critical element. As a result, MAG formed an Elderly Mobility Working Group comprising 75 representatives from transportation and social service agencies, retirement communities, elderly advocacy groups, faith-based organizations, health care, and city, county, and state governments. The Working Group identified four key objectives:

1. Develop a Regional Action Plan.
2. Utilize input from seniors in the Action Plan.
3. Integrate the Plan's recommendations into the MAG transportation planning process.
4. Convene a national conference on aging and mobility.

It was clear that the Phoenix area was not alone in addressing this critical issue; therefore, it was deemed necessary to bring together the leading researchers and practitioners across multiple disciplines to increase the national dialogue and action on this issue. The key to the development of this conference was the dedication of the 30 co-sponsors and the metropolitan planning organizations and councils of governments on the planning subcommittee.

The conference was designed to help local governments and community-based organizations respond to the transportation challenges related to an aging population by highlighting state-of-the-art research, policies and programs; sharing best practices; formulating strategies and developing a national legislative agenda on aging and mobility issues for the Reauthorization of Transportation Equity Act of the 21st Century (TEA-21). What made this conference unique was the synergy of the various disciplines (transportation, social services, health care, governments) all focusing on one issue.

The National Conference on Aging and Mobility: Senior Mobility in the 21st Century – What Can We Do To Prepare? reflected the goal to guide policy formulation and implementation through four tracks:

- Track A:** Transportation Planning/Design and Project Development
- Track B:** Senior-Friendly Development Planning
- Track C:** Alternative Transportation Modes
- Track D:** Older Driver Issues and Programs

These proceedings will give the reader the main points learned from each of the tracks. Many of the presenters had a similar core message that reinforces the importance of these issues.

General Session 1: How Will We Get There from Here? Strategies to Keep America Moving

Joseph Coughlin from the Age Lab at the Massachusetts Institute of Technology was the keynote speaker for the conference. He set the stage with an overview of the key statistics that will drive policy and key strategies to keep older Americans moving. Today, 12 percent of the population is over 65, but by 2020, older adults will represent 17-20 percent of the population. Transportation planners must prepare for a population where at least one in five people will be elderly. Because being old does not necessarily mean being sick, poor, disabled or institutionalized, transportation planning must be more comprehensive than serving just medical needs of seniors. Due to improved health, education and income, there will be increased levels of activity and demand for mobility.



Mr. Coughlin outlined seven approaches to older adult mobility:

1. **Driving and Self-Regulation**

Most older drivers choose when and where to drive based upon conditions and comfort; e.g., not in poor weather, at night, or during peak congestion. Continuing driver education courses are useful for the older driver to maintain skills and knowledge.

2. **Technology-Enabled Driving**

“Pushing the car” – there are some options in technology-enabled driving. The integration of intelligent transportation systems can improve safety with such technological improvements as night vision, collision avoidance, vehicle assistance, and improved design.

3. **Friends and Family**

Riding with friends and family is the number one alternative to driving. This can be difficult because of feelings of imposing on the driver and the need to schedule around someone else’s routine.

4. **Public Transportation**

Public transportation is the next option available for seniors who don’t drive. But the challenge is that most seniors are “aging in place.” More than 70 percent of the U.S. populations live in the suburbs or rural regions. Because of the “3Ms” associated with the suburban home: Marriage, Mortgage, and Memories, many seniors don’t want to move. But public transportation/accessibility in the suburban areas is often limited. Seniors become isolated and depressed; “marooned” in the American Dream.

5. Paratransit/Demand Response

The whole idea of mobility revolves around demand response. People would like to travel when they want and where they want. But paratransit has been developed primarily around transportation to social services.

6. Land Use and Development

Livable communities or transit-oriented development may provide mobility options for older adults. Rethinking the community design requires time and real partnering with real estate firms and developers, to create options for mobility other than having to drive a car. What we put into place now will take ten years to come to fruition.

7. Do Nothing

Mr. Coughlin emphasized that there is no silver bullet, no single solution to resolve this issue. There are many strategies for keeping older Americans on the move. Change agents will include individual planning, family and friends, the health care industry, and local, regional, state and federal governments. Planning for transportation options is both an individual and societal responsibility. Strategies to keep seniors moving include:

<u>Change Agent</u>	<u>Trigger Event</u>	<u>Possible Actions</u>
Individual	Retirement Planning	Financing lifelong mobility
Family/friends	Medical diagnosis/frequent incidents	Build informal networks/mobility counseling
Industry	Changing market	Technological innovation/Employee eldercare benefit option
Local government	Intergenerational budget politics (school vs. improvements)	Land-use zoning friendly to bike/pedestrian/transit connectivity
Regional government MPO/COG	Transportation Improvement Plan (TIP)	Transportation investments beyond journey to work/transit-oriented development
State government	Older driver politics State Transportation Improvement Plan (STIP)	Safe mobility beyond testing Older adults become STIP priority
Federal government	TEA-21 Reauthorization	Mandate TIP/STIP inclusion Tax incentives for innovation

Transportation is as vital to healthy aging and independent living as physical health and financial security. Dr. Coughlin concluded with this thought, "Creating new ideas requires a different pattern of thinking. Instead of looking within the accepted boundaries that define how we do things today, real innovators look systematically across them – and by doing so they can find unoccupied territory that can represent real change."

General Session 2: National and Regional Perspectives on Improving the Mobility and Safety of Older Persons

Audrey Straight, Senior Analyst, AARP Public Policy Institute

AARP commissioned the *Understanding Senior Transportation Survey*, a nationwide telephone survey of adults age 50 and older to examine transportation needs and preferences.

The survey data show that age alone is not the best indicator of transportation mode use, transportation problems or personal mobility.



Health and disability status (HDS) has its own unique impact on mobility and is a strong predictor of mobility in the population age 75+. Individuals aged 85 and older with excellent HDS are more mobile than their younger counterparts. Commonly identified problems are inconsiderate drivers, traffic congestion, night driving, poor roads, cost of driving, and crime.

Analysis of the findings of this survey suggests two major areas for development of policies to keep people mobile and connected to their communities.

1. Breaking the link between poor health, disability status and reduced mobility. If various transportation options were made more accommodating, maybe more people with poor health would travel.
2. Addressing the problems identified by older transportation users with driving, ride sharing, public transportation, walking, bicycling and taking taxis.

Richard A. Marottoli, Chair, Transportation Research Board Committee on Safe Mobility of Older Persons

Mr. Marottoli's presentation was an update of the Transportation Research Board Special Report 218 that focused on new research and new applications for Improving Mobility and Safety for Older Persons. A steering committee was chosen to oversee and identify authors and reviewers for the chapters. Seventeen sections are being analyzed, including personal travel (epidemiology, demographics, mobility needs, mobility options, sustainability of options, adaptive strategies and functional capabilities); highway environment (highway design research, practical applications and land use); vehicle (occupant protection and crash avoidance) and transportation policy.

Donald R. Trilling, United States Department of Transportation, Office of the Secretary

In 1999, the U.S. Department of Transportation (USDOT) led a national dialogue through regional forums, workshops, professional society meetings, international conferences, focus groups and national telephone surveys. These discussions and ideas led to a comprehensive list of recommendations that were presented to the Transportation Research Board's international conference on *Transportation in an Aging Society – A Decade of Experience* (November 1999). Improving safety and mobility for older persons is now a national agenda item. Data show that older drivers can be safe drivers. They are involved in the fewest fatal crashes. However, older drivers are more fragile and vehicle designs need to take this into consideration. For example, seat belts are less effective with those who have brittle bones.

Older driver traffic fatalities could double or triple by 2030. What can we do about this? The national agenda calls for seven areas of action:

1. Safer and easier infrastructure.
2. Safer, easier-to-use automobiles.
3. Improved competency of older drivers.
4. Better, easier-to-use public transportation.
5. State and local mobility action plans.
6. Better public information.
7. Basic social policy research.

Most agree we need to identify and remove problematic barriers, and educate the media on how to effectively frame the issues. Policy research needs to establish the relationship between mobility and aging in place and reducing health care costs.

Suzanne Quigley, Human Services Program Manager, Maricopa Association of Governments

As the metropolitan planning organization for the Phoenix metropolitan area, the Maricopa Association of Governments conducted a study on the transportation needs of seniors. Approximately 20 percent of the population will be over 60 by 2025 and are expected to stay in place, living in clusters where they already are. Maricopa County has already begun to experience this aging trend. Over the past decade, the senior population has grown by 92 percent.

The planning process took eight months and the committees carefully looked at two major implications of aging and mobility: safety and quality of life. To develop the regional plan, more than 75 stakeholders participated, including representatives from cities, state government, transit, service/health care providers, retirement communities, faith-based groups, and educational institutions.



The planning then focused on four primary areas: infrastructure and land use, alternative modes of transportation, driver competency, and training and education. The result of the process was a regional action plan with 25 recommendations. The plan emphasizes a coordinated community response to solve this issue. (See the Appendix for the Executive Summary.)

Claudia Walters, Councilmember of the City of Mesa, Chair of the MAG Elderly Mobility Stakeholders Group

Councilmember Walters wrapped up the session by urging the participants at the conference to put on “new glasses as it were” and imagine how things will work for each one of them when they are elderly. The more personalized an issue becomes for an individual, the more likely that individual will take action to help solve the problem. The sooner communities take action on this issue and make real changes, the better society will be. Councilmember Walters reinforced the tremendous dynamic of energy and ideas that come from a committee dedicated to resolving an issue. She urged each community to set up a task force of stakeholders to look at the issues facing seniors in the decades to come.

Track A: Transportation Planning/Design and Project Development

Vehicles, Technology and Senior Safety

Jeffrey A. Pike, Ford Motor Company

Integrating Aging and Mobility into the MPO and State Planning Process

Jennifer E. Evans, AICP, Southeast Michigan Council of Governments

Charlie Nelson, Creative Action, Inc.

Leonard W. Levine, Leonard W. Levine & Associates

Design Considerations and Conflicts for Older Drivers, Pedestrians and Bicyclists

Bill Wilkinson, National Center for Bicycling and Walking, Bicycle Federation of America

Jim Langford, Road Safety Accident Research Centre, Monash University, Australia

Enhancing Senior Accessibility to Airports and Air Transportation

Harry P. Wolfe, Maricopa Association of Governments

Norbert Senftleben, City of Phoenix Aviation Department

Vehicle Design and Senior Safety

Baby boomers, as seniors, will be a major force in the marketplace and will want to experience a more active lifestyle than their parents. Therefore, car manufacturers are researching new features for vehicles that will adapt to different users. For the young design engineers to understand the conditions that seniors must deal with, a “Third Age Suit” was developed. The suit mimics the conditions that affect mobility as people age, such as increased stiffness in one’s neck, elbows and knees, reduced tactile sensation, and diminished vision. Universal design features that increase occupant protection with advanced security and crash avoidance mechanisms will also be beneficial for all age groups.

Some engineering designs currently being explored include tracking headlights, smart speed control to maintain speed or advise drivers if too close to another car, front windshield vision enhancements, and tubular airbags that minimize body damage in a crash. Technology needs to be implemented in ways that consumers will want and will use, but without information overload.

The goal is to help people drive as long as possible because mobility is so vital. Building more lanes is not the answer, reconfiguring existing roadways is more important. In order to accomplish that, it is important to focus on what is politically possible. Taking an issue and starting at the grassroots level allows momentum to build. Putting “mobility” on the agenda of other groups builds awareness and coalitions. Creating champions at each level of government ensures that the issue will be addressed. Someone must assume a leadership role on the issue of aging and mobility and elected official support is vital.

Integrating the Aging and Mobility Issue into the Government Planning Process

The Southeast Michigan Council of Governments created a task force of engineering professionals, medical practitioners, seniors, representatives from state departments, service and advocacy agencies to take a comprehensive multidisciplinary approach in addressing senior mobility. They conducted a literature review, public forums, focus groups, and researched population trends, travel patterns, and crash characteristics. The committee looked at a broad range of issues including alternative transportation, housing and land use, health and medicine, and licensing and education.

The committee sought to establish appropriate roles for the state transportation department and the MPO. The role of the state in addressing senior mobility involves setting standards, policy and providing funding. The role of the MPO and local governments is to implement solutions to senior mobility problems.

MPOs are uniquely positioned to take a proactive role in regional transportation service issues. The MPO can create a transit coalition to look at how service is delivered. In Ohio, Mahoning County created the Mahoning County Transit Coalition, which took three years to develop a coordinated service plan. Trust, relationships and leadership were essential to its final success. The *Guide for Implementing Coordinated Transportation Systems*, published by the Ohio Department of Transportation, is available for all those seeking a step-by-step procedural guide to coordination.

In the San Francisco Bay area, planners utilized regional strategies that included convening local stakeholders. These stakeholders took advantage of recently completed research, adding local detail to national analysis and building ideas onto existing services, infrastructure and local planning efforts. They also identified roles for the metropolitan planning organizations, transit agencies, cities, community-based organizations and the general public. The policy objectives supported education, marketing, conventional transit, and steps to make driving as safe as possible because there are different solutions for different markets.

Design Considerations and Conflicts

Interestingly, Australia encounters the same senior mobility issues as North America with its own baby-boom bulge. According to an Australian survey, many seniors who may have problems walking and using public transit can still retain their ability to drive a car. Countermeasures to this problem include safer cars, safer roads, safer road users, and reduced exposure. Australia is adapting the AASHTO standards from the USA even though these standards are based on young, healthy and fit male performance.

An "Austroads Project" was developed to:

- Review the suitability of recommending the Federal Highway Administration (FHWA) road design requirements for older drivers in Australia.
- Develop an older driver handbook and training workshops for road and traffic engineers specific to Australia.

Some of the engineering solutions being developed in Australia include re-evaluating all intersections from an older person's perspective, using roundabouts to reduce crashes, using separate left turn signals, improving site distances, and making sure vehicle lanes have clear definition.

There is not a lack of information and knowledge on how to meet the pedestrian and bicyclist needs — it just hasn't been a priority. The problems need to be redefined. Having a vision of how a community should look will give planners the road map for implementation. Communities that are safe and secure for all races and incomes, with good transportation choices, mixed housing and commercial development, make people healthy. Some basic assumptions about senior mobility need to be challenged — that people will always want and need to drive, that no matter how great their impairments senior drivers need to be accommodated, and that auto speeds need to continually increase. These are not necessarily true.

Society needs to think more broadly. The issue isn't driving per se, the issue is an improved quality of life through more livable communities that lend themselves to a multitude of mobility options.

Reauthorization of TEA-21

The reauthorization of TEA-21 will provide an opportunity to identify funding for projects that will help the elderly. In a lively discussion, a few ideas emerged:

- Set aside more money annually for transit and highways and include services for seniors.
- Let local governments and agencies decide how funds should be distributed.
- Require the inclusion of an elderly mobility element in the long range plan, and funding to support the implementation of projects.
- Focus on projects that are doable and offer immediate benefits to seniors, such as signage improvements.
- Recognize seniors as a distinct market niche.

The final transportation mode discussed was air travel. The fastest and most expedient mode will continue to draw many seniors. Finding one's way (wayfinding) is the chief problem confronting seniors at airports and using the "human touch" is very necessary to supplement design and operational enhancements. An audit form to grade airports in terms of senior-friendliness will help airports redesign their facilities, and a Web site of existing information will assist seniors in using airports and air transportation.

TRACK B: Senior-Friendly Development Planning

Smart Growth and Aging

Land use and urban design are important contributors to mobility and quality of life as people age. For example, consider the current patterns of growth that include separation of land uses, low-density single-family housing, and disinvestments in older communities. Sprawl has caused the degenerative effects of blight in urban communities.

The mission of the Environmental Protection Agency (EPA) is to protect human health and to safeguard the natural environment (air, water, and land). The environmental impacts of growth can best be shown by increased traffic congestion, worsening air quality, and the loss of open space, farmland and habitat. Smart growth serves the community, environment and economy by achieving economic development, jobs, strong neighborhoods and healthy communities. Smart growth affects the aging population because 83 percent of seniors want to age in place with age-diverse communities, and 52 percent of seniors want to live near green space.



Sprawl takes away taxes from city centers and wastes open space, whereas Smart Growth provides choices that enhance mobility for everyone. Smart Growth is not necessarily anti-car.

There are 10 principles to Smart Growth:

1. Mix land uses.
2. Take advantage of compact housing.
3. Create a range of housing opportunities and choices.
4. Create walkable neighborhoods.
5. Foster distinctive, attractive communities with a sense of place.
6. Preserve open space, farmland, natural beauty and critical environmental areas.
7. Strengthen and direct development toward existing communities
8. Provide a variety of transportation choices.
9. Make development decisions predictable, fair and cost effective.
10. Encourage community and stakeholder collaboration in development decisions.

Impact of Urban Design on Seniors

In 1900, one person in 25 was elderly and very few lived alone. In the year 2030, nearly one in five will be elderly and many will live alone.

Urban Growth Issues and Impacts on Elderly Mobility

Carlton Eley, United States Environmental Protection Agency
Jacky Grimshaw, Center of Neighborhood Technology
Deborah Howe, Portland State University

Strategies for Elder-Friendly Communities

Patricia Barron-Pollak, Cornell University

Mobile Workshop: A Walking Tour to Assess Senior-Friendly Land Use

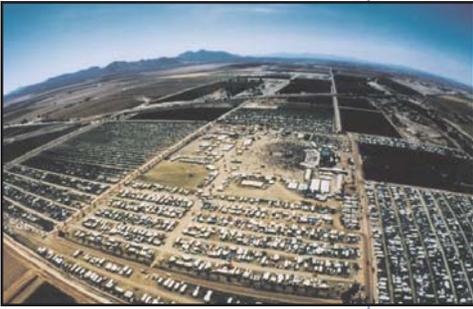
James Coffman, RLA, ASLA, Todd & Associates, Inc.

Maureen DeCindis, Maricopa Association of Governments

Promoting Senior-Friendly Neighborhoods

Dr. Mary Kihl, Arizona State University, College of Architecture and Environmental Design
Molly E. French, Partnership for Prevention

Mobility problems loom but before this issue becomes an emergency, communities should consider ways they can transform land use. For example, mixed land use with residential and commercial properties reduces distances between origins and destinations. Consider building a senior housing unit within walking distance from a senior center, and design pedestrian circulation to all destinations. Involve seniors in the planning of the design details such as sidewalk location and width, shade, seating areas, and lighting.



According to a 1999 Fannie Mae survey, 95 percent of those over the age of 65 do not move from their homes—most prefer to age in place. To meet the needs of aging in place through design solutions, residential areas should have units that blend work and home, create grandparent apartments and other accessory units, hide garages and provide front porches. Design solutions in neighborhoods would create a network of streets with wide, shaded sidewalks and bike paths. The commercial development would have curbside parking and small-scale, centralized services.

Potential problems with these design solutions, such as safety, need to be addressed. Increased walking leads to more falls and higher pedestrian-vehicle interactions, as well as the potential risk for crime. There are no easy answers to complex problems; at best these options are part of a package solution. In the meantime, design professions need to listen to what seniors say they need. It is important to remember that seniors have diverse opinions — they are a heterogeneous group. A focus on developing options for aging in place, retrofitting existing neighborhoods, and providing appropriate transportation alternatives should be common to all areas to meet the needs of an aging population.

Evaluating Communities for Seniors

The features of a community that make it a livable place for older people benefit everyone. One way to assess a community's physical environment is to determine how it supports independent living. Utilizing an "inventory sheet," such as the one developed by AARP, the participants of the mobile workshop walked the arterial and neighborhood streets examining the viability of the pedestrian facilities (width, condition, slopes, linkages, placement, curb cuts and lighting); architectural and urban design elements (building placement and entrances, shade, parking and public art); transit facilities (bus service, stops, signs and maps); bicycle facilities (wide bike lanes, bike paths, bike parking); and streets (large/bright signs, signalized crossings, sufficient waiting time and medians). By identifying specific issues and solutions, and working with strategic partners to retrofit community infrastructure, walking, bicycling and taking the bus will increase opportunities for independence.

Urban Design for Active Aging

Active aging promotes health by delaying and preventing chronic illness, reducing the risk of falls and fractures, and building strength, energy and coordination. Walking and bicycling have proven to be the easiest exercise for most people. Healthy seniors use fewer health care/social services and contribute more to the community. Physical and social environments have a strong positive effect on physical activity patterns. For the best result, a community should combine enhanced access to recreational facilities with an educational outreach program.

Successful strategies that promote active aging include developing partnerships with citizens, businesses, government and social service agencies. The strategies are grouped into seven categories:

- Community design.
- Civic engagement.
- Education.
- Government policy.
- Information.
- Pedestrian and bicycling facilities.
- Traffic and transit.

Creating communities for active aging is not complex, it just takes time and perseverance.

Minor changes can transform a neighborhood, such as making all sidewalks continuous, planting shade trees along the walkways, creating designated walkways in parking lots, signaling crosswalks, having light, shade, and seating at transit stops, and installing large reflective signs.

Studies by the National Highway Traffic Safety Administration have shown that in Pedestrian Safety Zones, pedestrian crashes have been reduced up to 46% and automobile crashes involving the elderly by 13%.

TRACK C: Alternative Transportation Modes

Best Practices in Coordination of Transportation Alternatives

Dr. Jon E. Burkhardt,
WESTAT, Inc.

JoAnn Hutchinson,
Florida Commission for the
Transportation
Disadvantaged

Patricia Hunt-Volmer,
Medical Transportation
Management, Inc.

Models for Mobility Options in Rural Communities

Santo A. Grande,
Delmarva Community
Services, Inc.

Dr. Ronni Sterns, Creative
Action, Inc.

Best Practices for Supplemental Transportation

Barbara McCann, Surface
Transportation Policy
Project

Helen Kerschner, The
Beverly Foundation

Richard Smith,
Transportation
Reimbursement and
Information Program

Explore whether ITN Could Benefit Your Community

Kathy Freund, President
& Executive Director,
Independent
Transportation Network

Coordination

Coordination of transportation services seemed to be the theme that wove through many of the sessions in this track. Coordination is a resource management strategy that is applied to political environments. Coordination offers an effective means of doing better with what you have. In an ideal world, multiple agencies provide multiple transportation options, in multiple jurisdictions, with varying services and a variety of prices. Examples of communities using innovation and coordination well are Pittsburgh, Pennsylvania; Broward County, Florida; Portland, Oregon; and certain communities in California.

There is a great need for safe and secure transportation that can be achieved by incorporating public, private, and non-sponsored transportation into the same system. Changing the way that service is perceived requires working in the community and meeting with representatives from different sectors. Coordinated service and the ability to go out into the community helps create connections for families. Transportation in rural areas is like water in the desert. That is why coordination of services is so critical in these underserved areas.

The means of achieving coordination varies widely across the nation. Coordination can be provided by councils of faith-based organizations, by non-profit and for-profit transportation providers, and by governmental agencies. Most areas recommend coordination to avoid duplication of services. Many agencies today operate as separate entities, which causes fragmentation and confusion on the part of the rider. The goal is to form partnerships that allow the elderly consumer to go shopping, meet medical appointments, visit a friend, volunteer, and work part-time.

In the early stages of establishing coordination, workshops should include consultants, congregations, non-profit organizations, Medicaid brokers, and the area's Council of Governments. The goal for senior transportation is to continue to foster independence and freedom for elder adults. Some barriers to achieving this goal include underutilized vehicles and territorialism. Some successful innovative approaches include programs such as sharing a van with a hospital, rural mobility grants, and gas reimbursements.



Model Programs

According to Supplemental Transportation Program Systems Research (Beverly Foundation, 2001) the main issues in relation to transportation for older adults are:

- Affordability (costs are within reach).
- Accessibility (can be reached and used).
- Acceptability (adheres to personal standards).
- Availability (exists in the community).
- Adaptability (can be adapted to meet special needs).

The purpose of the Beverly Foundation research was to identify community-based alternatives, index and document programs, and promote innovation through information sharing. The results produced ten organizing principles: community focus, response to the need, sponsorship, rider eligibility requirements, service approach, driver screening, risk management, marketing and publicity, adequate staff and volunteers, and funding.

The essentials for a coordinated program include establishing assisted transportation, defining the area to be served, determining the extent of current services, locating funding sources, establishing a committee with social service providers, and defining the program goals and budget. The lessons learned included cultivating partnerships, developing effective screening techniques, tailoring programs to the specific community, establishing a system that is easy to administer, leveraging funding and educating both the public and volunteers.

Independent Transportation Network

Beyond the topic of coordination, there were some programs discussed that focused on specific programs or modes. For example, the Independent Transportation Network (ITN) is a community-based, non-profit transportation alternative that uses cars with both paid and volunteer drivers to pick people up and take them where they need to go. It serves people aged 65+ and people with visual impairments that prevent them from driving. ITN offers consumers choices to ride on demand or to plan in advance, ride alone or share rides with others, ride by the hour or by the mile. The consumer can establish a pre-paid account, using a credit card or other resources. The ITN toolbox provides software, technical support, a billing and financial system, marketing and fundraising support, volunteer management, a car donation program, and offers an affiliation program that assists communities in developing their own programs.

Transit Options

It is a myth to think that all elders are alike and those who can't drive can easily use transit. Understanding submarkets—and focusing on user preferences such as reliability, flexibility and comfort—will help ensure high ridership. Only two-thirds of the country has public transportation

Developing a Regional Transit Strategy to Serve Seniors

Dr. Jon Burkhardt,
WESTAT, Inc.

David Koffman, Nelson/
Nygaard Consulting
Associates

Transportation Alternatives for Older Adults

Charles Dickson & Shawn Hairston, Community
Transportation Assoc. of
America

Donna Powers and Betsy Buxer, The Community
Forum

available and trip making by seniors has increased dramatically. There is a need for a community-wide perspective on future transportation management challenges for high volume/high quality consumers who will be aging in place. Seniors want service that is reliable, on time, door-to-door, flexible, comfortable, and runs more hours of the day.



In Phoenix, Arizona, the public transit system has a peer-training program. Wisdom dictates that when the time comes, the “should do” is to give up your driver’s license. However, many elderly have the attitude, “If I didn’t drive I would die. I would not be able to go anywhere.” The challenge is to provide alternatives, “show me a community with transit, sidewalks and bikeways, available escorts, and teach me how to use the bus, and the ‘should do’

becomes a ‘want to’.” Seniors can become independent — an active and valuable part of the community.

Current Policy

AARP and the Surface Transportation Policy Project are producing a report comparing state laws concerning transit, bicycle and pedestrian issues to reinforce the importance of maintaining mobility through transportation choices. Bicycling can be a viable option for many seniors. Thirty-three percent of national bike club members are over the age of 55. It is the fear of traffic and lack of facilities that keeps seniors from bicycling. Poor sidewalks and dangerous, complicated intersections are problems for those who want to walk. The most important factors for changing the system include the provision of revenue stream, focus on improving and increasing the supply of alternatives, local control of the decision-making, and clear guidance on implementation.

TRACK D: Older Driver Issues & Programs

Aging and Lifestyle

According to AARP and studies in Norway, people in general are often able to drive even though they are no longer able to walk or use public transportation. Eighty percent of people over the age of 80 cannot walk two blocks, and the older a person gets, the more likely he or she will be a rider than a driver.

*There were 27.4 million drivers in the U.S. as of 2000.
There will be 70 million drivers in 2030 and one out of five (60 million) will be more than 65 years old.*

Women are the predominant older drivers; this can be attributed to the fact that they have a higher life expectancy. Interestingly enough, older men hold onto their license even though they don't drive. Given these data, it is essential to start preparing for this shift in drivers because most elderly will drive in the future. Some will walk but few will use alternatives unless the alternatives are made more elder friendly.

Driving may not be necessary to “age in place”—but mobility is essential. People will quit driving because of health reasons. Most former drivers are getting their needs met by riding in cars of family, friends, and

using hired drivers. Many seniors are still able to get their basic needs met, including going to church, but there is a significant drop in people making it to senior centers, restaurants and clubs, recreation, shopping, and visiting families and friends. Traveling to life-enrichment activities is challenging.

People of retirement age are only half as likely to move. The best place to retire is the neighborhood where they spent their life. Home ownership is at a historic high. For those people who are over 85 years, 60 percent own their own homes. This is difficult, of course, if the neighborhood has changed dramatically, if there is no access to shopping or services, no services by mainline

bus, no door-to-door services or no lifeline (little or no contact with neighbors). There are some strategies of adaption that are successful, which include choosing an apartment that is close to services, hospitals and low-congestion streets, and choosing a home layout that supports decreasing mobility. Wheelchairs and scooters can replace driving, making sidewalks necessary.

Is Driving Critical for Aging in Place?

Jim Langford, Road Safety Accident Research Centre, Monash University, Australia

Dr. Harvey Sterns, University of Akron and Creative Action, Inc.

Dr. Mary Ann Thompson, Bellarmine University

The Value of Functional Testing in Older Drivers and Licensing Renewal Screening

Dr. Robert L. Raleigh, Maryland Motor Vehicle Administration

Dr. Allen Dobbs, DriveABLE Assessment Centers

Older Driver Assessments and Driver Competency Assessment Program

Dr. David Hennessy, California Department of Motor Vehicles

Dr. Robert L. Raleigh, Maryland Motor Vehicle Administration

Dr. Loren Staplin, TransAnalytics, Inc.



Keeping Seniors Independent: What Retraining Options are Available?

Carol Blanc, Association of Driving Specialists (ADED)

Lynn Hedrick, DriveABLE Solutions

Dr. Linda Hunt, OTR/L, Maryville University

National Social Marketing Campaign Addressing Senior Driver Issues

Cydney DeModica, Arizona Department of Transportation, Motor Vehicle Division; AAMVA Chair, Older Driver Committee

Joan S. Harris, National Traffic Safety Administration

Older Driver Education Programs

Frank Cardimen, TIA
Bruce Taft, AARP

Testing

Testing, assessment of drivers' abilities, and licensing are major research and policy issues being addressed nationally and internationally.

Australia, like the U.S., has experienced a dramatic increase in its aging population and a three-fold increase in older-driver casualties. A serious casualty is any accident where a passenger is taken to the hospital. Each jurisdiction in Australia has its own licensing and testing requirements. But testing wasn't revealing if seniors were at higher risk for accidents. Instead, the data show that the impact of licensing testing is forcing safe drivers off the road and allowing unsafe drivers to keep their license.

Conclusion: Age-based data does not prove that testing is getting unsafe drivers off the roads.

Given this, researchers are asking, is there a role for functional screening in license renewal? The purpose of screening is to identify warning signs of impaired behavior, but the screening should not be perceived as threatening, like a diagnosis, or automatically lead to revocation of the driver's license. Driving skills and adequate vision are the primary indicators being tested in the elderly person's capacity to drive. The new screening process tests people under actual circumstances and actual road conditions. According to the American Medical Association, physicians themselves need to consider testing older patients instead of sending them to a testing center. An accurate screening test to judge independence and specific needs for assisted living could be used by doctors, senior centers and retirement communities.

Functional testing evaluates a person's ability to handle the vehicle competently. It is important to identify people who experience declining ability as early as possible to educate them about self-management and making informed decisions. A prevention model rather than intervention model is best. Abilities that are key to maintaining driving competence include visual, cognitive, physical, health, and an absence of drug effects. Crash Risk Factors that are evaluated include visual acuity, peripheral vision, mental status, memory, search and sequencing, and spatial ability.

There are real differences among all types of drivers, young and old, which is why the focus should be on driver competence.

Researchers are suggesting that the emphasis should be taken away from the "older" driver and put on functional impairments. Avoid using a rule-based approach and use a system of red flags to signal debilitating medical conditions. Minimize crash risk with retraining programs that would include: treating vision problems, providing cognitive and physical training, developing exercise programs, offering counseling for

people in need of using alternative transportation, training seniors on the use of adaptive equipment, and providing educational programs for clients and health care providers.

There is agreement that crash risk is not due to age but to identifiable impairing medical conditions. Medical conditions can affect drivers at any age. The older driver is at higher risk for more of the medical conditions such as diabetes, cardiovascular disease and dementia that are factors in crashes. All road tests should have standardized scoring. Scoring errors should be assessed according to competence or bad habits. The road course should replicate high-risk conditions.

A representative sampling shows that testing solely for functional impairment is a weak indicator of driver performance due to the fact that drivers compensate for their functional impairments. Older drivers have been found to adequately compensate by screening themselves and changing their behavior accordingly.

Driver Assessment Programs

There are four objectives in utilizing a tiered driver assessment from California to determine road performance.

- To better assess applicants of any age.
- To establish fail criteria for determining whether a driver is too dangerous.
- To increase the ability of staff to test.
- To adequately estimate the cost to administer the test.

Tier 1: When a driver approaches a Department of Motor Vehicle service counter, they are screened for their ability to walk up to the counter without help of a device or person. Loss of movement, cognitive abilities and visual impairment are assessed.

Tier 2: There is a computer test for visual and cognitive capability, a survey that asks questions on driving habits, and a review of moving violations already on record.

Drivers who fail the 1st and 2nd tiers will be referred for medical assessment and then asked to return for a reassessment.

Tier 3: California has a supplemental driving performance evaluation that consists of 30 minutes of an on-road driving test with 11 different kinds of route elements and predefined maneuvers.

The Maryland Consortium Driver Competency Assessment Program utilizes two full-time and 16 part-time physicians who review driver records. The physician assessment confirms the importance of case-by-case judgments. The program was first established in March 1998, with the goal of making safe mobility for life a reality. The mission is to create a model for determining driver competency that includes how to iden-

tify people with impairments, how to help people correct or compensate for their impairments, and provides options for alternative transportation and the education of media and the general public. The program is primarily concerned with measuring the capacity for being a safe driver—regardless of age, disability or impairment. The hope is to change the mindset that the only option is to take away the driver's license.



The Maryland study was a collaborative project with the National Highway Traffic Safety Administration. The goal of the Maryland Consortium Driver Competency Assessment Program was to determine the relationship of safety measures of crashes to mobility and functional status, and evaluate the feasibility of administering testing in a government facility (licensing agency) as well as doctors' offices.

Three groups were tested:

- License renewal applicants.
- Referral (chose testing over license being taken away).
- Residential Community (highly affluent group).

Perceptive, cognitive and physical measures were the primary focus of the functional screening study that included cued and delayed recall, visual scanning neglect, motor-free visual perception test, trail making, rapid-pace walk, foot tap, arm reach-shoulder height, neck rotation in a chair with a seat belt.

The residential group outperformed the renewal group. The referral group had the lowest testing scores and the lowest functional ability. It was emphasized that functional screening is a warning sign and not a diagnosis for taking away a license.

Public Information Campaigns

In order to educate the general public about senior driving issues, there are two national social marketing efforts underway led by the American Association of Motor Vehicles Administrators (AAMVA) and the National Highway Traffic Safety Administration (NHTSA).

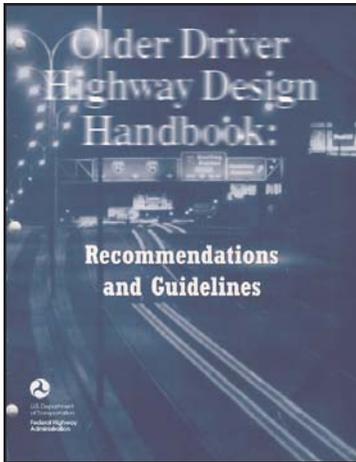
Social marketing is a proven approach for obtaining behavior change in traditional public health areas. Social marketing is a means to change attitudes and behavior through education at all levels of society. Previous effective social marketing campaigns related to safety were *Buckle Up America*, *Mothers Against Drunk Driving*, and *Buckle Up Your Precious Cargo*.

Both AAMVA and NHTSA have approached this issue as a major public health issue. The campaigns will promote the fact that good health is important to good driving. Driving is an ability issue, not so much an age issue.

AAMVA, a non-profit educational association representing chief motor vehicle administrators and law enforcement officials in the U.S. and Canada, embraced this issue as an international concern and has developed a long-range campaign to change public perceptions of driver competency. The campaign seeks to provide families, friends, healthcare providers and law enforcement with information to assist older drivers in preparing for the stages of driving cessation as well as promote alternative transportation resources.

AAMVA conducted focus groups and tested the *Getting Around Safe and Sound* concept, which received a positive response. A sample Web site with a toll-free number and links to other resources was received with enthusiasm. Overall, the focus group participants look to DMVs, AARP, AAA and insurance companies for information and indicated a preference to find the information through the Internet.

FHWA Workshop: An Introduction to Designing Highways to Accommodate Older Drivers and Pedestrians



Keith J. Harrison, Safety/Geometric Design Engineer, Federal Highway Administration

In 1998, the FHWA published the *Older Driver Highway Design Handbook* to provide engineers and roadway designers with practical information that will help them relate an understanding of the declining functional capabilities of older drivers to the need for traffic engineering enhancements. Extensive feedback from practitioners resulted in the *Highway Design Handbook for Older Drivers and Pedestrians* that contains the updated recommendations and information on how to apply the Handbook. The engineering enhancements described should benefit all road users, not just older adults. Three processes are recommended:

1. **Problem identification**: During the planning stage for construction or reconstruction, consider the safe use of that facility by older drivers. To obtain the real senior perspective, hold focus groups to gauge what seniors really want and need. Utilizing the worksheet, assess crash data, origin and destinations for seniors, and census tract data of elder population density.
2. **Identification of Handbook Applications**: For each of the problems, identify the correct recommendations from the Handbook.
3. **Implementation Decision**: Take into consideration any factors relating to increased costs or added approvals needed.

The main areas covered in the Handbook are: Intersections, Interchanges, Roadway Curvature, Construction Work Zones, Highway-Rail Grade Crossings, and Aging and Driver Capabilities.

General Session 3: What Did We Learn and Where Do We Go From Here?

General Session 3 was divided into three sections. The first part was a summary of the key points from the individual sessions as provided by recorders in each of the sessions. This information was displayed in bullet points and reported out to the participants. To view a copy of the bullet point summaries, please see the Appendix.

In the second part of General Session 3, representatives from the U.S. Department of Transportation (USDOT) provided brief updates on current and planned activity related to aging and mobility on a national level.

In the third part of General Session 3, participants were asked to develop a list of Next Steps related to specific actions that should be undertaken in the future.

USDOT Briefing

Doug Birnie, Federal Transit Administration

When developing plans, invite others to the table — not just transportation planners — but all organizations representing seniors. There must be a transportation/human service planning process. FTA is very interested in the mobility management concept. Most planning focuses on a particular mode and manages only that aspect. But the intent is to focus on the customer and work with a variety of providers to satisfy needs so that the systems developed are efficient. Have one number a person can call that will give information on all of the transportation options available.

Beth Alicandri, Federal Highway Administration

In 1988, FHWA Older Driver activities began with the Transportation Research Board (TRB) 218 study entitled *Transportation in an Aging Society*. This was followed up in 1989 with FHWA High Priority Area: *Safety and Mobility for an Aging Population*. In 1997, the *Older Driver Highway Design Handbook* was produced and then in 1998 the *Older Driver Highway Design Handbook: Recommendations and Guidelines* was developed. After the TRB study developed a handbook and guidelines, the Older Driver Workshop was initiated. These one-day workshops explain to engineers the characteristics of senior road users and the predictive problems associated with diminished abilities. The perceptual, cognitive and psychomotor performance changes present many

Conference Recorders

Teri Collins
Regional Public Transportation Authority

Dawn Coomer
Maricopa Association of Governments

Rosemary Siipola
Cowlitz-Wahkiakum Council of Governments

Audrey Straight
AARP

Mary Thomson
Maricopa Association of Governments

Nancy Wagner
Charlotte County MPO

Harry Wolfe
Maricopa Association of Governments

challenges to transportation engineers, who must ensure system safety while increasing operational efficiency. Future activities include: a pamphlet summarizing Traffic Control Devices changes, demonstration projects and Web-based training materials.

John Eberhard, National Traffic Safety Administration

Donald R. Trilling, Department of Transportation

This presentation elaborated on the TRB 218 update and the Department of Transportation's national agenda. The goal of the national agenda is to provide safe mobility for life. There is a surge in the number of older adults, but the systems are not prepared for them. The solution is to get vehicles, highways and users ready in time for aging baby boomers. The national agenda calls for seven areas of action:

- Safer, easier-to-use infrastructure.
- Safer, easier-to-use automobiles.
- Improved competency of older drivers.
- Better, elder-friendly transportation services.
- State and local task forces to plan safe mobility for their communities.
- Better public information.
- Basic and social policy research.

Next Steps

There were many excellent ideas for implementation that came out of this conference. There is no magic sequence for implementation. It is a matter of incremental steps and working with partners to find a solution because forming partnerships and coalitions is critical to making progress in addressing senior mobility issues. The following ideas came from the last session of the conference:

Education

- Encourage an MPO to host this conference on an annual basis. Consider rotating the conference among MPO sites (Florida, Michigan, Seattle, and San Diego were mentioned). It is important to engage the MPOs and COGs to be leaders in this issue. Get prominent elected county, state and local officials to the next national conference.
- Broaden participation in the conference and the national dialogue to include public health professionals and Centers for Disease Control.
- Disseminate what is happening and working well at the local level to AARP for them to publicize on a list serve.
- Improve the education of family physicians, possibly produce a mini-test they can use.
- Get leaders and professionals to really see how difficult it is to get around when you are elderly.

Legislative/Leadership

- Advocate for incentives and funding to be included in the Reauthorization of TEA-21 for aging and mobility projects.
- Produce a Presidential Executive Order.
- Engage state elected officials (similar to Pennsylvania where they dedicated lottery funds to provide free public transit for seniors).
- Guide the Area Agencies on Aging on impacting TEA-3. Get Federal USDOT to help.
- Provide politicians salient/visual examples of success.
- Need to have national leaders engaged and vocal supporters of this issue.
- Encourage FTA to increase the number of low-floor vehicles.
- Improve local leadership to address paratransit improvements, which represents the most fragmented transportation system.

Partnerships

- Broaden partnerships – involve public health and Centers for Disease Control as well as leading aging organizations, such as the National Council on Aging.

- Partner with Medicaid – they are doing integration of transportation.
- Engage the Administration on Aging in this issue.
- Engage the surgeon general – send copy of the proceedings.
- Combine senior constituencies with immigrants who share many of the same driving issues as seniors.
- Combine Aging and Transportation committees together.

Funding

- Look at lottery dollars as a potential on-going funding stream.
- Raise this issue with members of the Appropriations committee.

Planning

- Require that Aging and Mobility be considered in the MPO/state planning process as a planning factor (solicit support for this from American Association of State Highway and Transportation Officials (AASHTO) and Association of Metropolitan Planning Organizations (AMPO)).
- Use “intelligent idiots” to test new signage and other improvements first before they are put in a national standards publication.

Other

- Hold a national contest to design a transit-friendly shopping cart for seniors who use transit for grocery shopping.
- Expand the resource base for human service needs overall.
- Improve the integration of transportation into other services (medical/social).
- Include a glossary of acronyms in the conference proceedings.

APPENDIX

Summary of All Sessions

Summary of All Sessions

Opening Session

- Planners must prepare for a population where at least one in five or one in four people may be elderly.
- We really need to look at transportation as more than getting to a doctor or food store. It is those other pleasure trips, such as window shopping, getting a haircut, going to church, visiting friends—all those other things that hold life together that are important.
- Mobility demands of future older adults: journey-to-work accounts for only 25 percent of VMT (Vehicle Miles Traveled), the other 75 percent of trips are “life” trips.
- Where we are today. Seven approaches to older adult mobility:
 1. Driving and self-regulation
 2. Technology-enabled driving
 3. Friends and family
 4. Public transportation
 5. Paratransit/Demand response
 6. Land use and development
 7. Do nothing
- “Pushing the car” – There are some options in technology-enabled driving. The integration of intelligent transportation systems can improve safety such as night vision, collision avoidance, vehicle assistance, and improved design.
- Public transportation is the next option available for seniors who don’t drive. But the challenge is that most seniors are “aging in place.” More than 70 percent of the U.S. population lives in the suburbs or rural regions. There are the “3Ms” associated with the suburban home: Marriage, Mortgage, and Memories. So seniors don’t want to move. But public transportation/accessibility in these regions is often limited. They become isolated and depressed. Seniors become marooned in the American Dream.
- Paratransit/Demand Response: The whole idea of mobility revolves around demand response. Most commutes today are suburb-to-suburb, not suburb-to-city. Paratransit has been developed around social services.
- Livable Communities: Will boomers move back to the cities? Livable communities or transit-oriented development may provide mobility options for older adults. Rethinking community design requires time and real partnering with real estate firms and developers to create a compelling vision more attractive than today’s American Dream of a detached home in the suburbs.
- There is no silver bullet, no single solution. There are many strategies for keeping older Americans on the move. Change agents will include individual planning, family and friends, industry, and local, regional, state and federal governments.

- Creating new ideas requires a different pattern of thinking. Instead of looking within the accepted boundaries that define how we do things today, real innovators look systemically across them—and by doing so they can find unoccupied territory that represents real change.

General Session 2

Audrey Straight, Senior Analyst, AARP Public Policy Institute

- The issue is maintaining independence.
- Findings of the National AARP telephone survey show that fewer than 10 percent of respondents list their usual mode of transportation as walking, public transit, taxis, or senior vans.
- Most agree that staying connected to their neighborhood is a primary goal. A concern is ride sharing and feeling dependent on others.
- This is tied into perceptions of themselves and not wanting to inconvenience others.
- More volunteers are needed to relieve the aggravation of having to ask for rides.
- One in four people say public transit doesn't go where they want to go.
- Another problem is inconsiderate drivers.

Richard A. Marattoli, Director of Geriatrics and Associate Professor at Yale University School of Medicine

- Discussed a document that expounded on travel and highway environment, land use, vehicle adaptation, and the affect of ITS on older drivers.

Donald R. Trilling, USDOT, Office of the Secretary

- Data show that older drivers are safe.
- They are involved in the fewest fatal crashes.
- Older drivers are more fragile and vehicle designs need to take this into consideration.
- There is a call to develop demonstration programs of innovative transit for underserved areas.
- Most agree we need to identify and remove problematic barriers, and we need to educate the media on how to effectively frame the issues.
- Policy research needs to establish the relationship between mobility and aging in place and reducing health care costs.

Suzanne Quigley, Maricopa Association of Governments, Regional Action Plan on Aging and Mobility

- Approximately 20 percent of the population will be over 60 by 2025.
- We expect them to stay in place, living in clusters where they already are.
- They are concerned about safety and security.
- There are four primary areas of concern: infrastructure and land use,

alternative modes of transportation, driver competency, and training and education.

- Most agree we need public input, public forums and focus groups.
- The result is a need for regional action plans.
- We need greater diversity because tomorrow's elderly want mobility.
- We need multi-dimensional solutions.

Claudia Walters, Councilmember of the City of Mesa

- Urges us to put on "new glasses" to see what elderly people see.
- Imagine how things will work for you when you are elderly.
- Recommends a task force of stakeholders to look at these issues.

Track A

Transportation Planning/Design & Project Development Vehicles, Technology and Senior Safety

- Baby boomers are becoming seniors and a major force in the market place; they will want to experience a more active lifestyle than their parents.
- Avoid information overload and study ways of presenting information for maximum effectiveness.
- Develop vehicle features that adapt or are adaptable to different users.
- Implement technology in ways that consumers want and will use.
- Incorporate universal design features that will be beneficial for all age groups.

Effective Application of the FHWA Driver Highway Design Guidelines

- Expect the "design driver" of the 21st Century to be over 65 and design highways to accommodate their needs.
- Hold focus groups to gauge what seniors really want and need to obtain the real senior perspective.
- Provide enhanced traffic control devices that enhance visibility.
- Provide advanced warning of traffic situations.
- Simplify decisions at intersections.
- Pursue additional study on new marking materials, modeling techniques for older driver improvements and cognitive workload.
- While these solutions are tailored to seniors, they offer benefits to everyone.

Integrating Aging and Mobility into the MPO and State Planning Process

- Take a comprehensive multidisciplinary approach in addressing senior mobility.
- Establish appropriate roles for the state and the MPO.
- The role of the state in addressing senior mobility issues involves setting standards and policy and provide funding.

- The role of the MPO and local governments is to implement solutions to senior mobility problems.
- Find someone to assume a leadership role, champion solutions to senior mobility and garner political support for those solutions.
- Educate seniors and their caretakers about senior mobility issues and options.
- Try to do everything and you accomplish nothing. Focus on those solutions to the mobility problem that are politically palatable, i.e. design standards, such as increased size of street signs.

Design Considerations and Conflicts for Older Driver Highway Design Guidelines

- Australia encounters the same senior mobility issues as we do in North America.
- According to an Australian survey, as people age, they have more problems with walking and public transit than driving.
- Older drivers experience their greatest problems at intersections.
- Think outside the box—problems cannot be solved by thinking at the same level that created them.
- Some basic assumptions about senior mobility need to be challenged:
 - People always want and need to drive.
 - We need to accommodate senior drivers, no matter how great their impairments.
 - We need to continually increase auto speeds.
- We need to think more broadly. The issue isn't mobility per se, it is an improved quality of life.
- Reduce barriers to innovation.
- Create more livable communities that lend themselves to mobility.
- Build coalitions to appeal to each constituency's pet concerns; what helps seniors may offer benefits to everyone.

What Should be Included in the Reauthorization of TEA-21 Concerning Aging and Mobility?

- Set aside more money annually for transit and highways and include services for seniors.
- Let locals decide how funds should be distributed.
- Require the inclusion of an elderly mobility element in the long-range plan, and provide funds to support the implementation of projects.
- Focus on projects that are doable and offer immediate benefits to seniors, such as signage improvements.
- Bring infrastructure up to a certain standard for seniors.
- Streamline environmental rules to facilitate construction.

Enhancing Senior Access to Airports and Air Transportation

- Recognize seniors as a distinct market niche.
- Finding one's way (wayfinding) is the chief problem confronting seniors at airports.

- Use the “human touch” to supplement design and operational enhancements.
- Develop and use an audit form to grade airports in terms of senior-friendliness.
- Garner grass roots support for enhancements to make airports more senior-friendly.
- Establish a Web site to lead seniors to existing information that will assist them in using airports and air transportation.
- Work with transportation providers on enhancements to air travel for seniors.

TRACK B: Senior-Friendly Development Planning

- Land use and urban design can be important contributors to quality of life as people age, but we can't assume the benefits.
- Have to ask the consumer, involve seniors in planning process.
- Can't assume that what worked historically (neo-traditional design) will work for today's population.
- Assess impacts of urban design and evaluate in order to meet the needs of the older population.
- Education, implementation, and grass roots support are crucial to addressing needs.
- Walking Assessment–Visual Confirmation of barriers to walkability.
- Walking and biking as contributors to health. Need to look at and address multiple factors.
 - Educate.
 - Advocate.
 - Share information and involve.
 - Focus investment–look at what you need and prioritize.

TRACK C: Alternative Transportation Modes

Best Practices and Policies Related to Supplemental Transportation Serving Seniors

- AARP and Surface Transportation Policy Project are producing a report comparing state laws concerning transit, bike, and pedestrian.
- Mobility is declining; there are 23 percent fewer overall trips, 43 percent fewer social trips.
- Need to maintain mobility through transportation choices.
- Choices allow seniors to age in place, help avoid segregation, and reduce dependence. Helps seniors transition away from driving.
- Fear of traffic, lack of facilities keeps seniors from bicycling.
- Poor sidewalks and intersections create problems with walking.
- Recommend sidewalk connectivity, traffic calming, and longer signals.
- 25 percent said everything is too far away, which is a call to build convenient neighborhoods.

Models for Mobility Options in Rural Communities

- Need to change the way that service is perceived.
- Go out to the community to meet with different sectors.
- Meet with the community and determine the need to bring in different sectors and work closely with local employers.
- Importance of driver training, coordinated service, ability to go out into the community, home, life, and family, and breaking down the barriers.
- Needs to be some mandatory coordination.
- Discussion workshops to include consultants, congregations, people-for-people nonprofits, state mandates, Medicaid brokers, and the areas's council of governments.
- Support the goal to continue to foster independence and freedom for elder adults.
- Some barriers to achieving this goal include underutilized vehicles and territorialism.
- Successful coordinators are able to rally huge numbers of volunteer drivers.
- Inspiring innovative approaches such as gas reimbursement, sharing a van with a hospital, and using rural mobility grants stretch the value of that coordination dollar.

The Independent Transportation Network (ITN): Explore Whether ITN Could Benefit Your Community—Supplemental Transportation for Seniors

- The five “A”s:
 1. Affordable (costs are within reach).
 2. Accessible (can be reached and used).
 3. Acceptable (adheres to personal standards).
 4. Available (exists in the community).
 5. Adaptability.
- Consider the importance of escorts for the 89+ population.
- Traditional transportation system cannot meet these needs.
- PasRide program – Sponsor reimburses rider who reimburses the driver.
- Recognize need for assisted transportation.
- Define area to be served.
- Determine extent of service.
- Look at funding.
- Set up driver training program.
- Develop communication, case management, referral, monitoring, control and outcome measures.

Developing a Regional Transit Strategy to Serve Seniors Improving Transit Options for Older Persons

- “The Age Wave”
- Only two thirds of the Country have public transportation available to them.
- Future transportation challenges include high volume/high quality

consumers who will be aging in place, some in areas that do not have public transportation services.

- Service preferences are reliable – on time, door-to-door, flexible, comfortable, and offered during more hours of the day.
- Myths – all elders are alike, those who can't drive can easily use transit, and one service level and type is sufficient.
- Understand submarkets – there is no single solution.
- Need for a community-wide perspective.

Older Adults Transportation Planning Study for the San Francisco Bay Area

- Convene local stakeholders.
- Take advantage of work already done.
- Add local detail to national analysis.
- Build on existing services and infrastructure.
- Build on local planning efforts.
- Identify roles for: MPO, transit agencies, cities, and community-based organizations.
- People need to be heard.

Transportation Solutions for Older Adults and Caregiver Issues

- Rural Transit Assistance Program (RTAP) funded through FTA.
- Community Transportation Improvement Program (CTAP) funded through the Department of Health and Human Services.
- USDA Technical Assistance Program – for rural communities and Native Americans.
- Loan Fund Program through USDA – improve rural transportation.
- New markets, tax credits, programs.
- The goal is to ensure all communities are accessible: providing the tools, increasing funding, championing the cause, and encouraging partnerships.
- Issue is seniors feel like they are giving up their independence whenever they give up their driver's license.

Track D: Older Driver Issues & Programs

- Most non-drivers are not isolated. But they have lost independence, freedom and mobility in order to meet their daily needs.
- Studies reveal that drivers quit for health reasons – visual issues, other drivers make them nervous. Once they do there is a decrease in their ability to travel outside of home.
- Former drivers experience a loss in independence and autonomy – while needs are met they are not met how and when they would like. Higher incidents of depression among former drivers.
- Why most retirees don't move – The best place to retire is the neighborhood where you've spent your life. Their home is safe, secure and have all their needs designated.
- Apply self-management techniques to aging and mobility.
- Build more elder-friendly communities that facilitate staying in place.

- Identify people who experience declining ability as early as possible, to educate them into making informed decisions and self-management. Use prevention model rather than intervention model.
- The focus should be on driver competence – Takes emphasis away from the older driver and puts emphasis on functional impairments.
- Not a rule-based approach – but red flags of debilitating medical conditions.

California Tiered Driver – 3 Tier Approach

- 1st tiered assessment – quick tests for determining the number of constraints for adequate compensation.
- 2nd tiered assessment – drivers who are substantially constrained from compensating for functional impairments.
- 3rd tiered assessment – California's supplemental driving performance evaluation – 30 minutes of on-road time involving 11 different kinds of route elements – predefined maneuvers.
- Identifying constraints and ability to compensate.
- Educating drivers on impairments and driving conditions that will render them inadequate with their functional impairments and how to compensate.

Maryland Consortium Driver Competency

Performance Areas:

- How to identify people with impairments.
- How to correct or compensate.
- What are the options available for transportation?
- Education of media and public of this approach.

Goals:

- Keeping drivers on the road longer and more safely.
- Feasibility of administering the process through doctor visits and renewal programs.
- Functional screening is a warning sign, not a diagnosis for taking away a license.
- Keeping people driving as long as possible–Elements of Driving Evaluation:
 - Self-assessment.
 - Knowledge of alternative transportation in the community.
 - Family members interviewed – driving stories from members about the older driver.
 - Visual acuity and cognitive assessments and physical assessment.
 - Road test. Assess for potential for rehabilitation and driver training.
 - Re-evaluation (6-12 months).

National Social Marketing Campaigns Addressing Senior-Driver Issues

AAMVA is applying the principals of social marketing to change older driver behavior and get seniors to self monitor more accurately their abil-

ity to drive safely. Why social marketing for older drivers:

- Explosive growth in older drivers.
- Older drivers will drive longer.
- Older drivers will drive longer distances.
- More women driving into older ages.

Objectives of AAMVA's social marketing to educate older drivers:

- Increase safety and mobility among older adults.
- Change behavior.
- Increase appropriate choice making among older drivers.
- Create environmental change.

Methods and Strategies:

- Partnerships with other key organizations.
- Increase community capacity to provide resources to older drivers.

Older Driver Education Programs

- Timely education and re-education to all drivers.
- Education of mature-driver issue needs to be promoted and public familiarized.
- Education needs to go to the media, politicians, and general public.

Lunch and Dinner Speaker Remarks

Luncheon and Dinner Guest Speakers

Ellie Marek, M. A., Humor – One Way of Coping with Aging

“You don't stop laughing because you grow old; you grow old because you stop laughing.” — *Michael Pritchard*

We are all aging, and deep down we'd rather have it that way, but most of us stay in denial until the first Social Security check comes, along with the ads for cemetery plots. My overall purpose in this presentation is to explore the role of humor in encouraging resilience as we age. My personal crusade is to dispel some myths about aging and to tell you what it's really like to get older—not old—but older. I've learned that old is always 10 years older than you are.

I don't mind telling you that I am 65. Actually, I was 65 last year and I plan to be 65 next year. You see, when you reach the age of 65 you collect all the perks you are going to. The last of the discounts kick in. Medicare helps and no one thinks you are a hypochondriac any more. So 65 is as good as it's going to get for quite awhile.

What's tough about this so-called geezerhood is not the body falling apart. That's no fun, but it's a picnic compared to the greatest hazards. When you are 65 you become a target for the buzzards—the human buzzards. First, you are inundated with platitudes “Growing old is better than the alternative.” Well it didn't take me long to figure that one out.

Together with a colleague from the Association for Applied and Therapeutic Humor, we conducted a survey of people over 60 and one of the questions was about the platitudes that bother us most. Turns out #1 may well be THE GOLDEN YEARS. If you are feeling like a tin man, the golden years sound rusty.

One of the worst is: “You're not growing older, you're growing better.” Better than what? I'll tell you what – detecting a con artist, that's what.

PLEASE don't believe the propaganda you see on TV. Very few of us wear dentures or diapers, and even fewer love to talk about how well they fit. If my main squeeze takes me on a wonderful trip, I don't embarrass him by giving him loud advice on constipation and flatulence.

Our best defense is to laugh at the platitudes and the myths. That's what keeps us balanced between gullibility and cynicism, between rigidity and apathy.

So what are the benefits of growing older? Well, if you're in a hostage situation you are likely to be released first. But there are other more practical benefits and they spring from the way we see our lives. The other side of the coin is a wonderful concept but the trouble is, I can no longer

see what's on the other side of the coin. Still I can always find an "on the other hand." On the other hand, when I look back over a lifetime of living, the view is amazing.

A good day is one in which you find your car in the parking lot of the mall—maybe even on the first try. As our eyes get weaker, we can't see the dust in the living room.

You learn to do something new or you solved a problem on the computer. It *works* for you and for 30 seconds you know that you are brilliant.

Most of us spend our lives caught in the COMPARISON TRAP. We are either one-up or one-down. By the time you reach my age, a lot of people who you saw as one up on you aren't even around anymore.

Every day is precious and we learn to appreciate the smaller things. We appreciate the absence of pain, while young people seek it. It's only the 20 year olds who get studs poked through their tongues. By the time you are my age you know what pain is. Rita Rudner explains, "Old people don't wake up in the morning and tell themselves, "I think I'll drive a spike through a tender organ today."

A few years ago my teenage granddaughter called me and said she wanted to have lunch with me as soon as possible. Anytime a teenager wants to see you ASAP it's pretty flattering if not outright miraculous. When we got together she told me she had an assignment to interview someone who remembers the Depression and World War II. That was the first time that I realized that I AM LIVING HISTORY.

I do remember the Depression. I was born in the heart of the depression, and babies were very rare then, relatively speaking. If you were born in the Depression you were either the result of very careful planning, or the only recreation your parents could afford. Either way it was not a bad way to come into the world.

We didn't know we were poor, because we didn't know anyone who wasn't. Families pretty much stuck together—they had to. I had one aunt who sent shock waves through the entire extended family. She got a divorce. When her name was spoken, it was whispered—the one who is divorced. After the war, life got much easier, although a number of people built bomb shelters and prepared for the end of the world. TV brought neighborhoods together. Thanks to the GI bill and scholarships, a lot of us were the first in our families to go to college. They told us that if we were college graduates, it was our patriotic duty to have at least four children. I was three-fourths of the way there when the demographic gurus changed their minds, and cut the quota back to two. Yes, baby boomers, many of you owe your existence to our patriotism. As one friend of mine puts it, ours is the generation that put the boom in baby boomers.

Seniors generate their own humor when they explore memories of the social standards and the icons of their come-of-age decade, and mine was clearly the 50's. However, even nostalgia isn't what it used to be.

These are a few of the things we were talking about in the last half of the 50's when I was a young wife and mother.

- “Kids today are impossible. Those duck tail hair cuts make it impossible to stay groomed. Next thing you know, boys will be wearing their hair as long as the girls.”
- “I'm afraid to send my kids to the movies anymore...Ever since they let Clark Gable get by with saying “damn” in *Gone With The Wind*, it seems like every new movie has either “hell” or “damn” in it.”
- “I'm just afraid the Volkswagen car is going to open the door to a whole lot of foreign business.”
- “No one can afford to be sick anymore, \$35 a day in the hospital is too rich for my blood.”
- “If cigarettes keep going up in price, I'm going to quit. A quarter a pack is ridiculous.”

But we didn't quit smoking—not then. Smoking was our rite of passage. We were pretty sheltered and what we knew of life we learned from the movies. Smoking accompanied every daring and sophisticated act including sex. In the movies, we saw married couples – married couples of course – who were obviously passionately in love, go to bed in twin beds. The lights turned low, something happened and there they were smoking in bed. I thought my parents loved each other but they didn't smoke and they slept in the same bed. I decided that they couldn't afford two beds.

It took me a long time to recognize that I am living history, to talk about it and laugh at it. And I may not speak on the subject again until I'm 85. When you are 85, a wonderful thing happens to speakers and performers. I saw it when I saw George Burns performing live at 85. If you can limp or stagger on stage, you will get a standing ovation.

Before I go, I am going to read a poem from my book which says in a few words what I've been trying to tell you in the last 10 minutes or so. It's titled *Lost and Found*.

Lost and Found

Alas, I've lost my innocence,
And most of my illusions.
Dreams are scattered everywhere
By reality's intrusion.
Unless I'm looking backward,
I've no more perfect vision.
Nor can I see with clarity

My life's grand sense of mission.
I've lost my twenty-four inch waist;
Size six is far behind me.
I often lose my train of thought
Won't someone please remind me?
My glasses, my wallet,
And my keys are...where?
The clothes for the cleaners—
Are they already there?
I've lost the will to work all day
And cope with kids all night.
And now I stop to think of it,
When did the kids take flight?
As aches and pains and gravity
On my body take their toll
My laugh lines, growing stronger,
bind fast my ragged soul.
One dream fades; another's found.
Something begins; something ends.
I think I've found a miracle;
My children are my friends!
I see the flames of passion
Are very nearly spent.
But in the glowing embers
I can find a deep content.
The present's more exciting,
When I enjoy the past.
Constant change may never cease
But love and friendship last.

Dr. CGB (Kit) Mitchell, Universal Design to Help Older Travelers

Until about 30 years ago, public transport suppliers almost always took as their first priorities technical efficiency and economic profitability. User abilities and requirements came in a clear second; passengers were expected to cope with the systems provided. This led in Europe to many central railway stations requiring passengers to climb flights of steps to the train platforms, carrying their luggage and children. This is not because architects like to make people suffer. It is the rational solution to fitting a railway into an existing urban area, with economics taking priority over ease of use.

Similarly, urban buses had high floors, onto which passengers climbed up steep and narrow steps. The high floor was to provide space for machinery and a strong chassis, and to minimize intrusion of wheel arches into the passenger space. This type of design typically excluded about 25 percent of elderly and ambulant disabled people.

Where services for disabled people were provided, they were usually in converted delivery vans, fitted with a wheelchair lift and operated by day centers, charities and local government social service departments. They provided travel to day centers and special excursions, but gave no opportunity for spontaneous travel to destinations of choice.

This was the situation before the application of Universal Design to transport systems. Universal Design is the concept of designing services, equipment and infrastructure to be easy to use for as much of the population as possible, rather than catering to those who can use a standard service and adding specialized provision for those who cannot cope. This people-centered design puts people's abilities and requirements first, uses technology to satisfy those requirements and accepts the marginal economic cost.

In 1988, the Disabled Persons Transport Advisory Committee produced a specification identifying the design of a bus that would be easy for most people to use but would not be wheelchair accessible. This specified low steps, wide treads, good handrails, and bell pushes that could be reached by seated passengers. The next step in local bus accessibility was the introduction of low-floor buses. As soon as they entered service, people started using strollers and wheelchairs in them. The effectiveness of low-floor buses is increased by accessible bus stops. The high-floor coaches used for longer journeys are a problem for almost everybody. A design solution would put wheelchairs and a few seats on the lower deck with luggage and an upper deck for ambulatory travelers.

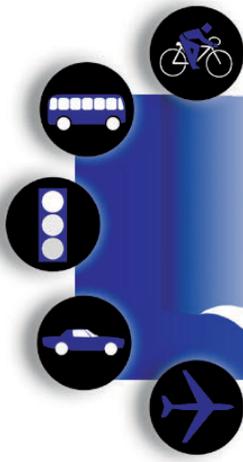
Taxis can be improved by fitting a swivel seat in the front passenger space. In Britain, all new purpose-built taxis have been wheelchair accessible since 1989. In Sweden, a low-floor taxi is now in service and thus provides a fully accessible, small-vehicle service.

Just as local buses have been made easier for everyone to use, so sidewalks and other pedestrian areas have been improved. Ramped curbs allow wheelchair access and textured paving strips at curbs to warn blind people. In town centers, there is a dual purpose "speed table" where the road is raised to sidewalk level to provide a level crossing and at the same time to slow traffic. The newest crossings use people detectors to extend the length of the pedestrian green phase when a slow walker is on the crossing.

Travel patterns of elderly people in Britain are very different from those in the U.S. This is a result of many factors, including low car ownership, land-use planning and more pedestrian-friendly public transport that is easier to use, offers better services and financial concessions for elderly passengers. Unlike in the U.S., in Britain, the number of bus and pedestrian journeys increases after the age of 60, and only declines after the age of 75-80. People are making 250-300 pedestrian journeys a year.

Some consider that these travel patterns are transient, and Europeans will become more car dependent as car ownership rises. There is no doubt that people want to get and use cars more. But in Italy, which has the highest car ownership in Europe, public transport use is the second highest in Europe. And Britain, with rather low car ownership, has one of the lowest uses of public transport. It does appear that where alternatives to the car are good enough, people will choose between car, bus, train and walk for any particular journey. This means that loss of a driver's license is not quite as devastating as it is in a more car-dependent society.

Conference Program



National Conference on ***Aging & Mobility***

Senior Mobility in the 21st Century – What Can We Do To Prepare?

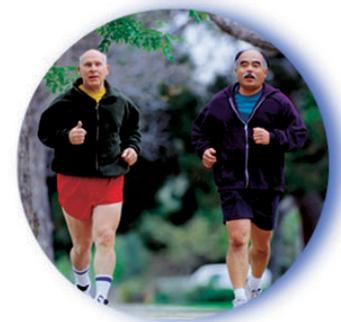
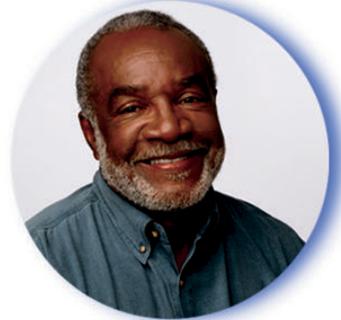
*A conference designed to help
government and community-based
organizations respond to the
transportation challenges related to
an aging population.*



*March 25-27, 2002
Doubletree La Posada Resort
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Hosted by the Maricopa Association of Governments,
in collaboration with more than 30 other national, state
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Creating solutions, changing lives.





Conference Program

Sunday, March 24

4:00 p.m. – 6:00 p.m.

Registration – Foyer

Monday, March 25

7:30 a.m. – 8:30 a.m.

Registration

Foyer

Continental Breakfast

Cactus Ballroom

8:30 a.m.

Welcome

James M. Bourey, Maricopa Association of Governments

Native American Conference Blessing

Forest Chimerica, Hopi Reservation

Opening Remarks

James M. Bourey, Maricopa Association of Governments

9:00 a.m.

General Session 1

Ballroom

How Will We Get There From Here? Strategies to Keep an Older America Moving

Like traffic itself, transportation policy and planning for an aging society is stop and go. The issue has made only modest progress in more than three decades of debate. How can older adult mobility be placed on personal, regional, state, and national agendas with sustained interest and investment? In a policy environment of limited resources and attention, what strategies can be developed and implemented to engage individuals and families as well as policy makers and planners to keep an older America moving?

Keynote Speaker: Dr. Joseph F. Coughlin, Director, MIT Age Lab

10:00 a.m.

Morning Break – Sponsored by Easter Seals Project ACTION

Foyer

10:30 a.m.

General Session 2

Ballroom

National & Regional Perspectives on Improving the Mobility and Safety of Older Persons

The implications of the growing aging population on mobility are causing advocacy groups, research institutions, and government agencies at all levels to plan proactive strategies for addressing the transportation challenges that lie ahead. Councilmember Claudia Walters will discuss the regional planning effort of the Maricopa Association of Governments, which resulted in the 2002 MAG Regional Action Plan on Aging & Mobility. Ms. Audrey Straight will share the consumer perspective obtained through surveys and focus groups with seniors, along with the implications for transportation policy and practice. Mr. Richard Marottoli will provide an overview of the development of the Transportation Research Board's 218 Update: *Transportation in an Aging Society*. Mr. Donald Trilling will review the key recommendations contained in the United States Department of Transportation (USDOT) National Agenda.

Moderator: Dr. Sandra Rosenbloom, The Drachman Institute, University of Arizona

- ***Claudia Walters, Councilmember, City of Mesa, Leader of the MAG Elderly Mobility Working Group***
- ***Audrey Straight, Senior Analyst, AARP Public Policy Institute***
- ***Richard A. Marottoli, Chair, Transportation Research Board Committee on Safe Mobility of Older Persons, VA Connecticut/Yale University***
- ***Donald R. Trilling, USDOT, Office of the Secretary***

12:00 p.m.

Lunch

Courtyard

OR

12:30 p.m.

Working Luncheon: Impact of Loss of Mobility on Health and Social Service Costs

Joshua Tree Room

1:30 p.m. – 3:00 p.m.

CONCURRENT SESSIONS (TRACKS A, B, C, D)

TRACK A: Transportation Planning/Design & Project Development

Apache Room

Session 1: Vehicles, Technology and Senior Safety

This session will discuss currently available vehicle features as well as future concepts that relate to comfort and convenience, accident avoidance, crash-worthiness and post-crash assistance. The examples will run the gamut, including seat belts and airbags, futuristic concepts such as vehicles that help you to see roadway signs in bad weather and/or at night, and vehicles that can sense possible impacts in advance and warn the driver. The talk will also include a brief discussion of the use of clothing that is specially designed to make people feel older!

- ***Jeffrey A. Pike, Ford Motor Company***

TRACK B: Senior-Friendly Development Planning

Maricopa Room

Session 2: Urban Growth Issues and the Impacts on Elderly Mobility

More than three quarters of all elderly people live outside the central cities of major metropolitan areas, often in low density areas. If trends continue, an even greater percentage will age in place in sprawling communities. Are New Urbanism, neotraditional design, and a battery of “Smart Growth” measures likely to help? Two different perspectives will be presented.

Moderator: Jack Tomasik, Maricopa Association of Governments

- *Dr. Sandra Rosenbloom, The Drachman Institute, University of Arizona*
- *Carlton Eley, United States Environmental Protection Agency*
- *Jacky Grimshaw, Center of Neighborhood Technology*
- *Deborah Howe, Portland State University*

TRACK C: Alternative Transportation Modes

Mohave Room

Session 3: Best Practices in the Coordination of Transportation Alternatives for Seniors and Other Transportation-Limited Populations

In this session an overview of model transportation coordination programs across the country, which target older adults and other transportation limited-populations, will be presented.

Moderator: Jeanne Ward, Agency Council on Coordinated Transportation

- *Dr. Jon E. Burkhardt, WESTAT, Inc.*
- *Jo Ann Hutchinson, Florida Commission for the Transportation Disadvantaged*
- *Patricia Hunt-Volmer, Medical Transportation Management, Inc.*

TRACK D: Older Driver Issues & Programs

Navajo Room

Session 4: Is Driving Mobility Critical for Aging in Place?

This session will look at the ways that people get around and discuss what happens to those who no longer drive nor have a driver in the household. The session will look at transportation trends for the next 20 years of people, drivers, walkers, and transportation users. Panelists will look at how the ability to drive or access transportation impacts a senior’s ability to age in place.

Moderator and Speaker: Dr. John Eberhard, National Highway Traffic Safety Administration

- *Jim Langford, Road Safety Accident Research Centre, Monash University, Australia*
- *Dr. Harvey Sterns, University of Akron and Creative Action, Inc.*
- *Dr. Mary Ann Thompson, Bellarmine University*

3:00 p.m.

Afternoon Break – Sponsored by Easter Seals Project ACTION

Foyer

3:30 p.m. – 5:00 p.m.

CONCURRENT SESSIONS (TRACKS A, B, C, D)

TRACK A: Transportation Planning/Design & Project Development

Apache Room

Session 5: Effective Application of the FHWA Older Driver Highway Design Guidelines

In recognition of the ever-increasing proportion of the population over the age of 65, the Federal Highway Administration funded a multi-year research project that investigated the effects of the aging process on highway user performance and ability. The results of that research pointed to a number of design enhancements intended to better accommodate the diminished capabilities of older persons. These findings and recommendations, documented in the recently revised “Highway Design Handbook for Older Drivers and Pedestrians,” will be the focus of this session.

- *Keith J. Harrison, Federal Highway Administration, Western Resource Center*

TRACK B: Senior-Friendly Development Planning

Maricopa Room

Session 6: Strategies for Elder-Friendly Communities: A Workshop on Gaining Widespread Support

As we consider ways to make our communities amenable to people of all ages, we look to how we can make mobility, housing and other human services meet the needs of our older population. But the decisions involved in making changes in any of these elements can be besieged with conflict and controversy. Few new programs or policies are put into place without widespread support of many parties, including residents, professionals and government leaders. This session will address a number of strategies to develop this support for changes, whether large or small, that can make a big difference in the degree of elder-friendliness in neighborhoods or communities.

- *Dr. Patricia Barron-Pollak, Cornell University*

TRACK C: Alternative Transportation Modes

Mohave Room

Session 7: Models for Mobility Options in Rural Communities

Finding mobility options for seniors is especially challenging in rural communities where transit and other options are often very limited and there are great distances between households. This session will provide three perspectives on innovative approaches to address these challenges.

Moderator: Jule Drown, Community Transportation of Southern Arizona

- *Santo A. Grande, Delmarva Community Services, Inc.*
- *Dr. Ronni Sterns, Creative Action, Inc.*
- *Lena Timmons, Easter Seals Project ACTION*

TRACK D: Older Driver Issues & Programs

Navajo Room

Session 8: The Value of Functional Testing in Relation to Older Drivers and Licensing Renewal Screening

Medical advisory boards in driver licensing agencies provide recommendations on fitness-to-drive for a variety of medical conditions. Vision, physical function, memory, perception and cognition are all attributes that contribute to being a safe driver. This session provides an overview of functional screening and its usefulness when drivers are referred to a DMV for fitness-to-drive, and the possible use of such screenings at license renewal time.

Moderator and Speaker: Dr. Robert L. Raleigh, Maryland Motor Vehicle Administration

- *Dr. Karlene Ball, University of Alabama*
- *Dr. Allen Dobbs, DriveABLE Assessment Centers*

6:00 p.m. – 8:00 p.m.

Welcome Reception

Courtyard

Featuring “Mariachi Chapala,” Mariachi Band

7:00 p.m.

Joint Meeting of the TRB Committees on Accessible Transportation and Mobility, Paratransit, Rural Public and Intercity Bus Transportation and Safe Mobility of Older Persons.

Joshua Tree Room

Tuesday, March 26

7:30 a.m.

Continental Breakfast

Cactus Ballroom

8:30 a.m. – 10:00 a.m.

CONCURRENT SESSIONS (TRACKS A/B, C, D)

TRACKS A/B: Transportation Planning/Design & Project Development and Senior-Friendly Development Planning

Apache Room

Session 9: Integrating Aging & Mobility Into the MPO and State Planning Process

A proactive role by state and metropolitan planning organizations can make a difference in the planning and coordination of transportation services for older adults. This session will explore the roles of these organizations in Minnesota, Michigan, Ohio and Arizona.

Moderator: Maureen DeCindis, Maricopa Association of Governments

- *Jennifer E. Evans, AICP, Southeast Michigan Council of Governments*
- *Charlie Nelson, Creative Action, Inc.*
- *Leonard W. Levine, Leonard W. Levine & Associates*

TRACK C: Alternative Transportation Modes

Mohave Room

Session 10: Best Practices and Policies Related to Supplemental Transportation Serving Seniors

This session has two focus areas: state laws that promote senior mobility and existing model supplemental transportation services for seniors. Preliminary findings will be presented from a review of state policies that examined whether the policies promoted or hindered efforts to provide a broad range of transportation alternatives. The presentation will include four case studies of innovative transportation laws that hold promise for providing seniors better options. In addition, The Beverly Foundation will offer the first half of a presentation on the results of a national survey that identified 236 model supplemental transportation programs for seniors. **NOTE:** This presentation will extend into the next break out period beginning at 10:30 a.m. in the Mohave Room.

Moderator: Richard Smith, Transportation Reimbursement & Information Program (T.R.I.P.)

- *Barbara McCann, Surface Transportation Policy Project*
- *Helen Kerschner, The Beverly Foundation*

TRACK D: Older Driver Issues & Programs

Navajo Room

Session 11: Older Driver Assessments:

- A) California's Tiered Driver Assessment and its Strategy for Increasing Test Sensitivity**
- B) Results of the Maryland Consortium Driver Competency Assessment Program**

This session will look at efforts in California and Maryland to develop older driver assessment programs within a department of motor vehicles setting. **NOTE:** The presentation on the Maryland model will extend into the next break out period starting at 10:30 a.m. in the Navajo Room.

Moderator: Cydney DeModica, Arizona Department of Motor Vehicles

- *Dr. David Hennessy, California Department of Motor Vehicles*
- *Dr. Robert L. Raleigh, Maryland Motor Vehicle Administration*
- *Dr. Loren Staplin, TransAnalytics, Inc.*

10:00 a.m.

Morning Break – Sponsored by Easter Seals Project ACTION
Foyer

10:30 a.m. – 12:00 p.m.

CONCURRENT SESSIONS (TRACKS A/B, C, AND D)

TRACKS A/B: Transportation Planning/Design & Project Development and Senior-Friendly Development Planning

Apache Room

Session 12: Design Considerations and Conflicts for Older Drivers, Pedestrians and Bicyclists

People of all ages want to live in a community where they can walk and bicycle. They also seek an environment that is safe and healthy. In the quest to build transportation systems, the bicyclist and the pedestrian have been overlooked too often. Now communities are awakening to the multiple benefits – from health, socializing, and physical activity – that livable cities provide. This presentation will describe how streets should be designed to accommodate and encourage walking and bicycling by seniors. A visual presentation will highlight good and poor design issues.

- *Bill Wilkinson, National Center for Bicycling and Walking, Bicycle Federation of America*
- *Jim Langford, Road Safety Accident Research Centre, Monash University, Australia*

TRACK C: Alternative Transportation Modes

Mohave Room

Session 10 Continued: Applied Models in Supplemental Transportation Serving Seniors

This session will provide an in-depth analysis of existing model supplemental transportation programs for seniors. Data will be presented on the organizational and operational characteristics of these programs. Although these programs vary significantly in size, budgets, affiliations, and relationships, as a whole they are capable of providing services and are especially relevant for the age 85+ population who require transportation assistance. Additional information will be provided on the continuum of models that these programs represent. Three important policy objectives will be addressed: (1) traditional transportation options should meet the needs of the majority of seniors; (2) specialized transportation should be made available for the growing segment of the senior population that cannot use traditional options; and (3) avenues must be developed for the aging and transportation communities to work together to ensure the safe mobility of seniors who no longer drive.

- *Dr. Helen Kerschner, The Beverly Foundation*
- *Richard Smith, Transportation Reimbursement & Information Program (T.R.I.P.)*

Maricopa Room

Session 13: The Independent Transportation Network (ITN): Explore Whether ITN Could Benefit Your Community

In this session, the ITN's founder will present the Federal Transit Administration's Handbook to help communities apply the ITN model for economically sustainable senior transportation. ITN uses an entrepreneurial, community-based approach reminiscent of the 19th Century affiliated social services that charge fees, watch the bottom line, involve the community, and make ends meet without government support. ITN brings this approach, the benefits of modern technology for routing and dispatching, and the customer awareness of social marketing. Draft copies of the "ITN Handbook: How to Start an ITN in Your Community" will be available.

- *Katherine Freund, ITN*

TRACK D: Older Driver Issues & Programs

Navajo Room

Session 11 Continued: Results of the Maryland Consortium Driver Competency Assessment Program

This session will review the project goals, development of the test battery, sample characteristics, and principal findings. The presenters will also discuss implications for the pending National Highway Traffic Safety Administration/American Association of Motor Vehicle Administrators Model Driver Screening and Evaluation Program Guidelines.

Moderator: Cydney DeModica, Arizona Department of Motor Vehicles/MVD

- *Dr. Robert L. Raleigh, Maryland Motor Vehicle Administration*
- *Dr. Loren Staplin, TransAnalytics, Inc.*

12:00 p.m.

Lunch

Courtyard

Humor: A Coping Skill for Aging

The purpose of this presentation is to explore the role of humor in encouraging resilience as we age. Participants will be provided with techniques and ideas for using humor that are particularly effective for seniors, in order to encourage resilience and enrich their lives. The presentation can be instructive for anyone dealing with seniors, as well as everyone who is planning to grow older.

Keynote Speaker: Ellie Marek, Laughline Consultants

1:30 p.m. – 3:00 p.m.

CONCURRENT SESSIONS (TRACKS A, B, C, AND D)

TRACK A: Transportation Planning/Design & Project Development

Apache Room

Session 14: Roundtable Discussion: What Should Be Included in the Reauthorization of TEA-21 Concerning Aging & Mobility?

This will be an interactive session that will focus on developing a strategy focusing on the needs of senior Americans in the reauthorization of the Transportation Equity Act of the 21st Century, occurring in 2004.

Facilitators: Charles Dickson, Community Transportation Association of America (CTAA) and Connie Soper, Metropolitan Transportation Commission

TRACK B: Senior-Friendly Development Planning

Maricopa Room

Session 15: Mobile Workshop: A Walking Tour to Assess Senior-Friendly Land Use

In this mobile workshop, participants will actually walk routes in order to assess firsthand the aspects of street design that encourage and/or impede transportation for older adults. Utilizing a livable cities/AARP inventory, participants will be able to identify issues and solutions.

- *James D. Coffman, RLA, ASLA, Todd & Associates, Inc.*
- *Maureen DeCindis, Maricopa Association of Governments*

TRACK C: Alternative Transportation Modes

Mohave Room

Session 16: Developing a Regional Transit Strategy to Serve Seniors

This workshop will offer guidelines for changes to transit services that would provide better transportation options for older persons. Travel needs of older persons in the future will be examined. Examples of enhanced transit options for elders from the US and other countries will be discussed. Participants are invited to consider high-payoff strategic approaches for transit for the next several decades. Data from a current planning effort in the San Francisco Bay area will be used to show how the national research can be applied to a specific region.

Moderator: *Rosemary G. Mathias, Multisystems, Inc.*

- *Dr. Jon E. Burkhardt, WESTAT, Inc.*
- *David Koffman, Nelson/Nygaard Consulting Associates*

TRACK D: Older Driver Issues & Programs

Navajo Room

Session 17: Keeping Seniors Independent: What Are the Remediation and Training Options Available?

This presentation will provide a number of viewpoints from accomplished occupational therapists and certified driver specialists on ways to keep seniors behind the wheel safely. Focus areas include assessments to determine fitness-to-drive, driver training, adapted equipment, and compensatory driving techniques. A few case histories will be presented, along with an overview of dangerous warning signs of a senior's unsafe driving.

Moderator: *Betsy Buxer, The Community Forum*

- *Dr. Karlene Ball, University of Alabama at Birmingham*
- *Carol Blanc, Association of Driving Specialists (ADED)*
- *Lynn Hedrick, DriveABLE Solutions*
- *Dr. Linda Hunt, OTR/L, Maryville University*

3:00 p.m.

Afternoon Break – *Sponsored by Easter Seals Project ACTION*

Foyer

3:30 p.m. – 5:00 p.m.

CONCURRENT SESSIONS (TRACKS A, B, C AND D)

TRACK A: Transportation Planning/Design & Project Development

Apache Room

Session 18: Enhancing Senior Accessibility to Airports and Air Transportation

While much attention has been given to senior use of ground transportation to maintain mobility, less focus has been placed on enhancing senior access to airports and air transportation. This session explores the problems confronted by seniors as they make use of airport facilities, and identifies next steps that need to be taken to make these facilities more senior-friendly. Recognition will be given to resources that are already available and steps that have been taken to assist seniors in new ways to make their travel more enjoyable will also be explored.

Moderator: Kit Weiss, City of Phoenix Aviation Department

- *Harry P. Wolfe, Maricopa Association of Governments*
- *Norbert Senfleben, City of Phoenix Aviation Department*

TRACK B: Senior-Friendly Development Planning

Maricopa Room

Session 19: Promoting Senior-Friendly Neighborhoods

The presentation focuses on criteria for neighborhoods that encourage senior residents to walk comfortably and safely and meet their basic needs within a relatively close proximity of their homes. When driving is required, signage is clear and awkward turns are minimized. Senior-friendly neighborhoods are also pedestrian-friendly neighborhoods for residents of all ages. Several nodes with heavy proportions of residents over age 75 within Phoenix are assessed in light of these criteria and suggestions are made for modifications that will enhance the comfort and safety of older residents. In addition, session participants will learn about the Partnership for Prevention's Active Aging Initiative. Discussion will focus on how physical environments can effect one's walking and biking patterns, and hear suggestions on the development of a local plan to make communities more activity friendly for older adults.

Moderator: Brian Fellows, City of Mesa

- *Dr. Mary Kihl, Arizona State University, College of Architecture and Environmental Design*
- *Molly E. French, Partnership for Prevention*

TRACK C: Alternative Transportation Modes

Mohave Room

Session 20: Transportation Solutions for Older Adults and Caregiver Issues

This session will address the transportation barriers facing seniors, discuss potential solutions from the perspectives of both seniors and caregivers, and emphasize methods for integrating senior transportation into other forms of public and community transportation.

Moderator: Marty Dimig, Mesa Senior Services, Inc.

- *Charles Dickson & Shawn Hairston, Community Transportation Association of American*
- *Donna Powers and Betsy Buxer, The Community Forum*
- *Lisa R. Peters, MPH, Easter Seals*

TRACK D: Older Driver Issues & Programs

Navajo Room

Session 21: National Social Marketing Approaches Addressing Senior Driver Issues

This session will begin with a brief overview of the nature and extent of the older driver safety problem in the U.S., followed by a short introduction to the field of social marketing. The presenters will discuss transferring the concepts and principles of social marketing and its historic use in public health settings to traffic safety. The presenters will describe current national social marketing campaigns from the National Highway Traffic Safety Administration and the American Association of Motor Vehicle Administrators. These campaigns seek to inform and educate the public, particularly focusing on older drivers and those who interact with them (e.g. family members, friends, and the medical community), seeking to modify behavior so that older drivers can maximize their mobility while minimizing risk to themselves and to other road users.

Moderator: Kent Milton, American Association of Motor Vehicle Administrators (AAMVA)

- *Cydney DeModica, Arizona Department of Transportation/MVD; AAMVA/Chair, Older Driver Committee*
- *Joan S. Harris, National Traffic Safety Administration*

Goldwater Room

Session 22: Older Driver Education Programs

This session will present two models of older driver education: the Traffic Improvement Association's (TIA) classroom and on-the-road evaluation program, and the AARP 55-Alive Driver Safety Program.

- *Frank Cardimen, TIA*
- *Bruce Taft, AARP Arizona*

6:00 p.m. – 6:45 p.m.

Reception

Courtyard

Featuring "Take Two," Jazz Duet

6:45 p.m. – 8:00 p.m.

Conference Dinner

Ballroom

Universal Design To Help Older Travelers

The application of universal or people-focused design to transit systems and pedestrian infrastructure is helping older people, people with mobility impairments and most other travelers. This session will show examples of good and bad practices to illustrate the development of user-friendly transit systems. It will also provide some information on travel by older people in Britain, to show that where there are viable alternatives to the car, mobility remains possible for people who have had to stop driving. As in the U.S., older people in Britain are mobile and active from retirement to at least their mid-70s, but as they age, fewer journeys are as car driver and more are on foot, by transit and as a passenger in a car.

Keynote Speaker: Dr. CGB (Kit) Mitchell, Transport Scientist and Engineer, United Kingdom

7:30 a.m.

Continental Breakfast

Foyer

8:30 a.m. – 11:00 a.m.

General Session 3

Ballroom

What Did We Learn and Where Do We Need to Go From Here?

This session will summarize the high points or key learnings from each of the four conference tracks and engage the participants in determining Next Steps at the following levels: among Metropolitan Planning Organizations or Councils of Governments; among State Departments of Transportation; within the United States Departments of Transportation, and locally among social service and health-focused agencies and other stakeholder groups. After participants from each track present the highlights from the conference sessions, representatives from the U.S. Department of Transportation will provide brief updates on current and planned activity related to aging and mobility. The participants will then develop a list of Next Steps related to issues of further development and specific actions needed to be taken.

Facilitator: James M. Bourey, Maricopa Association of Governments

Participants: Track A: Rosemary Siipola; Cowlitz-Wahkiakum Council of Governments; Track B: Audrey Straight, AARP; Track C: Nancy Wagner, Charlotte County MPO; Track D: Lena Timmons, Easter Seals Project ACTION

USDOT Briefings: Beth Alicandri, Federal Highway Administration; Doug Birnie, Federal Transit Administration; Dr. John Eberhard, National Traffic Safety Administration and Dr. Donald R. Trilling, Office of the Secretary

11:00 a.m. – 1:00 p.m.

Lunch on Your Own

1:00 p.m. – 4:00 p.m.

General Session 4

Ballroom

Seminar: An Introduction to Designing Highways to Accommodate Older Drivers and Pedestrians

This seminar is an abridged version of a daylong workshop based on the Federal Highway Administration's recently published "Highway Design Handbook for Older Drivers and Pedestrians." The "Handbook" updates and expands upon findings and recommendations of its predecessor publication, the "Older Driver Highway Design Handbook," issued in 1998. The seminar will explore the changes in mental and physical abilities that all of us can expect to experience as we grow older; discuss the implications of these diminished capabilities in the highway environment, and present practical guidelines and recommendations that may help the design practitioner better meet the needs of all road users. **NOTE:** A break, sponsored by Easter Seals Project ACTION, will be provided during this session.

Keynote Speaker: Keith J. Harrison, Federal Highway Administration, Western Resource Center

Conference Planning Committee

National and Local Organizations

Melissa Byrd, The National Governor's Association
Curtis Cook, AARP - Arizona Office
Donald Davis, National Council on Aging
Katherine Freund, Independent Transportation Network
Shawn Hairston, Community Transportation Association of America
Karen Latimer, Easter Seals of Arizona
Shelly Modell, City of Las Cruces
Dr. Sandra Rosenbloom, The Drachman Institute, University of Arizona
Audrey Straight, AARP - National Office
Lena Timmons, Easter Seals Project ACTION

State and Federal Transportation Agencies

Doug Birnie, Federal Transit Administration
Jennifer Brown, Federal Highway Administration - Arizona Office
Cydney DeModica, Arizona Department of Transportation - Motor Vehicle Division
Dr. John Eberhard, National Highway Traffic Safety Administration
Dennis Mittelstedt, Federal Highway Administration - Arizona Office
Janet Oakley, American Association of State Highway and Transportation Officials
Dr. Robert L. Raleigh, Maryland Motor Vehicle Administration
Dr. Donald R. Trilling, Office of the Secretary of Transportation

Metropolitan Planning Organizations

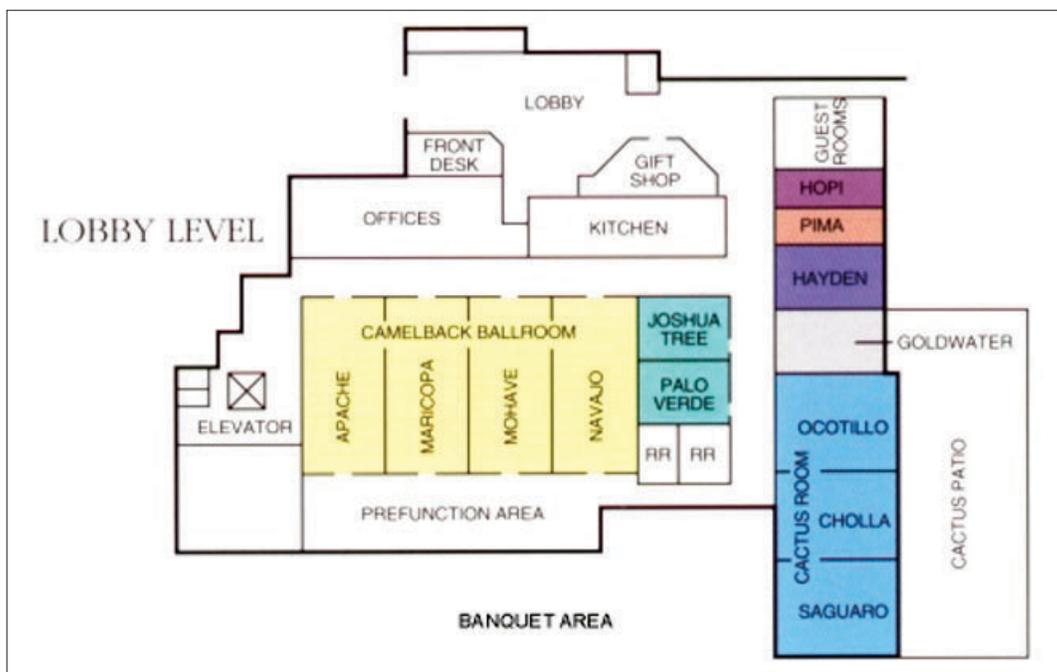
Lisa Beever, Charlotte County Punta Gorda Florida MPO
James M. Bourey, Maricopa Association of Governments
David Carpenter, Las Cruces, New Mexico MPO
Louise Daley, Southeastern Regional Planning & Economic District
Marianne Doonan, Bi-State Regional Commission
Howard Glassman, Florida MPO Advisory Council
John Gross, Yuma Metropolitan Planning Organization
W. Earl Long, Baltimore Metropolitan Council
Jonathan Lupton, Metroplan
Michael Maholtz, Sarasota/Manatee MPO
Kathy Mehl, Toledo Metropolitan Area Council of Governments
Gerald Miller, National Capital Regional Transportation Planning Board
Lynn Potler, Pima Association of Governments
Suzanne Quigley, Maricopa Association of Governments
Rosemary Siipola, Cowlitz-Wahkiakum Council of Governments
Connie Soper, Metropolitan Transportation Commission
Thomas L. Swanson, Pima Association of Governments
Alex Taft, Association of Metropolitan Planning Organizations
Nancy Wagner, Charlotte County Punta Gorda Florida MPO

Sponsors

- AARP
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- Arizona Department of Transportation
- Association of Metropolitan Planning Organizations
- Blue Cross/Blue Shield of Arizona
- Easter Seals Project ACTION
- Federal Highway Administration
- Federal Transit Administration
- The Drachman Institute, University of Arizona
- The Hartford Financial Services Company–MIT AgeLab



Doubletree La Posada Resort • 4949 E. Lincoln Drive • Scottsdale, Arizona



Map of Meeting Rooms

Speaker Information



Senior Mobility in the 21st Century – What Can We Do To Prepare?

March 25-27, 2002
Doubletree La Posada Resort, Scottsdale, Arizona

SPEAKER INFORMATION

Elizabeth Alicandri is a Transportation Specialist in the Federal Highway Administration's (FHWA) Safety Core Business Unit. She has been involved in FHWA's Older Road User Program since its inception in the mid 1980s and has actively participated in all aspects of the program, from problem definition through research to outreach. Ms. Alicandri has a bachelor's in psychology and a master of science degree in transportation engineering.

Karlene Ball, Ph.D., is Professor of Psychology at the University of Alabama at Birmingham. Dr. Ball received her doctorate in experimental psychology from Northwestern University in 1979. She is currently the Director of the UAB Edward R. Roybal Centers for Research on Applied Gerontology funded by the National Institute on Aging, and she recently chaired the Human Factors and Ergonomics Society Technical Group on Aging. She is a member of the Transportation Research Board/National Research Council and serves frequently on expert panels charged with setting the vision standards for commercial and older drivers. Ms. Ball has authored numerous publications on visual, attentional, and cognitive changes with age, as well as on the identification of at-risk older drivers. She recently received a M.E.R.I.T. award from the National Institutes of Health for her basic research program on the everyday activity problems of older adults and the development of new interventions to prevent or retard age-related declines.

M. Douglas Birnie is a member of the Federal Transit Administration's (FTA) Office of Research, Demonstration and Innovations. In that office, he serves as the Team Leader of Specialized Customer Transportation Service Programs. Mr. Birnie is involved with FTA's interagency efforts to develop coordinated transportation programs for human services transportation services. He is involved in developing the transportation component of the President's New Freedom Initiative for persons with disabilities and works closely with the National Easter Seal's Project ACTION on implementing solutions to the barriers facing persons with disabilities. He is part of the Department's working group developing a national transportation agenda for older Americans. He serves as the agency interagency welfare-to-work coordinator and participated in the creation of FTA's Job Access and Reverse Commute Program. Mr. Birnie leads the technical assistance and evaluation activities associated with the Job Access program. Prior to these activities, he was the FTA's Director of the Office of Private Sector Initiatives and participated in the early development of FTA's policy recognizing paratransit services as eligible mass transportation services. Mr. Birnie served as a legislative assistant for transportation for former Congressman Jim Moody who served on the House Public Works Committee, now the Surface Transportation and Infrastructure Committee.

Carol Blanc, OTR/L, CDRS, graduated from Northeast Louisiana University with a bachelor of science degree in occupational therapy. She is the Senior Occupational Therapist at Good Samaritan Rehabilitation Institute (GSRI). During her years of experience at GSRI, she has gained skill in neurological rehabilitation, orthopedic rehabilitation, and assistive technology with the adult and elderly population. In 1986, she developed the Adapted Driving Program at GSRI and has become a Certified Driver Rehabilitation Specialist. Along with the development of the Driver Program, Ms. Blanc became involved in the Seating/Positioning Clinic for clients in wheelchairs. Presently, she is the coordinator and one of the four Certified Driver

Rehabilitation Specialists in the Adapted Driving Program. Ms. Blanc has presented nationally and internationally on various aspects of Adapted Driving. Currently, she is the President of the Association of Driver Rehabilitation Specialists, which is an international organization.

James M. Bourey has been the Executive Director of the Maricopa Association of Governments since 1997. Prior to this position, he served as the County Administrator for Hennepin County in Minneapolis, Minnesota. He has extensive experience in the areas of public administration and urban planning. Mr. Bourey received a bachelor's in environmental design from North Carolina State University, a master's of urban design and a master's of architecture from Washington University. He has authored articles published in the *ICMA Textbook*: "Capital Projects;" "New Strategies for Planning, Management, and Finance;" "Growth in Arizona: The Machine in the Garden" and journals including *Public Management*; *Urban Design International*; *APWA Reporter* and *Florida Constructor*.

Jon E. Burkhardt, Ph.D., Senior Study Director at WESTAT, holds a master's degree in city planning from the Massachusetts Institute of Technology. Previously, he was President of Ecosometrics, Inc. His recent studies include *Mobility and Independence: Changes and Challenges for Older Drivers*, and *Coordinated Transportation Systems*. The primary focus for both these projects was transportation services for older persons; in the first study, he developed the projections of older driver fatalities that are widely quoted today. Other work includes transportation for persons with special needs (such as older persons and persons with disabilities), survey research involving older persons, economic impacts of transportation, financial management guidelines for transportation providers, coordinating the U.S. Department of Transportation and the U.S. Department of Health and Human Services transportation services, and transit services for rural communities. Mr. Burkhardt chairs the Transportation Research Board's Committee on Rural Public and Intercity Bus Transportation. Current projects include improving public transit options for older persons, using survey research to measure the "elder-friendliness" of local jurisdictions, economic benefits of coordinating human service transportation and transit services, preparing a "toolkit" for coordinated transportation services, and measuring the performance outcomes of service programs for seniors.

Betsy Buxer first understood the capacity of people with disabilities when, as a young teacher, she was exposed to a master teacher who taught children with a variety of disabilities to fulfill their potential. This inspired her to study special education, but it was not until she was hired to direct the Transportation Project at the Community Forum in Phoenix that her education was put to use. The Transportation Project was initiated by the Community Forum and the Maricopa Association of Governments to improve mobility for people with disabilities and older adults by coordinating existing transportation services. The Project has evolved over 20 years to include research, technical assistance operator and passenger training, information, referral and advocacy, a Taxi Subsidy Program and Dial-A-Ride Quality Assurance Monitoring. People with disabilities participate as part-time employees of the project. The Transportation Project links users, funders and providers of transportation to improve mobility for people with disabilities and older adults.

Frank P. Cardimen, Jr., has been President of the Traffic Improvement Association (TIA) since 1993. TIA is a 35-year old non-profit, public-private corporation involved in the elements of traffic safety, namely engineering, education, and enforcement. For nearly 30 years, TIA has monitored more than 1200 intersections and 2400 road linkages in Oakland County, providing necessary traffic crash data information to its 62 local communities and the Road Commission for Oakland County. TIA is also involved in educating the public about mature driver issues in Michigan and the United States through hosting mature driver workshops and monitoring state and national policy and program issues related to improving traffic safety for this population segment. Mr. Cardimen is frequently a speaker at international, national, state and local conferences talking about the comprehensive TIA mature driver workshops and the overall need for involvement from public and private sectors as our society grows older. He is also active at Oakland University, the Greater Rochester Chamber of Commerce, Rochester Community Foundation and other civic activities.

James D. Coffman, RLA, ASLA, has over 17 years of professional landscape architectural experience emphasizing parks, open space and multi-modal planning and design. More than 11 years of his experience was from employment with the cities of Phoenix and Scottsdale. As Scottsdale's Parks and Trails Planner, he oversaw the implementation of the City's 300 plus mile multi-use trail system and initiated revised trail and signage design standards. Mr. Coffman represented Phoenix on the Maricopa County Hiking and Riding Trails Committee and represented both cities on the Arizona State Committee on Trails (ASCOT). As a member of ASCOT, Mr. Coffman co-chaired the 1995 State Trails Conference and helped produce the *In Their Shoes* trail-sharing video and accompanying lesson plan. As a National Board Member of American Trails, he co-chaired the 1998 National Trails Symposium and created an educational session entitled "Trails as Placemakers." While in the private sector, Mr. Coffman served as Project Manager of the Maricopa Association of Government's Pedestrian Plan 2000 and has used his knowledge of trails, bicycle facilities and pedestrian design in the planning of master planned communities and individual site plans for a variety of land uses. Mr. Coffman is currently the Senior Project Manager for Todd & Associates, Inc., and is a member of the American Society of Landscape Architects and serves as Member-at-Large on the Executive Committee of the Arizona Chapter. Mr. Coffman received a master's of landscape architecture from Ball State University. He is a frequent guest lecturer at Arizona State University, and was an instructor at Glendale Community College.

Joseph F. Coughlin, Ph.D., is founder of the MIT Age Lab – a global collaboration between the Massachusetts Institute of Technology, industry and the aging community to engineer innovative technologies to improve the lives of older adults and those who care for them. Dr. Coughlin also serves as the Director of the New England University Transportation Center, sponsored by the U.S. Department of Transportation, where he conducts research on the transportation needs of older adults. He recently co-authored a book with Roger W. Cobb on the politics and policy of older drivers and transportation for an aging society. Dr. Coughlin was recently named to lead the 35-nation Organization for Economic Cooperation and Development's (OECD) study on new transportation technologies and services for older people. He teaches public policy and management in MIT's Engineering System Division and Department of Urban Planning.

Maureen DeCindis is a Transportation Planner for the Maricopa Association of Governments. In this capacity, Ms. DeCindis coordinates the bicycle, pedestrian and elderly mobility planning efforts for the region. She staffs the Regional Bicycle Task Force, which implements the bicycle plan by developing bicycle facilities and networking with agencies and citizens to promote trails, parks, open space, livable cities and physical activity through bicycling and walking. She staffs the Elderly Mobility Stakeholders group that implements the Aging and Mobility Plan, including 25 recommendations in Land Use and Infrastructure, Alternative Modes Education and Older Driver Competency. She also staffs the Pedestrian Working Group, which implements the MAG Pedestrian Design Guidelines and Policies through the Pedestrian Design Assistance program including development of pedestrian plans, facilities and educational conferences. Previously, Ms. Decindis served as a Travel Demand Management Consultant, a Registered Nurse in Intensive Care, and as a high school teacher. She also worked as Executive Director of the Phoenix Area Health Fair. She has degrees in education, nursing and respiratory therapy. She has served on a number of boards, including the Tempe Community Council, Governor's Bicycle Task Force, Tempe Transportation Commission, and Tempe Leadership. Ms. DeCindis has traveled through Europe, Africa, Asia, Central America and Australia. Her interests include hiking, biking, rollerblading, skiing, kayaking and rowing.

Cydney DeModica is currently the Media Relations Director for the Arizona Department of Transportation – Motor Vehicle Division (ADOT/MVD) and Chair of the American Association of Motor Vehicle Administrators (AAMVA) Older Driver Committee. She has been actively involved in Arizona traffic safety, transportation, and law enforcement issues throughout her career. She was with AAA Arizona for seventeen years, and was the organization's lobbyist for five years. During that time, Ms. DeModica actively lobbied for passage of Arizona's seat belt law and other public safety issues. She was a charter member, and served on the board of directors of ITS Arizona, was actively involved with the Arizona Highway Users Conference, and partnered with the National Highway Traffic Safety Administration (NTSA), the Federal Highway Administration (FHWA) and local organizations to host an international Older Driver/Pedestrian Conference. She was co-founder of Arizona's Combat Auto Theft program, a statewide vehicle registration program to reduce auto theft. Currently, Ms. DeModica is the spokesperson for the Motor Vehicle Division and continues to be involved in transportation and traffic safety-related programs.

Charles Dickson has more than 22 years of experience in the community transportation field. He brings to his position as the Community Transportation Association of America's (CTAA) Associate Director a broad background in transit. In his previous position with the Maryland Mass Transit Administration, Mr. Dickson was responsible for grants management and the provision of technical assistance to community transit systems on Maryland's eastern shore. He also spent eight years in the southern Illinois community transit arena, planning and directing a multi-county rural public transportation system. For CTAA, Mr. Dickson established the Rural Transit Assistance Program National Resource Center, The CTAA TransNet (a national peer-to-peer technical assistance self-help network), and managed CTAA's Transit Assistance Hotline. Mr. Dickson also helped create the CTAA's training programs and the Certified Community Transportation Manager program, the first managerial certification program in the transit

industry. In his current position as CTAA's Director of National Programs, Mr. Dickson oversees operations of the "JOBLINKS" project, a nationally recognized program funded by the FTA and Department of Labor that provides research and technical assistance to ensure that Americans can use public transportation to reach the workplace.

Dr. Allen Dobbs is a Professor Emeritus in the Psychology Department, a Professor in the Division of Neuroscience, and an Adjunct Professor of Medicine at the University of Alberta. He is the past Director of the Centre for Gerontology at the University and founder and past Director of the Neurocognitive Research Unit of the Northern Alberta Regional Geriatric Program located at the Glenrose Rehabilitation Hospital. His association with the geriatric program led to his interest and the research on medical conditions and driving. Nearly a decade of research testing of hundreds of normal and medically-compromised drivers of all ages culminated in the research-based and validated driver assessment procedures of DriveABLE. Dr. Dobbs has been a member of many expert panels investigating medical conditions and driving. In 1999, he was awarded the *Prix d'Excellance – Claude P. Beaubien – Award of Excellence* for his research on driver assessments. Making a practical difference was the next step. For taking the research to practice by founding DriveABLE Assessment Centres, Dr. Dobbs was named an *Alberta Innovator of the Year*. The Alberta licensing authorities recognized the need for scientifically based and defensible evaluations and adopted the DriveABLE assessment as Alberta's standard for evaluating medically at-risk drivers. DriveABLE evaluations now are available and accepted in all major provinces.

Dr. John Eberhard is a Senior Research Psychologist for the National Highway Traffic Safety Administration (NHTSA). He has been involved with older driver programs at NHTSA since 1988. He recently chaired an international working group for the Organization of Economic Cooperation and Development on "Aging and Transport." He is currently developing a National Agenda to help ensure the safe mobility of older people. Dr. Eberhard's activities are focused on enabling older people to drive as long as they are safely able to do so, and then help them to transition to an acceptable form of alternative transportation. He has written numerous reports and convened numerous international, national, state and local meetings to identify what was needed to minimize older drivers' risk while maximizing their mobility. Dr. Eberhard received his doctorate in experimental psychology from Fordham University.

Carlton Eley works for the U.S. Environmental Protection Agency's (EPA) Office of Policy, Economics, and Innovation in Washington, DC. He is a staff member of the Development, Community, and Environment Division, which manages the Smart Growth program. In this capacity, Mr. Eley provides communities and stakeholders with the necessary tools, research, and policy that will assist them in pursuing development options that are good for the environment, community, and economy. He started his career with EPA as an Environmental Protection Specialist for the Region VII Office in Kansas City, Kansas. Carlton is a member of Alpha Phi Alpha Fraternity, Inc., Blacks in Government (BIG), and the National Association for the Advancement of Colored People (NAACP). He has a bachelor's in sociology/social work curriculum from Elizabeth City State University as well as a master of science degree in urban and regional planning from the University of Iowa. Mr. Eley is an alumnus of the ECO Associate Program and a recipient of ECO's Diversity Initiative Distinguished Alum Award. He is also an

alumnus of the EPA Intern Program, which is a career development program for future EPA leaders.

Jennifer Evans is a Senior Transportation Engineer with the Southeast Michigan Council of Governments (SEMCOG). SEMCOG is the designated Metropolitan Planning Organization (MPO) for the seven-county Southeast Michigan region. Ms. Evans was primarily responsible for developing the *Elderly Mobility & Safety Final Plan of Action* for the State of Michigan in 1999. The plan includes a comprehensive set of recommendations in the areas of traffic engineering, alternative transportation, housing, health, driver licensing, and education. Ms. Evans serves in an advisory capacity on a work group comprised of pertinent state departments charged with overseeing implementation of the recommendations. She also continues working to develop sensible initiatives at the MPO level to enhance mobility for elderly citizens in Southeast Michigan. This work complements her primary responsibility of managing the region's long-range transportation plan. Ms. Evans has a bachelor's degree in civil engineering from the University of Dayton, a master of science in civil engineering and a master's of city and regional planning from Ohio State University. She has been with SEMCOG since 1997.

Molly E. French is the Director of Policy Research for Partnership for Prevention. In this position, Ms. French manages the Partnership's cooperative agreement with the Centers for Disease Control and Prevention to develop national strategies that advance disease prevention and health promotion. She directs a project to give policymakers guidance on encouraging older adults to walk and bike and another that assesses employers' coverage of clinical preventive services. Prior to joining Partnership, Ms. French was responsible for managed care policy at the California Health Care Association/California Physician Groups' Council and served as the Director of the California Telehealth & Telemedicine Center. At the National Governor's Association, she assisted state executive offices with economic and workforce development policies. Ms. French earned her master's degree in community and regional planning at the University of Texas at Austin; a certificate in management from the University of California, Davis; and a bachelor's in international relations from Drake University. She is a member of the Academy of Health Services Research and Health Policy and the Greater Washington Society of Association Executives. She volunteers at Hillwood Museum and Gardens located in Washington, D.C.

Katherine Freund is the founder and President of the Independent Transportation Network (ITN), and *ITNAmerica*. Funded as a model project by the Federal Transit Administration, the ITN is developing a transit solution for non-driving seniors that relies on user fees and community support to achieve economic sustainability. Founded in 1996, the ITN currently has members in 25 states and Canada. Katherine has a master of arts degree in public policy from the Edmund S. Muskie School of Public Service, and a bachelor of arts degree in English literature from the State University of New York at Buffalo. She is a National Transit Institute Fellow, a member of the TRB's Committee on the Safe Mobility of Older Persons, and she serves as Chair of the Alternative Transportation Subcommittee. She also chaired the Task Force to Study the Safe Mobility of Maine's Aging Population. She lives in Portland with her son Ryan, age 17, a senior at Deering High School. Her daughter Alison, 18, is a freshman at the University of Massachusetts at Amherst.

Santo A. Grande is the Chief Executive Officer and First Vice President of Delmarva Community Services, Inc. in Easton, Maryland. He administers a service delivery system that serves senior citizens and adults with developmental disabilities in Dorchester County, the Eastern Shore of Maryland, and Sussex County, Delaware. Mr. Grande holds a master of science in human resource management from Wilmington College.

Jacky Grimshaw is Vice President for Policy, Transportation and Community Development for the Center of Neighborhood Technology. The Center engages in transportation research and policy development, conducts air quality modeling, GIS mapping, and community economic development. Ms. Grimshaw is a member of various MPO task forces including co-chairing the Community Mobility Task Force that deals with environmental justice issues. Current consulting projects include EJ analysis for the Georgia Regional Transportation Authority's North Sub-Area Study and the Georgia 400 Project, the National Transit Institute's Public Involvement Training Course's EJ update, development of an EJ process for the Northwest Indiana Regional Planning Commission, and FHWA's Task Order on Environmental Justice and the public involvement process for the Plan 8 Project in St. Thomas, Virgin Islands. Ms. Grimshaw is a member of TRB's Committee on Women's Issues in Transportation and the Task Force on Environmental Justice in Transportation. She is also a member of the Executive Committee of Smart Growth America, the leadership on the Smart Growth Network, the Illinois Growth Task Force, and the Congress for the New Urbanism and Renew America–Renew the Earth. She is a longtime social and political activist with a long history of working for social justice in Chicago.

Shawn Hairston is the Seniors Information Specialist for the Community Transportation Association of America (CTAA). In this capacity, Mr. Hairston oversees the Seniors Help Desk and is working on the development of the Seniors Toolkit. He has also worked on CTAA's Annual Resource Guide for the past two years. Mr. Hairston received a bachelor of science in urban studies and planning from Virginia Commonwealth University in 1995.

Joan S. Harris has worked for the National Highway Traffic Safety Administration (NHTSA) for nearly 12 years. She started in the Planning and Policy Office and later became the Special Assistant to the Agency's Administrator. The Agency Administrator changed after the national election, so at that time Ms. Harris transferred to NHTSA's Office of Traffic Safety Programs. There she is responsible for public education and outreach on several emerging highway safety areas, including older driver safety and distracted drivers. She came to NHTSA from California, where she worked in the state health department and a county health department. A true California native, she has a bachelor of arts from UCLA and a master of public administration degree in health policy from USC.

Keith J. Harrison, a Massachusetts native, holds engineering degrees from Worcester Polytechnic Institute and the Polytechnic Institute of New York. He has more than 20 years of highway engineering experience, all with the Federal Highway Administration (FHWA). For the last 11 years, Mr. Harrison has worked in FHWA's San Francisco office, first as Regional Design Engineer, and now as Safety/Geometric Design Engineer. Mr. Harrison specializes in highway geometric design, roadside safety, traffic operations, and similar topics.

Lynn Hedrick, Certified Rehabilitation Driving Specialist, has 26 years of medical rehabilitation experience serving people with disabilities. Also, as a speech-language pathologist, she specializes in remediation of visual perception and cognitive skills, executive functions and communication as it relates to the senior population and driving issues. She has a private practice in Phoenix, Arizona called DriveABLE Solutions providing driving evaluation and training to all types of people with disabilities. She is researching the ability-to-perform inferences as it relates to driving abilities in a partnership with the Communication Disorders Department at Arizona State University. She served as President of Easter Seals for the State of Utah for ten years. In that capacity, she directed the fundraising and development of programs to promote special services to people with disabilities. The Robert Wood Johnson Foundation awarded her a multi-million dollar grant to serve seniors. She has been an active member of the Maricopa Association of Government's Elderly Mobility Working Group. She is also a member of the American Driver Education for the Disabled (ADED).

David F. Hennessy, California Department of Motor Vehicles, received a Ph.D. in behavioral ecology from the University of California at Davis in 1982. He has been employed as a traffic safety researcher since 1991. He is currently conducting a large-scale field office evaluation of a 3-tier driver assessment system. This study is funded by the California Office of Traffic Safety. Dr. Hennessy serves as the Research Branch Representative on the DMV's Medical Advisory Board. He is a member of the University of California Traffic Safety Center Advisory Board and the California Older Adults and Traffic Safety Task Force.

Deborah Howe, FAICP, is Professor of Urban Studies and Planning at Portland State University in Portland, Oregon. Prior to joining the faculty in 1985, she was a land use planner in Dutchess County, New York, where she served as the Director of the Division of Housing and Community Development. For the past 15 years, she has written extensively on the subject of community planning for aging. She has been invited to speak on this subject at numerous conferences throughout the U.S. Her most recent publication, "Aging and Smart Growth: Building Aging-Sensitive Communities," is sponsored by the Funders' Network for Smart Growth and Livable Communities and Grantmakers in Aging. Deborah's other scholarly and professional interests include the Oregon growth management system, land use planning in the Native American context, and development of housing alternatives. She is a member of the Oregon College of Oriental Medicine Board of Trustees and is a regional representative on the Association of Collegiate Schools of Planning Executive Committee. Deborah is the lead co-editor of the Journal of the American Planning Association. She was honored with membership in the American Institute of Certified Planners College of Fellows, Class of 2000, in recognition of her contributions to planning education.

Linda Hunt Ph.D., OTR/L, is Assistant Professor and Director of the Maryville University Occupational Therapy Program. She holds a bachelor of science in English and education from the University of Missouri–St. Louis, a bachelor of science in occupational therapy from the University of Kansas, and a master of science in occupational therapy from Washington University School of Medicine in St. Louis, Missouri. She completed her doctorate degree in physiological optics from the School of Optometry at the University of Missouri-St. Louis. Ms.

Hunt has presented papers at professional meetings nationally and internationally and has published numerous book chapters and articles in professional journals. She serves on the editorial board of the American Journal of Occupational Therapy and serves as a reviewer for various organizations, including the Transportation Research Board. She currently serves on the Medical Review Board of the St. Louis Parkinson's Disease Association. Ms. Hunt has had grants through the State of Missouri, the National Institute on Aging, and General Motors for studying the impact of dementia on driving performance. Her other research interests include the effects of vision on cognitive performance.

Patricia Hunt-Volmer, BSN, MN, holds a bachelor of science in nursing from Kansas University, and a master's in nursing administration from Emory University in Atlanta, Georgia. Her early career was in nursing education administration and teaching. For ten years her specialty was in national and international oversight of quality assurance and quality improvement for medical clinics and occupational health services for Monsanto. For three years she provided QA and QI services for employee health services and clinics for United Parcel Service in multiple states. She has been with Medical Transportation Management, Inc. (MTM) for five years, and served until recently as their Corporate Director of Quality Improvement and Risk Management with oversight of all transportation provider quality issues. She has been instrumental in the development of many MTM programs, and recently assumed the position as Director of Public Relations and Corporate Communications.

Jo Ann Hutchinson is the Executive Director to the State's Commission for the Transportation Disadvantaged created in 1989 pursuant to Chapter 427, Florida Statutes. The Commission is a 27-member policy making body that oversees the coordination of transportation services to Florida's elderly, disabled, low income and children-at-risk; and that develops standards and other policy areas that impact the statewide delivery of services. The Commission also administers the Transportation Disadvantaged Trust Fund that provides more than \$25 million annually to local communities to assist citizens with their transportation needs. From 1985 to 1989, Ms. Hutchinson served as Director to the former Coordinating Council on the Transportation Disadvantaged and from 1981 to 1985 she served as the first Statewide Program Manager with the Department of Transportation, overseeing the legislation in its earlier implementation period. She has worked in the transportation field for nearly 35 years.

Helen K. Kerschner, Ph.D., is President and CEO of the Beverly Foundation. The Beverly Foundation is a private operating foundation located in Pasadena, California. The Foundation promotes quality of life of America's older population through research, demonstration and education in senior transportation and long-term care. Dr. Kerschner has more than 30 years experience in health, aging and international development. She began her career as a Peace Corps Volunteer in Nigeria, West Africa. She spent several years at the University of Southern California teaching and managing university-based health and education projects. After working for the Westinghouse Electric Corporation as a manager of international programs, she became President and Executive Director of the American Association for International Aging (AAIA) in 1983. In 1992 she assumed the directorship of the University of New Mexico Center on Aging. Dr. Kerschner was born in Oklahoma City, Oklahoma. Her educational experience includes an undergraduate degree in political science from North Texas State University, a master's degree

in health administration and certificate in health planning from the University of Southern California, and a doctorate in public administration from the University of Southern California.

Mary Kihl is the Coordinator of the university-wide graduate program in Transportation Systems, Director of the Herberger Center of the College of Architecture and Environmental Design, and Interim Director of the School of Planning and Landscape Architecture at Arizona State University. She holds advanced degrees from the University of Michigan, Pennsylvania State University and the University of Pittsburgh. She joined the faculty of Arizona State in January 1996, having previously served as Associate Director of the Institute for Research and Outreach at Iowa State University from 1980-1995. Ms. Kihl's primary research emphasis is land use and public transportation. She has participated in funded research on a wide array of transit-related issues including rural transportation, transportation for seniors and populations with special needs, and intelligent systems applications to public transportation. She has also completed a study on the recreational needs of the over-80 population of Sun City, Arizona. She has been published in the *Transportation Research Record* and *Transportation Quarterly*. Among her book-length publications are *Transportation Service to Small Communities*, co-edited, (Iowa State University Press, 1990) and *Forging an Appropriate Transportation System for Arizona (Arizona Town Hall, 1996)*. Ms. Kihl recently co-chaired the subcommittee on transportation and land use for the Maricopa Association of Governments task force on senior mobility.

David Koffman is a Principal Associate with Nelson\Nygaard Consulting Associates in San Francisco. He joined Nelson\Nygaard as part of the transfer of the Crain & Associates planning practice to Nelson\Nygaard in May 2001. David has 25 years of professional transportation planning experience. He has been active in planning for the transportation needs of seniors and people with disabilities since 1977. In the late 1970s and early 1980s, he conducted federally-sponsored research evaluating taxi subsidies for seniors and measuring the size of population that has difficulty using conventional transit. During the 1990s he worked extensively on implementing paratransit for people with disabilities as required by the Americans with Disabilities Act. More recently, with increasing attention on the needs of older adults, David has again been working in this area. His recent work includes: planning and needs studies for several local transit agencies in the San Francisco Bay Area; research sponsored by the Mineta Institute at San Jose State University on the best ways to make existing transit services more attractive to seniors; professional staffing for a local transportation advocacy organization of seniors and people with disabilities; and creating and delivering a course for the National Transit Institute called "Reinventing Transit" that features flexible services of interest to older adults. Currently David is leading an *Older Americans Transportation Planning Study* to develop a regional approach to meeting the transportation needs of seniors in the San Francisco Bay Area. He holds an undergraduate degree in mathematics from M.I.T. and a master's in city planning from Harvard.

Jim Langford's training is in psychology and education. Following a mercifully brief stint in counseling he soon drifted into research – initially as a statistician and program evaluator with the Tasmanian Department of education, ultimately ending up in road safety research. For the past couple of years, Jim has been working part-time with the Tasmanian Department of

Transport in Hobart, and part-time with the Monash University Accident Research in Melbourne. His main areas of activity in both locations include novice driver training and licensing, drunk driving and of course, a range of issues associated with older drivers.

Leonard W. Levine, President of Leonard W. Levine & Associates, is the former Commissioner (Secretary) of the Minnesota Department of Transportation and Commissioner (Secretary) of the Minnesota Department of Human Services. He has been elected seven times to the St. Paul City Council, served ten years as the member of the Metropolitan Airports Commission and served nine years as a member of the Metropolitan Transit Commission. He was considered for the Secretary of Transportation position in the first Clinton Administration. Mr. Levine has also been active in a variety of civic and community activities in Minnesota and nationally.

Ellie Marek is Principal of Laughline Consultants. She received a master's degree in guidance and counseling from Arizona State University. She has spent the last 20 years teaching counseling and personal development classes in Maricopa Community Colleges, as well as developing and presenting programs for learning the humor skills we need to cope with our world and keep our sanity. She is a board member of the Association for Applied and Therapeutic Humor and is also the editor and publisher of their national newsletter, *The Humor Connection*. Ellie is the author of the book *EATING ROSES – Bites of Living Humor*. She has published many articles on humor including "The Habit of Laughter" and "How to Run Away From Home." Ellie's chief resources are her belief in the power of lifelong new beginnings and in the healing power of humor. In the past few years she has spoken to thousands in the private and public sector nationally and overseas, teaching people to put play to work in every area of their lives.

Richard A. Marottoli, Ph.D., is the Director of Geriatrics and Extended Care at the VA Connecticut Healthcare System and an Associate Professor of Medicine at Yale University School of Medicine. He is also the current chairman of the Transportation Research Board's Committee on the Safe Mobility of Older Persons.

Barbara McCann oversees research, writing, and production of reports that examine the relationship between everyday quality of life and our transportation system, including *Driven to Spend: The Impact of Sprawl on Household Transportation Expenses*; *Mean Streets 2000: Pedestrian Safety, Health, and Federal Transportation Spending*; *Changing Direction: Federal Transportation Spending in the 1990s* and others. Ms. McCann worked for 13 years as a writer and producer at Cable News Network and CNN Interactive, including senior positions on award-winning news programs and news magazines. Ms. McCann also co-produced documentaries on world affairs, the environment, and transportation issues for the network. Ms. McCann currently serves on the board of the Washington Area Bicyclist Association, and is former President of the Board of the Atlanta Bicycle Campaign.

Dr. CGB (Kit) Mitchell retired from the British Transport and Road Research Laboratory (TRRL) in 1994 after 24 years of service. From the early 1980s he ran TRRL's research on transport for persons with disabilities and contributed to British and European standards and guidelines on accessible transport. He was chairman of the Scientific Committee for the 1995 Conference on Mobility and Transport for Elderly and Disabled People (TRANSED), held in Reading, England, and co-chair of the Scientific Committee for the 2001 conference held in Warsaw. From June 1996 to March 1997 he was a Visiting Expert at the Transportation Development Centre, Transport Canada, advising on the implications of ITS for elderly and disabled people. He is a member of the U.S. Transportation Research Board Committee on Accessible Transportation and Mobility, the TRB Task Force on Transportation in an Ageing Society. He was an observer on the OECD expert group on transport in an ageing society that produced the report "Aging and Transport: Mobility Needs and Safety Issues." Since 1998 he has lectured on accessible transport in the U.S.A., Germany, Croatia, Malaysia, Thailand, and Japan. He received the 2001 William G. Bell Award from the Transportation Research Board for contributions to accessible transport.

Charles A. Nelson is Co-owner and Executive Vice President of Creative Action, Inc. in Akron, Ohio. His expertise is in the areas of strategic planning, service and product development, market research, and organizational development, particularly with public transportation and community services. Prior to founding Creative Action, Mr. Nelson was Director of Planning for the Metro Regional Transit Authority and Senior Planner for the Akron Metropolitan Area Transportation Study (MPO) in Akron, Ohio. His research and project activities have focused in the areas of improving the mobility of older persons and persons with disabilities, and helping local governments and transportation providers find ways to improve the delivery of transportation services to effectively meet customer needs. Mr. Nelson participated on the research team that is completing "TCRP Project B-19, Improving Public Transportation Options for Older Persons." For Project ACTION, he developed a handbook of model procedures for coordinating transportation services. Mr. Nelson has more than 32 years of experience in the transportation field. He holds memberships in the American Public Transportation Association, Community Transportation Association of America, and the Greater Akron Chamber of Commerce.

Lisa R. Peters, MPH, has been working in the field of aging for more than 10 years, primarily in the areas of long term care, health services research, and community-based programs – originally in Milwaukee, and in Chicago for the past seven years. Lisa's work has addressed a variety of clinical and policy-related issues within the aging population, including dementia and chronic illnesses, as well as social isolation in community-dwelling older adults. She recently received her master's in public health from Northwestern University and joined Easter Seals at its national headquarters to head up the Transportation Solutions for Caregivers project.

Jeffrey A. Pike is currently Senior Technical Specialist, Product Development, Ford Motor Company and Adjunct Professor, Biomedical Engineering, Wayne State University. He has 25 years of professional experience in biomechanics, human tolerance, occupant protection, testing, regulatory requirements and the special needs of the older driver. His activities in the field of

older driver protection include: consultant to Harvard Medical School Department of Geriatrics Older Driver Program; Chair of the older driver committees for the National Academy of Science/Transportation Research Board and the SAE (Society of Automotive Engineers); Chair of sessions at the 1994 and the 1999 White House Conferences; and presentations to numerous professional groups. His relevant technical publications include technical papers and a book chapter for the National Academy of Sciences/TRB Special Report 218, "Protecting the Older Driver." His educational background includes studies at the Polytechnic Institute of New York, New York University and the University of Michigan.

Patricia Baron Pollak, Ph.D., has been a member of the Cornell University faculty since 1981. Her career has focused on how public policies and community planning decisions affect the housing and well-being of residents, particularly of older persons. Her research has been awarded funding from a variety of sources including the New York State Office for the Aging, the U.S. Department of Health and Human Services (Administration on Aging), the U.S. Department of Housing and Urban Development and AARP. She has been Chair of the American Planning Association's Division of Housing and Community Development and is currently President of the Faculty Women's Interest Group of the Association of Collegiate Schools of Planning. Dr. Pollak is widely known for her research and publications on community-based housing for the elderly and "Liveable" communities. In addition to her faculty responsibilities, Dr. Pollak is Principal Investigator and Director of the Cornell-Ithaca Partnership, a U.S. HUD funded Community Outreach Partnership Center.

Donna Powers has a bachelor's degree in communications from Arizona State University and served as Ms. Wheelchair Arizona during 1996-97. She has an extensive public speaking background that includes presentation on the prevention of spinal cord injury; the social, health, and illness concerns of being physically disabled; and transportation challenges for people with disabilities and older adults. Ms. Powers is currently employed at the Community Forum in Phoenix where she uses her communication skills to improve mobility for people with disabilities and older adults. Her activities include Disability Awareness Training for bus operators, Peer Travel Training for bus passengers and a newsletter called "Transit Alerts," which informs bus passengers with disabilities about schedule and route changes and other accessible transportation issues.

Robert Raleigh, M.D., is the Director of the Medical Advisory Board & Driver Safety Research of the Maryland Motor Vehicle Administration, and Chairman of the Maryland Research Consortium on the Older Driver. From 1986 to 1996, Dr. Raleigh was the Clinical Professor of Environmental Medicine & Medicine at the University of Rochester School of Medicine & Dentistry. In 1986, he retired from Eastman Kodak Company, where he served as the Corporate Director of Health, Safety & Environment. Dr. Raleigh is a Diplomat of the American Board of Preventive Medicine.

Sandra Rosenbloom, Ph.D., is Professor of Planning in the University of Arizona's Interdisciplinary School of Planning and Director of the Roy P. Drachman Institute for Land and Regional Development Studies. She has a bachelor of arts and sciences in political science, a master of public administration and policy, and a Ph.D. in political science from the University

of California at Los Angeles. Before being recruited to the University of Arizona in 1990, she held an Endowed Chair as David Bruton Centennial Professor of Planning at the University of Texas at Austin. Dr. Rosenbloom's current research areas are the planning and policy implications of global aging and the changing structure of families. She teaches courses in financing public services, transportation policy, and professional communications. Dr. Rosenbloom currently heads the Roy P. Drachman Institute, an interdisciplinary research and public service unit of the University of Arizona dedicated to the environmentally sensitive and resource-conscious development of land and communities. The Institute has substantial outreach and community service responsibilities as well as an actively funded research program.

Norbert G. Senftleben has been a registered architect for more than 30 years. Born and raised in Buenos Aires, Argentina, he has been involved in designing homes and hospitals in his homeland and in the Andes altitude, as well as an International Airport in Paraguay. He was in private practice in Atlanta, Georgia for ten years and in Phoenix for six years designing large assembly and educational facilities, including apartment complexes for the elderly in Prescott, Arizona. Since 2001 Mr. Senftleben has worked in the City of Phoenix Aviation Department with the Planning and Development Division. Mr. Senftleben is currently devising an enhanced directory system for the airport terminals to facilitate "wayfinding" as well as pursuing a number of design initiatives to make Sky Harbor International Airport more senior friendly.

Rosemary Siipola has been a Transportation Planner/Manager for Cowlitz-Wahkiakum Council of Governments, a Southwest Washington Regional Transportation Planning Organization. Prior to that she was Senior Transportation Planner for the City of Portland in Oregon. She has a bachelor of arts degree in political science from North Carolina State and a master's in planning from the University of Virginia in Charlottesville, Virginia.

Richard Smith is Executive Director of Partnership to Preserve Independent Living for Seniors and Persons with Disabilities in Riverside County, California. The Partnership provides education and services intended to empower individuals to meet the challenges of aging and disability and to continue to live independently in their own homes and communities. Services include assisted transportation, health education videos, a self-help periodical and a regional Internet portal. Mr. Smith has a master of business administration and worked in the banking, broadcast and advertising industries before coming to the Partnership in 1995.

Connie Soper is a Senior Planner at the Metropolitan Transportation Commission (MTC) in Oakland, California. MTC serves as the MPO for the nine-county San Francisco Bay Area. Ms. Soper is lead staff for MTC's programs and activities related to paratransit and other services for older adults and persons with disabilities, and also oversees efforts to support welfare-to-work planning and programs. In this capacity, she works closely with the staff from region's 21 public transit agencies, community-based organizations and other key stakeholders.

Loren Staplin, Ph.D., is the Principal Partner at TransAnalytics, LLC, and a Senior Research Scientist with the Texas Transportation Institute. He has served as Principal Investigator on the National Highway Traffic Safety Administration (NHTSA) project, "Model

Driver Screening and Evaluation Program,” plus a dozen of other projects spanning a twenty-two career leading human factors and safety studies for the United States Department of Transportation and State Department of Transportation sponsors. Recent accomplishments include two chapters in the NAS/TRB publication, “Transportation for an Aging Society: A Decade of Experience,” and lead authorship of the Federal Highway Administration’s *Highway Design Handbook for Older Drivers and Pedestrians*, as well as the Safe Mobility for Older People Notebook accessible on the NHTSA website.

Harvey L. Sterns, Ph.D., is Director of the Institute for Life-Span Development and Gerontology and Professor of Psychology at the University of Akron and Research Professor of Gerontology, Northeastern Ohio Universities College of Medicine. He is a Principal with Creative Action, Inc. Dr. Sterns has been involved with driving and aging research since the late 1970s. He has been a co-author of research and chapters on transportation issues for the *Handbook of Psychology of Aging*; *The Encyclopedia of Aging*, 3rd Edition (2001); *Mobility and Transportation in the Elderly* (2000); and *Final Report: Family and Friends Concerned About and Older Driver* (2001) for the National Highway Traffic Safety Administration. He has been involved in demonstration projects funded by the Administration on Aging and Project Action. He holds many leadership positions at the city, county, state, and national levels promoting the well-being of older adults. He is President-Elect of Division 20, Adult Development and Aging of the American Psychological Association.

Ronni Sterns, Ph.D., is a founding Principal and President of Creative Action, Inc. The firm specializes in planning, development, research, and marketing. Prior to establishing Creative Action, Dr. Sterns served as Director of Marketing for Metro Regional Transit Authority in Summit County, Ohio. Since 1988, she has developed applications for problem solving in transportation and mobility. Activities emphasize coordination of community transportation alternatives, development of private and public transportation alternatives, mobility training for older adults and identification of issues and solutions for family, friends, health care and service providers to promote safe mobility for older adults. Dr. Sterns was Co-Principal Investigator on an Administration on Aging demonstration project to integrate community transportation for older adults and the general population, and the National Highway Traffic Safety Administration study, “Family and Friends Concerned About an Older Driver.” Currently, she is Principal Investigator on a National Institute on Aging project to develop user-friendly public timetables and maps. Dr. Sterns has consulted on transportation issues and the elderly for a number of organizations, including Volvo Cars of North America, USAA Insurance Companies, AARP, and Project ACTION.

Audrey Straight is a Senior Policy Advisor for the Independent Living/Long Term Care Team of the Public Policy Institute of the AARP. She conducts and follows transportation policy research as it affects the independent mobility of community dwelling older persons. Areas of focus include fair and effective regulation of drivers, coordination of publicly-funded transportation resources, land-use planning as it impacts mobility, and the potential benefits and costs of modern transportation technologies for older persons. Ms. Straight is a lawyer who has previously worked for AARP’s Legal Counsel for the Elderly, the Maryland Legal Aid Bureau, and the American Bar Association’s Commission on Legal Problems of the Elderly.

Bruce Taft is the current Arizona State Coordinator of '55 Alive – Mature Drivers Program, and the Legislative Officer for the National Association of Retired Federal Employees. He received his BS, MEd, and MSSM from St. Lawrence and the University of Southern California. Mr. Taft is married with two adult children, who are both married with children of their own. He served from 1951-1959 in the U.S. Naval Reserves.

Mary Ann Thompson, RN, DrPH, is Associate Professor at the Lansing School of Nursing and Health Sciences, Bellarmine University in Louisville, Kentucky. Prior to this position, she was an Associate Professor of Nursing and Gerontology at Saint Joseph College in West Hartford, Connecticut. Ms. Thompson received a master's degree in nursing from Yale University and a doctorate in public health from Columbia University in 1996.

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Councilmember Claudia Walters is serving her second non-consecutive term on the Mesa City Council as the first district councilmember in District 1. To fill a vacancy, she previously held office from November 1997 to June 1998. She is Chair of the Council's General Development Committee and a member of the Council's Transportation and Utility committees. She serves as the Council Representative for the Maricopa Association of Government's Human Services Coordinating Committee and Elderly Mobility Task Force, the Benefits Advisory Committee. She is also on the Board of Directors of the Foundation for the Educational

Excellence and Mesa United Way. Councilmember Walters has served on many City committees, including the Self Insurance Board of Trustees, Library Board, Gang Prevention Steering Committee, Planning and Zoning Board, and is a past chairman of the Downtown Development Committee. She has a bachelor of science degree in child development and family relationships from Brigham Young University.

Bill Wilkinson, AICP, is the Executive Director of the National Center for Bicycling & Walking (NCBW). The NCBW is supported, in part, by a grant from the Robert Wood Johnson Foundation to provide assistance to communities to create more active community environments. Bill has been involved in planning and advocacy work related to bicycles, pedestrians, and transportation for more than 30 years. In the 1970s, he worked for the National Park Service and the Office of the Secretary, United States Department of Transportation on bike/pedestrian policies and programs. He's been with the NCBW (formerly the Bicycle Federation of America) since 1983. Bill is a member of the Steering Committee of the Surface Transportation Policy Project (he chairs the Health and Safety Issues Team), and worked on the development of the planning and bike/pedestrian sections of the last two major Federal transportation acts, ISTEA and TEA-21. Bill is a certified planner, a member of the Institute of Transportation Engineers, a cyclist and hiker, and very proud grandfather.

Harry Wolfe began his work in the aviation field in 1972 as a graduate student at the University of Texas where he conducted research on the impacts of the then-proposed Dallas/Fort Worth Regional Airport. From 1975 to 1978, he was an airport planner for the Illinois Department of Transportation, responsible for assembling a five-year construction program and a long-range state airport system plan. From 1978 to 1980, he was Airport Planning Manager for the Arizona Department of Transportation and managed the development of the Arizona State Airport System plan as well as several special studies. Between 1980 and 1983, he was an aviation consultant. Mr. Wolfe has been with the Maricopa Association of Governments as Manager of Aviation Programs for almost 20 years. He has managed three regional airport system plan updates, land use studies around Luke and Williams, a heliport study, airspace studies and has conducted extensive research on a variety of aviation topics. He has taught airport planning and aviation regulations for the past 20 years for Southern Illinois University's Off-Campus Aviation Management Program. He has also taught airport management classes for Arizona State University and Embry-Riddle Aeronautical University.

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Glossary of Acronyms

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AAMVA	American Association of Motor Vehicle Administrators
AASHTO	American Association of State Highway and Transportation Officials
ADA	Americans with Disabilities Act
ADED	Association for Driver Rehabilitation
ADOT	Arizona Department of Transportation
AMPO	Association of Metropolitan Planning Organizations
APA	American Planning Association
APTA	American Public Transportation Association
COG	Council of Governments
CTAA	Community Transportation Association of America
CTAP	Community Transportation Assistance Program
DHHS	Department of Health and Human Services
DMV	Department of Motor Vehicles
DOT	Department of Transportation
EJ	Environmental Justice
EPA	Environmental Protection Agency
FAA	Federal Aviation Administration
FHWA	Federal Highway Administration
FTA	Federal Transit Administration
HCM	Highway Capacity Manual
ISTEA	Intermodal Surface Transportation Efficiency Act
ITE	Institute of Traffic Engineers
ITS	Intelligent Transportation Systems
MADD	Mothers Against Drunk Driving
MAG	Maricopa Association of Governments
MOU	Memo of Understanding
MPO	Metropolitan Planning Organization
MUTCD	Manual on Uniform Traffic Control Devices
NCOA	National Council on Aging
NCRTPB	National Capital Regional Transportation Planning Board
NGA	National Governor's Association
NHTSA	National Highway Traffic Safety Administration
OECD	Organization for Economic Co-operation and Development
RTAP	Rural Transit Assistance Program
STIP	State Transportation Improvement Program
STP	Surface Transportation Program
STPP	Surface Transportation Policy Project
TEA-21	Transportation Equity Act for 21 st Century
TIA	Traffic Improvement Association
TIP	Transportation Improvement Program
TRB	Transportation Research Board
USDOT	United State Department of Transportation
VMT	Vehicles Miles Traveled

Web Links

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