Human Services
Coordinated
Transportation Plan

FY 2011 Update & Revision

Southeast Alabama Regional Planning and Development Commission

REGION 7

Serving the counties of:
Barbour, Coffee, Covington, Dale, Geneva, Henry & Houston
September 15, 2011

To: Whom It May Concern

From: Executive Director, SEARP&DC

Re: Transmittal of the Revised Human Services Coordinated Transportation Plan

The attached Revised Human Services Coordinated Transportation Plan is transmitted to the Alabama Association of Regional Councils (AARC) under the terms of the Memorandum of Understanding between this agency and AARC and in compliance with the extant contract between AARC and ALDOT.

This is the second update of the plan that was originally developed in 2006. It is a dynamic document. This plan should form the basis for cooperative efforts within the region. Nothing in this plan is directive or prescriptive. Rather, it attempts to identify gaps and shortfalls in service within the region while concurrently offering “paths” for possible resolution.

This plan is subject to ongoing revision and modification. Interested agencies and individuals are encouraged to provide comments, suggestions or recommendations to strengthen and enhance this plan.

Questions or comments regarding this study should be directed to Mr. John A. Sorrell (jsorrell@searpdc.org), at (334) 794-4093 ext. 1431 or to Mr. Scott Farmer (sfarmer@searpdc.org), at (334) 794-4093 ext 1412.

Thomas B. Solomon
Executive Director
Prepared by the
Southeast Alabama Regional Planning and Development Commission

Under contract with the
Alabama Association of Regional Councils
and the
Alabama Department of Transportation

September, 2011
Planning Area: Barbour, Coffee, Covington, Dale, Geneva, Henry & Houston Counties, Alabama and the Dothan, Alabama metropolitan area

Lead Agency: Southeast Alabama Regional Planning & Development Commission

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Abstract:

This document is an update to the Human Services Coordinated Transportation Plan for the Southeast Alabama Region (HSCTP) that the Southeast Alabama Regional Planning and Development Commission (SEARPDC) originally published in January, 2007 and subsequently updated in September 2008. This HSCTP may be used as a stand alone document or it may be used in conjunction with the 2007 Plan and its 2008 update.

The Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA–LU), (Pub. L. No. 109–59, August 10, 2005) requires that projects selected for funding under the Elderly Individuals and Individuals with Disabilities program (Section 5310); the Job Access and Reverse Commute program (Section 5316); and the New Freedom program (Section 5317) be “derived from a locally developed, coordinated public transit-human services
transportation plan” and that the plan be “developed through a process that includes representatives of public, private, and nonprofit transportation and human services providers and participation by the public.” This plan was developed, in part, to meet this requirement.

Although SAFETEA-LU does not define “Coordinated Plan”, based on comments received and experience, the Federal Transit Administration (FTA) defines the “Coordinated Plan” in the Federal Register/ Vol. 71, No. 172/ Wednesday, September 6, 2006 as a plan that identifies the transportation needs of individuals with disabilities, older adults, and people with low incomes, provides strategies for meeting these local needs, and prioritizes transportation services for funding and implementation. Further more, FTA proposes that the key elements of a Coordinated Plan include the following:

- An assessment of available services that identifies current providers (public, private and nonprofit);
- An assessment of transportation needs for individuals with disabilities, older adults, and people with low incomes. This assessment may be based on the experiences and perceptions of the planning partners or on more sophisticated data collection efforts, and gaps in service;
- Strategies and/or activities to address the identified gaps and achieve efficiencies in service delivery; and
- Relative priorities for implementation based on resources, time, and feasibility for implementing specific strategies/activities identified.

The purpose of the Human Services Coordinated Transportation Plan (HSCTP) is to provide a mechanism and a starting point by which transportation shortfalls may be identified and highlighted. Subsequently, transit services may potentially be improved or enhanced for persons with disabilities, older adults, and individuals with lower incomes by ensuring that communities coordinate transportation resources provided through multiple federal programs. This plan, however, is not exclusionary. It should also lead to discussions and initiatives that enhance transportation for the general public as well.

This update is a continuation of the HSCTP process in coordination with the Alabama Department of Transportation (ALDOT) and the Alabama Department of Senior Services (ADSS). ALDOT has retained oversight for 5310 funds in the state of Alabama, while ADSS oversees Section 5316 and Section 5317 funds. The regional councils of Alabama, through the Alabama Association of Regional Councils (AARC), have been contracted to ensure that local grant applicants for Section 5310, Section 5316, and Section 5317 funds are included in the HSCTP.

As we expanded and modified this coordinated plan, the specific identification of all stakeholders became problematic. Within the initial plan we identified numerous stakeholders within the region. This initial identification relied on the active participation of these stakeholders or of their umbrella agencies. The very nature, however, of some of our providers and consumers of service suggests that they will “come and go” with some frequency. Consequently, this plan implicitly includes all providers of transportation services within the region who actively identify themselves, both current and future, whether they have actively participated in this process or not. It applies the same standard to all consumers of transportation services. We will make no attempt to limit or curtail services or access to resources by any
transportation provider or consumer of transportation services merely because they are not specifically included by name in this plan. Neither will be deny anyone the opportunity to coordinate with the various providers of service within the region based merely on the fact that they are not explicitly mentioned in this plan. However, any service that is proposed or any grant that is requested must address one of the broad areas of need as addressed in chapters 4 & 5 of this plan if the grantee is to be assumed to be part of this plan.
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**Southeast Alabama Regional Planning & Development Commission**

**Human Services Coordinated Transportation Plan**

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Chapter 1
Introduction

Utilizing the basic methodologies defined in United We Ride’s *Framework for Action* the Southeast Alabama Regional Planning & Development Commission developed and subsequently updated its Human Services Coordinated Transportation Plan for that southeast portion of the state served by this commission. This area encompasses Barbour, Coffee, Covington, Dale, Geneva, Henry and Houston counties as well as the City of Dothan metropolitan area. This initial effort was initiated in the Spring of 2006 and completed in January 2007 with the first update (update 1) completed in September 2008. This overall effort was accomplished in conjunction with the other eleven regional planning commissions within the state and under the aegis of a contract between the Alabama Association of Regional Councils (AARC) and the Alabama Department of Transportation, Bureau of Multimodal Transportation. This document amends and expands this Commission’s original 2007 plan and its 2008 revision.

The original study addressed the following contractual elements:

1. Stakeholders meetings were held to collect and assess public input into this plan.

2. Mapping data was developed to identify the following contractual deliverables:
   a. Common Origins
   b. Common Destinations
   c. Existing Transportation Services (location & coverage)

3. Vehicle and asset inventories were conducted and are located at Tab D (Inventory) of the original and revised plan. This is a subset of the deliverable “Existing Transportation Services”. Updated data may be found in chapters 2 and 3 of this plan.

4. The deliverable “Identify Unmet Transportation Needs” was predominantly identified in Tab B (Unmet Needs) of the original plan and its initial update. This represents the UWR framework for action methodology of collecting and assessing data and was derived from the initial stakeholders meetings and from subsequent public involvement venues and interactions. This data was coalesced and expanded in Tab C.9 and C.9a (action plan). Additional unmet needs were discussed in the appropriate portions of Tab B and further expanded in Tab C of the original plan and its initial update. These data are identified and discussed in Chapters 3 & 4 of this plan.
5. The deliverable Develop Transportation Alternatives was the basis for this report and can found throughout the original plan and its initial update, including in the Tabs and amendments discussed above. These alternatives are further discussed and developed in Chapters 5 & 6 of this plan.

This study, and the discussions that it engendered, yielded several basic themes that carry throughout the region and are neither specific nor unique to any particular county. We find that these themes and issues remain essentially unchanged from the findings in the original plan and its initial update. We recognize that, while a lack of stable funding is significant, it is not the only issue. We have attempted to address these other issues but have found that for them to be successful the discussion almost always reverts to one of funding and resources. We continue to look for issues and solutions that are not dependent upon funding and, where possible, will attempt to identify and implement these. The previously developed findings were carried forward into this revision of the plan and were used as the foundation on which to base this undertaking. In no particular order or priority they are:

1. Throughout the region and across all agencies, there are no quantitative tools to determine need for transportation services. Qualitatively, however, every agency (to include transit providers) recognizes that the need is greater than the resources available to serve that need.

2. Funding (the lack thereof) is the single greatest barrier to the provision of transportation services of any type within the region. The total lack of state funding combined with the difficulty of raising sufficient local match funds limits virtually any initiative to either expand or offer service. Federal funding tends to be available; local agencies just cannot access it because of a lack of local match. This issue was succinctly stated by one of the mayors in the region when (commenting on the funding issue) he stated, “there ain’t none!” Nothing more needs to be said about funding.

3. This issue of funding has become even more critical over the past year because of the recessionary trends displayed by the economy. It is very difficult to generate new sources of funding when local and state revenues are depressed, tax revenues are down and the state budget is in proration. Additionally, the availability of federal funding is not guaranteed. The pending reauthorization of the transportation bill will have a significant impact on available federal funds to apply towards transit initiatives. Given the current budget debate this may portend an uncertain future. Rather than being in a position to optimize existing services and to develop venues for coordination, transit providers may well find themselves in a battle for fiscal survival with funding uncertainties leading to decreases of service rather than enhancement of service.
4. Throughout the region there is a high expectation of service but a corresponding unwillingness to pay for that service. This social phenomenon is beyond the scope of this undertaking but certainly contributes to the challenges that all face when attempting to provide transportation services. As a corollary to this phenomenon, as economic circumstances worsen, a greater demand is exerted on transit providers to provide for their communities. Consumers have fewer funds to spend on transportation, transportation providers have fewer funds with which to offer service, and demand and expectations increase for transit services. This is not a formula for success.

5. The lack of operating funds for Section 5310 providers, especially Senior Centers, effectively removes them from any serious and detailed discussion about coordinated transportation. They can barely operate at minimal levels now and any additional operational requirements on their vehicles would be unachievable without the provision of some form of operating subsidy or revenue stream.

6. As increased demands are placed on social service agencies, they have a greater need for transportation services. These demands have increased of late due to high unemployment rates and the increased need within the community for job placement services for our more vulnerable citizens. These agencies funding for these services does not necessarily keep pace with the demand. This reality further complicates the issues of coordinating and providing transportation.

7. In conjunction with 5 & 6. above, our population of elderly and home/community based disabled continues to increase. This places additional demands on existing transportation services as well as a greater demand for services where none currently exist. Transportation providers are challenged, sometimes to the point of being unable, to provide this additional service when constrained by existing, and sometimes diminishing, resources.

8. Increased operating costs, driven primarily by rising fuel costs, increased personnel costs (both salaries and fringe benefits) and increased insurance premiums have made the provision of public transportation and social service transportation much more difficult. These economic issues have created an increased demand for public transportation, while at the same time creating financial challenges for operators that have caused them, in some instances, to limit or curtail service. Whether service has been curtailed or not, virtually every transit provider has been compelled to develop contingency plans for the reduction of service based on diminished resources.
9. The further an individual lives from a population center the more difficult it is for that individual to access any form of transportation service. This problem is exacerbated if that individual is elderly, disabled or poor. Limited resources make the provision of service for these individuals difficult and expensive. This need for transit services is often inversely proportional both to the distance an individual lives from the community and to that individual’s physical and financial wellbeing. Many of our isolated citizens have the greatest need but are the most difficult to serve.

Due to the lack of resources available throughout the region, we found varying degrees of enthusiasm for the coordination process. For many, it was difficult to rationalize a coordination process when no resources or assets existed on the ground to be coordinated. Virtually everyone was agreeable to the idea of coordination assuming the presence of resources, but otherwise viewed this as an intellectual exercise with limited payoff or utility. This phenomenon is highlighted in the coordination process for the provision of JARC services within the counties surrounding Houston County. These counties were willing and eager for this service to be expanded into their counties as long as the local financial investment was minimal.

As we further develop and expand this plan we have determined that several definitional issues need to be addressed in order to insure that we are in compliance with and conform to newly promulgated rules effecting transit operations. These definitions may require subsequent analysis once the new transportation reauthorization bill is enacted. Additionally, it is important that we not unduly limit ourselves by applying a standard that exceeds the definitions found in the various federal guidelines. Chief among these critical terms and definitions are demand response, “program purposes” and targeted populations. These terms are defined below as understood and implemented within this Region:

1. **Demand Response**: This term is specifically defined by the FTA New Freedom Circular and by the Job Access and Reverse Commute Circular as “any non-fixed route system of transporting individuals that requires advanced scheduling by a customer, including services provided by public entities, non-profits, and private providers.” Based on our analysis of the services provided throughout the Region, we conclude that all forms of service offered by all three of our public transportation providers within the region as well as those services offered by our JARC partners conform to this definition to include those services provided to social service agencies.

2. **“Program Purposes”**: This term is defined in 49CFR Part 604 as “transportation that serves the needs of either human service agencies or targeted populations (elderly, individuals with disabilities, and or low income individuals); this does not include exclusive services for other groups formed for purposes unrelated to the special needs of the targeted populations identified herein. We have
determined that all of the social service contracts, serviced by transit providers within the region, fall within the parameters of this definition of “Program Purposes”.

3. Targeted Populations: The following categories of individual are referenced in 49CFR Part 604 as target populations; individuals with mobility limitations related to advanced age, individuals with disabilities or individuals with low income. This Region has consistently held that transit dependent individuals seeking access to health care, employment or quality of life venues, veterans requiring access to VA facilities and services, and “at risk” youth are also part of our target population. Many of these subsets of individuals either have qualifying medical issues or are economically disadvantaged. Our review of this broad definition of target populations has led us to conclude that our expanded definition of target population substantially meets at least one of the tests advanced by 49CFR Part 604.

As we expanded and modified this coordinated plan, the specific identification of all stakeholders became problematic. Within the initial plan we identified numerous stakeholders within the region. This initial identification relied on the active participation of these stakeholders or of their umbrella agencies. The very nature, however, of some of our providers and consumers of service suggests that they will “come and go” with some frequency. Consequently, this plan implicitly includes all providers of transportation services within the region who actively identify themselves, both current and future, whether they have actively participated in this process or not. It applies the same standard to all consumers of transportation services. We will make no attempt to limit or curtail services or access to resources by any transportation provider or consumer of transportation services merely because they are not specifically included by name in this plan. Neither will we deny anyone the opportunity to coordinate with the various providers of service within the region based merely on the fact that they are not explicitly mentioned in this plan. However, any service that is proposed or any grant that is requested must address one of the broad areas of need as addressed in chapters 4 & 5 of this plan if the grantee is to be assumed to be part of this plan.

These observations and the specific findings within this plan continue to yield limited optimism. Transportation and social service providers face a daunting challenge in trying to determine effective and efficient means of delivering transportation services to the citizens that they support. This has become even more difficult of late with the significant increase in operating costs beyond the ability of these agencies to control. This challenge cannot be overcome with just local means and resources. Success will be dependent on the willingness of the various state agencies, as well as the legislature, to address these critical issues. This is also problematic given the current state of the economy. Diminished tax revenues, depleted tax bases, and increased demands for limited government funding/spending portend a challenging future for transit, transportation providers and the individuals that they seek to serve.
Within the context of this study, it is appropriate to reflect on where we (as a State and Region) actually are with regards to the provision of public transportation within the State of Alabama and within our region. Even though significant strides have been made in the past twenty years, there continues to exist a range of significant issues that keep public transportation from being as viable and dynamic as it could be. It is also appropriate to evaluate the various programs offered within our region and take a “snap shot” of service as it currently exists.

A. General State of Public Transportation within the State & Region –

1) Approximately two thirds (2/3) of the counties throughout the State of Alabama as well as all of the metropolitan areas have some form of public transportation. Within this region three of our seven counties have some form of public transportation as does the City of Dothan, which operates in conjunction with Houston County. This public transportation ranges from adequate to less than adequate, depending on local perception, the level of local support and resources made available to the transit provider. Additionally Job Access and Reverse Commute (JARC) services have been extended into Coffee, Dale, Geneva, Henry and Houston counties. In addition to these specifically defined public transportation providers, there is a disjointed and non-synergistic patchwork of social service and non profit providers that offer some form of transportation service. Most of their services, however, are not public transit related. Rather it is specifically tailored to the unique needs of that particular target population. This particular dynamic is slowly being overcome by the implementation of the Human Services Coordinated Transportation Plans across the state and within our region. Unfortunately, this implementation is contingent upon the availability of resources both locally and regionally.

2) The corollary to 1) above is that almost one third of the counties within the state, and four of the counties within our region, have no form of public transportation. While some may argue that these counties have made a political and policy decision to not provide this service to their citizens, there is a deeper reality. Those counties without public transportation are, in the main, rural and agrarian counties without the financial resources to provide the requisite local match to the available federal dollars.

3) SAFETEA-LU has required that we develop Coordinated Public Transit – Human Service Transportation Plans. In Alabama, this effort, to develop and maintain these Human Services Coordinated Transportation Plans, is being executed and overseen by the Alabama Association of Regional Councils (AARC) under contract to the Multimodal Bureau of the Alabama Department of Transportation (ALDOT). While this was an essential first step, there is little leverage in the legislation to require agencies to
participate unless they specifically desire certain categories for federal funding (Sections 5310, 5316 and 5317). Those most interested in the process (other than the transit providers) are those agencies that would benefit from better efforts at coordination but who bring little to the table other than their need.

4) While some of this narrative may lead one to assume that nothing good is happening, that is not the case. Through intensive coordination efforts with all of the county DHRs within the region, local for profit transportation providers and the Wiregrass Transit Authority, we have established a vibrant, robust and extensively used JARC program within the region. Not only have we partnered with DHR but also with other local agencies that have agreed to provide local match in order to access JARC funding and make these services available to their populations so that they can access employment and employment training opportunities.

5) The Wiregrass Transit Authority continues to pursue technologies to allow it to become more responsive and efficient. The fielding of mobile data terminals and automated vehicle locating systems in all of their busses has greatly enhanced their ability to manage resources in real time. Additionally, across the region ARRA funding has allowed transit providers to recapitalize their fleets and replace aging equipment. This has improved reliability while concomitantly reducing maintenance and operating costs.

6) Our smaller transit systems, Covington Area Transit System (in Covington County) and Eufaula/Barbour Transit Authority (in Barbour County), continue to provide good service to their citizens and are constantly striving to find innovative methods to maximize scarce resources.

7) While much good is happening on a daily basis throughout the region, there still exist some harsh operational realities that must be addressed and accepted. In those counties and cities where public transportation systems exist, challenges tend to prevail. Based on the availability of resources, hours of service, size of the fleet, etc. this service is provided with varying degrees of quality, promptness and efficiency. Listed below are some points that illustrate some of the difficulties facing transit operators as they attempt to provide service:

a) Demand typically exceeds capacity/availability

b) Operating costs continue to escalate without corresponding increases in either federal or local dollars or operating revenues

c) Local revenue sources, either local match or contract revenues from local social service agencies, are finite and are also constrained by very “tight” budgets

d) Bus fares can only provide “so much” revenue. As volume increases, revenues obviously increase. Fare increases are less certain. At a certain point increases in
fares actually decrease the number of riders because the cost is more than they (the individual rider) can afford.

e) Most State agencies that partner with or purchase service from local transit providers are reluctant to pay the fully allocated cost of the service provided. DHR is a notable exception.

f) Alabama Medicaid refuses to pay more than the fare box rate for transportation. This makes the provision of non-emergency Medicaid transportation very difficult. Fare box rates are typically heavily subsidized at the local level. They are in actuality loss-leaders. Medicaid’s position not only deprives local transit providers of a much needed revenue stream, but also depletes available local funds that could be converted into additional transportation.

8) No discussion of public transportation in the state is complete or honest without some mention of prevailing stereotypes and misconceptions. In no particular order, some of the more blatant are listed below. Please note that none of these widely held misconceptions are true:

a) Transit is the – welfare bus, disabled bus, old folk’s bus, mentally retarded bus: This is blatantly untrue. We are Public Transportation and our doors are open to all. The reality in an automobile centric society is that few people with cars ride the bus. This, however, is a matter of personal choice not one of policy or program design.

b) Transit is a social service delivery system: Again untrue. Transit is an integral part of the transportation infrastructure. It is not, as alleged, the “enemy” of roads and bridges. No transit bus is an all terrain vehicles nor do they have 4-wheel drive. They are not amphibious either. Transit operators desperately need the best possible roads and bridges to be able to operate their vehicles safely and efficiently. The “elephant in the room” is the hard fact that the WWII and Korean War generations and their children (the Baby Boomers) are both reaching ages where their requirements for transportation infrastructure are changing. Just as they expected the transportation infrastructure to provide them the means to travel efficiently in the past, they expect it to continue to provide the same access. The difference is that the required/desired means of access is drastically shifting as they get older and can no longer drive. Public transit provides that access.

c) “They” ride the bus – “We” don’t: This is pernicious. I have no idea who we or they are. I do know that this type of social commentary is all too prevalent in discussions of public transportation.

d) Transit has limited value to the community – It is a financial drain: This is the great lie. Not only does public transportation provide needed and necessary services within their communities but they are by their very nature small businesses. With budgets
ranging from a few hundred thousand to several million dollars, public transportation providers employ people, buy local goods and services and return significant dollars (directly and indirectly) to their communities. By getting people to jobs we help them become taxpayers. By getting people to routine outpatient healthcare, we contribute significantly to lessening health care costs. By providing transportation to quality of life destinations, we allow individuals to spend money with local retailers.

9) In addition to the data and observations provided above, there is also some statistical data that creates a basis for concern. Based on data (derived from updated 2000 census data) provided by Auburn University – Montgomery (AUM) and data on the visually impaired provided by the Alabama Institute for the Deaf and Blind (AIDB), the following analytical data are provided for consideration.

a) Alabama is a leading state in the incidence of diabetes
   i) Renal failure (dialysis)
   ii) Bilateral amputation
   iii) Diabetic Retinopathy (blindness)

b) 2d most obese state (related health issues)

c) WWII, Korean War, Viet Nam, Cold War, Persian Gulf, Iraqi Freedom and Afghanistan veterans require access to VA facilities (demand increasing)

d) 5% of households in Alabama do not have access to a vehicle (13% in those households 65+)

e) Senior population is growing rapidly (do we really want them driving?)
   i) 13% of the current population is 65+
   ii) 21% of the 2030 population projected to be 65+
   iii) By 2030 the 65+ population will increase by 72+% 
   iv) By 2030 the 85+ population will increase by 94+% 

f) 22% of the current population over 40 have significant vision problems (442,459) (4% are blind)

g) 2.5% of the current population over 18 have Diabetic Retinopathy (85,752)

h) 2% of the population over 50 have Macular Degeneration (25,476)

10) The State of Alabama also has some “ownership” of this public transportation dilemma. Listed below are some of the more obvious examples:

a) The State of Alabama is constitutionally prohibited from spending gas tax money on anything other than roads and bridges. Any and all past attempts to change this have been met with significant resistance. Any attempt to access general fund dollars has
been doomed to failure in the past given the paucity of these funds and the demands placed on them.

b) Most state social service agencies have funds for transportation within their budgets. The reality is that the sum of these budget lines exceeds the federal dollars available through ALDOT to fund public transportation. Any of these dollars not provided by the US DOT are allowable to be used as matching dollars for the ALDOT managed federal transit dollars (usually in the form of purchase of service). Unfortunately, we (ALDOT and transit providers) have little visibility of these funds and even less access to them.

c) There is a general perception that public transportation (especially rural transportation) is a social service delivery system, not part of the transportation infrastructure. This view is widely held both in our communities and amongst senior staff in many state agencies. I would argue that this view is wrong!

d) Due to a shortage of available funding, transit providers are compelled to partner and associate closely with social service providers because that is where the money is. This reinforces the stereotype identified above.

e) There is a corrosive and unrealistic general expectation that public transportation providers should be able to somehow “make money” and “pay for themselves”. Given the long distances travelled and the low passenger densities encountered in our rural counties, this is unachievable without pricing ourselves out of the market. As an intellectual exercise, it is interesting to reflect that this same expectation is not applied to other forms of transportation infrastructure.

11) So, where does this leave us? I fear, in no good place. We have “painted ourselves into a corner” as a state and have made little progress in the types of paradigm shifts that the provision of quality public transportation, state wide, will require. Much of the impetus for these shifts will only come about if senior leadership throughout the state and region has an epiphany and begin viewing public transportation in a different light. Not only do we have an immediate need for transportation to serve dialysis patients and others with outpatient medical needs but we also have an exploding senior population that will desperately require these services in the very near future. As Alabama becomes a retirement destination then we have an ever increasing requirement for a robust means for older retirees to get to as many venues as possible to spend their disposable income and enhance their local economies. This group is also a significant consumer of health care resources and products. Additionally, work force development and routine outpatient health care also place significant demands on any transit service that is envisioned or provided. All of this access equates to one thing. When people can get to their desired destinations, they will generally spend money. Local economies flourish.
B. **State of Section 5311 Transportation (Figure 2.1)**

Within our region Barbour (the City of Eufaula), Covington and Houston counties access these funds and provide these services. This is the funding stream that provides federal dollars to rural counties and to towns and cities with populations under 50,000. These dollars are allocated to the State of Alabama (ALDOT) and further distributed to qualified (based on an annual application process) rural providers. Operating funds are provided at a 50% federal and 50% local match ratio. Capital funds are matched 80% federal and 20% local and administrative funds are matched 80% federal and 20% local. Just like Section 5307, this is traditional transit money to fund traditional transit systems, albeit in rural areas.

![Figure 2.1](image.png)

C. **State of Section 5307 Transportation (Figure 2.2)**

Within our region the City of Dothan accesses these funds and provides these services. This is the funding source that is specifically for the Metropolitan/Urban areas within the state.
These are defined as areas with populations greater than 50,000 as of the 2010 census. This particular program provides federal funds at 50% for operating funds and 80% for capital funds. Consequently, local match is either 50% (dollar for dollar) for operating funds or 20% for capital funds. This is traditional transit money to fund traditional transit systems. For the five smaller urban areas within the State of Alabama, this funding passes through ALDOT and is distributed to the local provider (Decatur, Anniston, Muscle Shoals, Dothan, Auburn-Opelika). The larger metro/urban areas (Mobile, Montgomery, Tuscaloosa, Huntsville, Birmingham, Gadsden) receive their funding directly from the Federal Transit Administration.

Figure 2.2

D. State of Section 5310 Transportation (Figure 2.3)

Within our region the South Alabama Regional Council on Aging - SARCOA (Senior Centers) and other social service agencies (Wiregrass Rehabilitation Center, Vaughn Blumberg Services, Vivian B. Adams School and others) access these funds to procure
vehicles. This is a more limited funding source. In very simplistic terms, this program is predominantly capital only (80% federal – 20% local) and is used to buy vans and busses for senior centers and other non-profit agencies in the state that provide support to elderly and disabled populations. There are no operating dollars associated with this particular funding stream. This program does make money available for “purchase of service” arrangements. These arrangements only work, however, if there is some agency from which one can purchase transportation services. That is not always the case! This program is also managed by ALDOT.

Figure 2.3

Shown below is a matrix delineating county, agency and numbers of 5309 & 5310 funded vehicles:
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<th>COUNTY</th>
<th>AGENCY</th>
<th>NUMBER OF VEHICLES</th>
</tr>
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| Barbour | Eufaula Senior Center  
P.O. Box 219  
202 Boundary Street  
Eufaula, AL 36027 | 1 |
| Barbour | Clio Senior Citizens, Inc.  
21 College Street  
Clio, AL 36017 | 2 |
| Barbour | Clayton Senior Citizens, Inc.  
P.O. Box 195  
51 North Midway  
Clayton, AL 36016 | 2 |
| Coffee | Health Care Authority of the City of Enterprise  
P.O. Box 311227 Zip: 36331  
300 Plaza Drive  
Enterprise, AL 36330 | 2 |
| Coffee | Mt. Pleasant Sr. Citizen Center  
388 County Rd. 650  
Enterprise, AL 36330 | 3 |
| Coffee | New Hope Senior Center, Inc.  
2142 County Rd. 124  
Brundidge, AL 36010 | 1 |
| Coffee | INO Senior Center  
6284 Hwy 134  
Kinston, AL 36453 | 1 |
| Coffee | Damascus Senior Citizen Ctr.  
129 County Road 514  
Elba, AL 36323 | 1 |
| Coffee | Enterprise Senior Citizen’s Center  
P.O. Box 311000  
Enterprise, AL 36331 | 3 |
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<tbody>
<tr>
<td>Coffee</td>
<td>Town of New Brockton Senior Center P.O. Box 70 New Brockton, AL 36351</td>
<td>1</td>
</tr>
<tr>
<td>Coffee</td>
<td>City of Elba Sr. Center 200 Buford Street Elba, AL 36323</td>
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</tr>
<tr>
<td>Coffee</td>
<td>Pine Level Senior Center #2 County Complex New Brockton, AL 36351</td>
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<tr>
<td>Coffee</td>
<td>Zion Chapel Senior Center 28742 Hwy 87 Jack, AL 36346</td>
<td>3</td>
</tr>
<tr>
<td>Covington</td>
<td>City of Andalusia P.O. Box 427 Andalusia, AL 36420</td>
<td>2</td>
</tr>
<tr>
<td>Covington</td>
<td>Florala Community Transp. Services 1338 4th Street Florala, AL 36442</td>
<td>2</td>
</tr>
<tr>
<td>Covington</td>
<td>South Central Alabama Mental Health Board, Inc. P.O. Box 1028 19815 Bay Branch Rd. Andalusia, AL 36420</td>
<td>2</td>
</tr>
<tr>
<td>Covington</td>
<td>City of Opp P.O. Box 610 Opp, AL 36467</td>
<td>3</td>
</tr>
<tr>
<td>Dale</td>
<td>Daleville Senior Center 18 Old Newton Rd. Daleville, AL 36322</td>
<td>2</td>
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<tr>
<td>Dale</td>
<td>Dale County Retired &amp; Senior Volunteer Program P.O. Box 1012</td>
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</tr>
<tr>
<td>COUNTY</td>
<td>AGENCY</td>
<td>NUMBER OF VEHICLES</td>
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<tr>
<td>--------</td>
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<td></td>
<td>Ozark, AL  36361</td>
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<td>Dale</td>
<td>Ozark-Dale Counties Sr. Citizens, Inc. P.O. Box 789 390 Carroll Avenue Ozark, AL  36361</td>
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<td>Midland City Senior Center</td>
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<td>Dale</td>
<td>Mental Retardation Board of Dale County 2047 Stuart Tarter Road Ozark, AL  36360</td>
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<tr>
<td>Geneva</td>
<td>Coffee Springs Sr. Citizens Center P.O. Box 161 Coffee Springs, AL  36318</td>
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</tr>
<tr>
<td>Geneva</td>
<td>Geneva County ARC P.O. Box 519 1682 County Rd East Geneva, AL  36340</td>
<td>2</td>
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<tr>
<td>Geneva</td>
<td>Wiregrass Medical Center aka Geneva Co. Health Care Auth. 1200 West Maple Avenue Geneva, AL  36340</td>
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<td>Henry</td>
<td>Headland Senior Center Burdshaw-Solomon Center 107 Boynton Street Headland, AL  36345</td>
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<tr>
<td>Henry</td>
<td>Town of Haleburg Sr. Center 10347 G. H. Grimsley Hwy. Columbia, AL  36319</td>
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</tr>
<tr>
<td>Henry</td>
<td>City of Abbeville Senior Center P.O. Box 427</td>
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<tr>
<td>COUNTY</td>
<td>AGENCY</td>
<td>NUMBER OF VEHICLES</td>
</tr>
<tr>
<td>-----------</td>
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<tr>
<td>Abbeville</td>
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<tr>
<td>Henry</td>
<td>Newville Senior Citizens Center</td>
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<tr>
<td></td>
<td>481 Bowden Street</td>
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<tr>
<td></td>
<td>P.O. Box 64</td>
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<td></td>
<td>Newville, AL  36353</td>
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<tr>
<td>Houston</td>
<td>Ashford Senior Center</td>
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<td></td>
<td>409 County Rd. 33 North</td>
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<td>Ashford, AL  36312</td>
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<tr>
<td>Houston</td>
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<tr>
<td></td>
<td>PO Box 338</td>
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<tr>
<td></td>
<td>Dothan, AL  36302</td>
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<tr>
<td>Houston</td>
<td>Dothan-Houston County MR Board, Inc.</td>
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<td></td>
<td>2715 Flynn Rd.</td>
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<td>ABRC Hutto Towers, Inc.</td>
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<td></td>
<td>Baptist Village</td>
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<td></td>
<td>4426 West Main Street</td>
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</tr>
<tr>
<td></td>
<td>Dothan, AL  36305</td>
<td></td>
</tr>
<tr>
<td>Houston</td>
<td>Taylor Advanced Senior Citizens</td>
<td>2</td>
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<tr>
<td></td>
<td>1457 County Road 59</td>
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</tr>
<tr>
<td></td>
<td>Taylor, AL  36301</td>
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<td>Houston</td>
<td>Town of Cottonwood Senior Center</td>
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<tr>
<td></td>
<td>P.O. Box 447</td>
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<td></td>
<td>Cottonwood, AL  36320</td>
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<td>Houston</td>
<td>Wesley Manor Retirement Center</td>
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<td></td>
<td>718 Honeysuckle Road</td>
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<tr>
<td>Houston</td>
<td>City of Dothan</td>
<td>2</td>
</tr>
</tbody>
</table>
E. State of Section 5316 (JARC) Transportation (Figure 2.4)

Within our region the Wiregrass Transit Authority coordinates and provides this service in Dale, Coffee, Geneva, Henry and Houston counties. This program is managed and monitored by the Alabama Department of Senior Services (ADSS) within the State of Alabama. The acronym stands for Job Access and Reverse Commute. It is designed to assist economically disadvantaged citizens to move from welfare to work. Federal funds are provided at 50%. The local match requirement is, therefore, 50% (dollar for dollar). For capital procurements under this program the match is 80% federal and 20% local. For a specifically defined population, the Alabama DHR has partnered with ADSS (Alabama Department of Senior Services) and the transit providers to provide the requisite match for this program. This program only provides transportation to individuals for work and work related activities. There is no component of this program that allows us to provide health care or quality of life transportation. Vehicles providing this service are centered in Dothan and Ozark, but serve the five county service area. On 1 October 2008, proponency for this program transferred from ALDOT to ADSS.
F. State of Section 5317 (New Freedoms) Transportation

This program is currently not offered in our region. The intent of the New Freedoms program is to provide transportation services “beyond ADA”. This is a vague and amorphous program definition. The funding and match requirements for Section 5317 are the same as they are for JARC, i.e. 50% federal and 50% local. For capital procurements under this program the match is 80% federal and 20% local. The legislative intent of this program is to allow the disabled to have greater access to public transportation and concomitantly to the community at large. While this program does not specifically preclude health care transportation, neither is it designed so that it can solely and exclusively provide health care transportation to the general public. The constant in this program is that all beneficiaries of this funding stream must meet an ADA eligibility test. (whatever that is defined as being) On 1 October 2008, proponency for this program transferred from ALDOT to ADSS.
Chapter 3  
Planning Context and Methodology

A. Regional Demographic Indicators

In order to appreciate the breadth and depth of transportation and coordination challenges and opportunities within the region, it is important to understand how our population and its needs are distributed. Regional maps are provided below that illustrate the distribution of key demographic elements within the region. These data, conveyed within these maps, are derived from census tract data contained within the 2010 Census, 2005-2009 American Community Survey, and 2000 Census. This graphical representation is primarily focused on population distribution, age, income, disability and private/personal vehicle availability.

It can be inferred from this data that health care, employment and quality of life opportunities and demands increase as the population within a given locality increases. It is, therefore, expected and not surprising that Dothan and Enterprise are the two primary focal points for employment, health care and quality of life. One can also see that Ozark, Eufaula, Andalusia and Opp are also focal points, but of a lesser impact.
Population and Population Density (Figures 3.1 and 3.2)

The Dothan metropolitan area (predominantly in Houston County) has the greatest total population and is the most densely populated area in Southeast Alabama, as demonstrated by having the five highest density census tracts. The next most populated and densely settled area comprises Enterprise (mostly in Coffee County). These two locations are the only areas with more than 800 persons per square mile, with smaller levels of higher density being noted in Ozark and Eufaula. The Southeast Alabama region is predominantly a low-density populated area. There are no census tracts in Geneva or Henry counties with at least 100 persons per square mile.
Elderly Population (Figure 3.3)

The elderly population in Southeast Alabama, as in most other areas in the country, is becoming an increasingly higher proportion of population and population growth. The highest levels of population over 60 years in age are found in local areas within Barbour, Covington, Dale, and Henry counties, with a few of these areas well over 30% of population over 60 years in age. This map displays that the more urbanized areas, such as Dothan, Enterprise, Ozark, and Eufaula do not have as high of proportion of elderly population as some rural areas, though total numbers of elderly population remain significant.

Figure 3.3
Lack of Vehicle Availability (Figure 3.4)

The following map displays estimates of areas with households that have no vehicle available for travel. The two census tracts with the highest percentage of no vehicles available (33.9% and 33.4%) are both located in Dothan (Houston County), which has available public transportation. However, a census tract that has 27.4% of households with no vehicles is located in Enterprise (Coffee County), with very few opportunities for transportation alternatives. Overall, this map shows that the higher percentage of zero vehicle households in Southeast Alabama are located in higher density populated areas, including Eufaula, Ozark, Andalusia, and Opp.

Figure 3.4
Population with Disability (Figure 3.5)

Areas with high levels of population with disabilities, which includes those disabilities that cause mobility impairment, are spread throughout high and low-density areas in Southeast Alabama, including areas within Dothan (Houston County); Andalusia, Opp, and Florala (Covington County); Ozark (Dale County); and rural locations in Barbour and Henry counties. One should proceed cautiously, however, in evaluating this data. The existence of a disability does not, in and of itself, dictate a need for transportation. While many of our disabled do have limitations that preclude or severely limit driving (mobility issues, blindness, some cognitive disabilities, limitations associated with aging, etc.), other disabilities do not materially affect one’s ability to drive or provide for their own transportation. While we do not wish to minimize the real challenges faced by many of our disabled citizens, neither do we want to make a blanket generalization that all disabilities render an individual dependent or in need of transportation services. These comments are cautionary. Those interested in this demographic must carefully evaluate any given disabilities affect on transportation and mobility before making any assumptions or using this data to support a conclusion.

Figure 3.5
Population Below Poverty Level (Figure 3.6)

As can be seen in the map below, much of Barbour County (including Eufaula) has large areas of population that are under the poverty level. Other areas with very high levels of poverty include areas in Dothan (Houston County), Enterprise (Coffee County), Opp (Covington County), and Ozark (Dale County). Many of the areas with high poverty levels (with the exception of rural Barbour County) are in higher density populated areas.

Figure 3.6

Poverty Levels in Southeast Alabama (by Census Tract)

Legend

Percent of Population Below Poverty Level
- 0.0% - 4.7%
- 4.7% - 13.4%
- 13.4% - 20.2%
- 20.2% - 28.2%
- 28.3% - 45.1%

Source: 2005-2009 American Community Survey Five-Year Estimate
B. Regional Assessment

Figure 3.7

Southeast Alabama Region

The Southeast Alabama Regional Planning and Development Commission serves seven counties in the extreme southeastern corner of Alabama – Barbour, Coffee, Covington, Dale, Geneva, and Houston. For transportation planning purposes, the Dothan Urbanized Area is within the Southeast Wiregrass Area Metropolitan Planning Organization (MPO) and the remainder of the region is in the Southeast Alabama Rural Planning Organization (RPO) as shown in Figure 3.7.

The region is primarily rural, with Dothan (in Houston County) being the largest city and only metropolitan area, as shown in the map above. The Southeast Alabama region encompasses approximately 4,871 square miles, which is 9.3% of the State of Alabama. Land use in the Southeast Alabama region is primarily forestland and agriculture, with smaller areas of land devoted to transportation, residential, public, industrial, and commercial uses. Three primary river basins flow through the region (Chattahoochee-Chipola, Choctawhatchee-Pea-Yellow, and Conecuh-Sepulga). All of them provide recreational opportunities, while the Chattahoochee River provides a navigable channel.
The 2010 Census population of the Southeast Alabama region is 311,060, which is 6.5% of the State’s population. The table below shows population trends for the Southeast Alabama and how it compares with the entire state.

<table>
<thead>
<tr>
<th></th>
<th>Southeast Alabama Regional Population 1990-2010</th>
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<tbody>
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<td></td>
<td>Total Population</td>
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<td>Covington</td>
<td>36,478</td>
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<td>Dale</td>
<td>49,633</td>
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<td>Geneva</td>
<td>23,647</td>
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<td>Henry</td>
<td>15,374</td>
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<td>Houston</td>
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<td>SEARPDC</td>
<td>272,120</td>
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<td>Alabama</td>
<td>4,040,587</td>
</tr>
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</table>

Source: U.S. Census Bureau

Over the past two decades, the Southeast Alabama region has been growing at a rate slightly less than the whole state. Most of the population growth in Southeast Alabama is concentrated in and adjacent to the population centers of Dothan and Enterprise, while most rural areas are holding steady or slightly declining.

Traditionally, the Southeast Alabama regional economy has been strong in manufacturing, retail, agricultural, and governmental sectors. Agriculture has always been a strong fabric of the Southeast Alabama region, through the harvesting of crops, such as peanuts, cotton, and corn. Agricultural research is also an important factor as Auburn University operates an Agricultural Experiment Station in Headland. The influence of manufacturing is waning, with the closure of multiple plants and factories in the 1990s and 2000s, yet this segment is still very strong in certain areas, such as Barbour County. Fort Rucker, the Home of Army Aviation, is an economic engine as a large workforce of military, other federal, and civilian employees comprise a large segment of the workforce in Dale and Coffee counties. Services, including retail and health care have been a large segment of job numbers in the past few decades, especially in Houston County. The table below provides employment information by industry for the region.

<table>
<thead>
<tr>
<th>Southeast Alabama Regional Employment (by Industry) 2005 &amp; 2009</th>
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<tr>
<td></td>
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<tr>
<td>Farm</td>
</tr>
<tr>
<td>Manufacturing</td>
</tr>
<tr>
<td>Retail Trade</td>
</tr>
<tr>
<td>Health Care</td>
</tr>
<tr>
<td>Government</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

Source: U.S. Bureau of Economic Analysis
Barbour County is the northernmost of the seven SEARP&DC counties. It is bordered by the State of Georgia to the east, Henry and Dale counties to the south, Pike and Bullock counties to the west, and Russell County to the north. There are six municipalities in Barbour County: Baker Hill, Blue Springs, Clayton, Clio, Eufaula, and Louisville. Barbour County and Quitman County, GA, comprise the Eufaula, AL-GA Micropolitan Statistical Area. Barbour County has an area of 905 square miles, of which 885 square miles are land. There are two federal highways in Barbour County: U.S. 431 (north-south) and U.S. 82 (east-west). U.S. 431 is a major thoroughfare between Atlanta, GA to the north and the Florida Gulf Coast. U.S. 82 is the main route from Barbour County to Montgomery and also provides a link across the Chattahoochee River to Georgia.

According to the U.S. Census Bureau, Barbour County’s 2010 population is 27,457, a decrease of 5.44% from the 2000 Census population of 29,038. The population density is 31.0 persons per square mile. Nearly half of Barbour County’s population is located in Eufaula, located along the eastern boundary of the county. The remainder of Barbour County is rural and sparsely populated. Barbour County is racially diverse, as 46.8% of the population is White Non-Hispanic and 46.9% is Black. Approximately 5.1% of Barbour County residents are of Hispanic origin. Barbour County’s population of persons 60 years old and over is 20.8%, which is slightly higher than the Alabama
average of 19.5%. According to the 2000 Census (the most recent disability data available), the percentage of Barbour County residents that are classified as disabled is 22.9%, which is slightly higher than the Alabama average of 21.3%.

Barbour County shares many of the demographic and economic conditions of the Alabama Black Belt region and is classified as a Distressed County by the Delta Regional Authority. Barbour County had a June 2011 unemployment rate of 13.5% and, traditionally, has the highest unemployment rate in the Southeast Alabama region. Barbour County’s estimated 2009 median household income was $28,802, which is 71.0% of Alabama’s average. Barbour County residents have a mean travel time to work of 22.9 minutes, which is slightly less than the Alabama average of 23.7 minutes.

Barbour County has extensive historical and recreational sites. The Barbour County Governor’s Trail recognizes six Alabama governors with Barbour County ties. Eufaula has an extensive historical district drawing many tourists. The county is also well known for the Walter F. George Reservoir, also known as Lake Eufaula, which is a destination for bass fishing and water related recreation. The Eufaula National Wildlife Refuge is also located in Barbour County.

Barbour County (the City of Eufaula) has implemented a very limited public transportation system within the City of Eufaula. The Eufaula-Barbour County Transit Authority is a Section 5311 provider with local matching funds provided by the City of Eufaula. This system operates with very limited resources and within a fairly constrained schedule. Coordination is ongoing between the various social service agencies within the City of Eufaula and the county and the transit system. These efforts tend to be frustrating because of the lack of resources available (two (2) busses in service with no night or weekend service). Additionally, high expectations for extraordinary service by passengers tend to create additional coordination challenges for the system. In spite of this, coordination efforts have led to limited trips being provided from Eufaula to the county seat (and county services) in Clayton.

Barbour County has three Senior Centers, one each in Clayton, Clio and Eufaula. There is a potential for expanded coordination between these centers, SARCOA, social service agencies within the county and the transit system. Because of very constrained resources, however, questions dealing with operating funds for Senior Center vehicles (Section 5310) and local matching funds must be addressed first.

The highest concentrations of the studied regional origination indicators exist within the City of Eufaula and in the areas immediately surrounding Clayton, Clio, and Louisville. Primary destinations are clustered in Eufaula and Clayton. Significant employment opportunity (destination) exists in Baker Hill at the chicken plant. Secondary destinations occur in Dothan for health care, shopping and some employment opportunities.
Coffee County is in the western portion of the Southeast Alabama region. It is bordered by the Dale County to the east, Geneva County to the south, Covington and Crenshaw counties to the west, and Pike County to the north. There are four municipalities in Coffee County: Elba, Enterprise, Kinston, and New Brockton. Coffee County, along with Dale County, comprises the Enterprise-Ozark, AL Micropolitan Statistical Area. Coffee County has an area of 680 square miles, of which 679 square miles is land. There is one federal highway in Coffee County: U.S. 84 (east-west). U.S. 84 is a major thoroughfare across southern Alabama and is part of the El Camino East/West Corridor. Alabama Highway 167 through Coffee County provides a main route from Troy to the Florida Gulf Coast.

According to the U.S. Census Bureau, Coffee County’s 2010 population is 49,948, an increase of 14.52% from the 2000 Census population of 43,615. The population density is 73.6 persons per square mile. Over half of Coffee County’s population is located in Enterprise, located in the southeastern part of the county. The remainder of Coffee County is primarily rural and sparsely populated. Coffee County’s racial composition shows 72.3% of the population is White Non-Hispanic and 16.7% is Black. Approximately 6.4% of Coffee County residents are of Hispanic origin. Coffee County’s population of persons 60 years old and over is 20.3%, which is slightly higher than the Alabama average of 19.5%. According to the 2000 Census (the most recent disability data available), the percentage of Coffee County residents that are classified as disabled is 21.0%, which is very similar to the Alabama average of 21.3%.

Coffee County had a June 2011 unemployment rate of 8.4%. Coffee County’s estimated 2009 median household income was $43,296, which is 106.8% of Alabama’s average. Coffee County residents have a mean travel time to work of 20.5 minutes, which is less than the Alabama average of 23.7 minutes.

Coffee County is well-known for the Boll Weevil Monument located in Enterprise, which pays homage to the pest that forced the area to diversify its farming activities. Enterprise is known as “The City of Progress.” A levee system surrounding Elba provides protection to the small city that has had repeated instances of flooding from the Pea River.

Coffee County has no public transportation system within the county, even though there is significant need for transportation for individuals without their own means of transportation. Given this situation, coordination is not a particular priority nor does it occur at any significant level. This dynamic has changed slightly within the past few years. Coffee County (DHR) is partnering with the Wiregrass Transit Authority to provide Job Access and Reverse Commute (JARC) services to eligible citizens. Wiregrass Transit is brokering this service through the use of private (for profit) vendors. Initial indications are that this program is being well accepted and is providing a needed service to qualified individuals.
Coffee County has nine Senior Centers, one each in Damascus, Elba, Enterprise, Ino, Kinston, Mt. Pleasant, New Hope, Pine Level and Zion Chapel. There is a potential for some coordination between these centers, SARCOA and social service agencies within the county. Because of very constrained resources, however, questions dealing with operating funds for Senior Center vehicles (Section 5310) and local matching funds must be addressed first.

The highest concentrations of the studied regional origination indicators exist within the City of Enterprise and in the areas immediately surrounding Elba and New Brockton. Primary destinations are clustered in Enterprise and New Brockton. Significant employment opportunity (destination) exists in Fort Rucker (not covered by this study) and at the chicken plants in Jack and west of Enterprise. Secondary destinations occur in Dothan for health care, shopping and some employment opportunities.
Covington County is the westernmost county in the Southeast Alabama region. It is bordered by Coffee and Geneva counties to the east, the State of Florida to the south, Conecuh and Escambia counties to the west, and Butler and Crenshaw counties to the north. There are fourteen (14) municipalities in Covington County: Andalusia, Babbie, Carolina, Florala, Gantt, Heath, Horn Hill, Libertyville, Lockhart, Onycha, Opp, Red
Level, River Falls, and Sanford. Covington County is not part of a Metropolitan or Micropolitan Statistical Area. Covington County is the largest county in Southeast Alabama with an area of 1,044 square miles, of which 1,027 square miles is land. There are three federal highways in Covington County: U.S. 84 (east-west), U.S. 29 (northeast-southwest), and U.S. 331 (north-south). U.S. 84 is a major thoroughfare across southern Alabama and is part of the El Camino East/West Corridor. U.S. 29 is a route commonly used to travel to Troy (northeast) and the Pensacola/Mobile areas (southwest). U.S. 331 is a major route between Montgomery and the Destin/Fort Walton Beach, Florida areas. Alabama Highway 55 through Covington County provides a main route northwest to I-65 and is heavily traveled between Florala and Andalusia.

According to the U.S. Census Bureau, Covington County’s 2010 population is 37,765, an increase of 0.36% from the 2000 Census population of 37,631. The population density is 36.8 persons per square mile. Much of Covington County is rural and sparsely populated, with Andalusia, Opp, and Florala the only municipalities with populations over 1,000. Covington County’s racial composition shows 84.1% of the population is White Non-Hispanic and 12.5% is Black. Approximately 1.3% of Covington County residents are of Hispanic origin. Covington County’s population of persons 60 years old and over is 24.9%, which is substantially higher than the Alabama average of 19.5%.

According to the 2000 Census (the most recent disability data available), the percentage of Covington County residents that are classified as disabled is 26.0%, which is higher than the Alabama average of 21.3%.

Covington County had a June 2011 unemployment rate of 10.2%. Covington County’s estimated 2009 median household income was $32,179, which is 79.4% of Alabama’s average. Covington County residents have a mean travel time to work of 21.1 minutes, which is less than the Alabama average of 23.7 minutes.

A large portion of the Conecuh National Forest is located within Covington County. There are two Alabama State Parks in Covington County: Frank Jackson State Park in Opp and Florala State Park in Florala. Gantt and Point “A” lakes along the Conecuh River are also recreation destinations in Covington County.

Covington County has an established public transportation system that operates countywide. The Covington Area Transit System (CATS) is a Section 5311 provider with local matching funds provided by the county and by cities within the county. This system operates with limited resources and within a fairly constrained schedule. Coordination is ongoing between the various social service agencies within Covington County and the transit system. Local social service agencies are frustrated by coordination efforts, due in large part, to a lack of transit resources available (no expanded hours, nights or weekend service). Additionally, high expectations for extraordinary service by passengers tend to create additional coordination challenges for the system. In spite of this, coordination has been successful where resources have been available.
Covington County has three Senior Centers, one each in Andalusia, Florala and Opp. There is a potential for expanded coordination between these centers, SARCOA, social service agencies within the county and the transit system. Because of very constrained resources, however, questions dealing with operating funds for Senior Center vehicles (Section 5310) and local matching funds must be addressed first.

The highest concentrations of the studied regional origination indicators exist within the cities of Andalusia and Opp. Smaller significant clusters exist around Florala and Lockhart. Primary destinations are clustered in Andalusia and Opp. Secondary destinations occur in Dothan for health care, shopping and some employment opportunities.
Dale County is located in the center of the seven SEARP&DC counties. It is bordered by Henry County to the east, Geneva and Houston counties to the south, Coffee County to the west, and Barbour and Pike counties to the north. There are ten municipalities in Dale County: Ariton, Clayhatchee, Daleville, Grimes, Level Plains, Midland City, Napier Field, Newton, Ozark, and Pinckard. Dale County, along with Coffee County, comprises the Enterprise-Ozark, AL Micropolitan Statistical Area. Dale County has an area of 563 square miles, of which 561 square miles is land. There are two federal highways in Barbour County: U.S. 231 (northwest-southwest) and U.S. 84 (east-west). U.S. 231 is the major route between Montgomery to the north and Dothan to the south. U.S. 84 is in the
The extreme southern portion of Dale County and is the main route between Enterprise to the west and Dothan to the east.

According to the U.S. Census Bureau, Dale County’s 2010 population is 50,251, an increase of 2.28% from the 2000 Census population of 49,129. The population density is 89.6 persons per square mile. Ozark is, by far, the most populous city in Dale County. The remainder of Dale County is interspersed with small towns and rural communities. Dale County’s racial composition shows 71.1% of the population is White Non-Hispanic and 19.3% is Black. Approximately 5.6% of Dale County residents are of Hispanic origin. Dale County’s population of persons 60 years old and over is 19.1%, which is slightly less than the Alabama average of 19.5%. According to the 2000 Census (the most recent disability data available), the percentage of Dale County residents that are classified as disabled is 20.7%, which is slightly less than the Alabama average of 21.3%.

Dale County had a May 2011 unemployment rate of 9.9%. Dale County’s estimated 2009 median household income was $41,279, which is 101.8% of Alabama’s average. Dale County residents have a mean travel time to work of 19.4 minutes, which is less than the Alabama average of 23.7 minutes.

A major asset for Dale County, and the Southeast Alabama region, is Fort Rucker, home of Army Aviation. Access to Fort Rucker is located near Enterprise, Daleville, and Ozark. The Dothan Regional Airport is located in Dale County.

Dale County has no public transportation system within the county, even though there is significant need for transportation for individuals without their own means of transportation. Given this situation, coordination is not a particular priority nor does it occur at any significant level. This dynamic has changed slightly within the past few years. Dale County (DHR) has recently agreed to partner with the Wiregrass Transit Authority to provide Job Access and Reverse Commute (JARC) services to eligible citizens. Wiregrass Transit is brokering this service through the use of private (for profit) vendors. Initial indications are that this program is being well accepted and is providing a needed service to qualified individuals.

Dale County has four Senior Centers, one each in Daleville, Midland City, Newton and Ozark. There is a potential for some coordination between these centers, SARCOA and social service agencies within the county. Because of very constrained resources, however, questions dealing with operating funds for Senior Center vehicles (Section 5310) and local matching funds must be addressed first.

The highest concentrations of the studied regional origination indicators exist within the City of Ozark and in the areas immediately surrounding Midland City and Daleville. Smaller significant clusters exist around Grimes and Ariton. Primary destinations are clustered in Ozark. Significant employment opportunity (destination) exists in Ozark and Midland City. Secondary destinations occur in Dothan for health care, shopping and some employment opportunities.
Geneva County is located in the southern portion of the Southeast Alabama region. It is bordered by Houston County to the east and northeast, the State of Florida to the south, Covington County to the west, and Coffee and Dale counties to the north. There are eight municipalities in Geneva County: Black, Coffee Springs, Eunola, Geneva, Hartford, Malvern, Samson, and Slocomb. Geneva County, along with Henry and Houston counties, comprises the Dothan, AL Metropolitan Statistical Area. Geneva County has an area of 579 square miles, of which 574 square miles is land. There are no federal highways in Geneva County. There are two heavily traveled state routes in Geneva County: Alabama Highway 52 (east-west) and Alabama Highway 167 (north-south). Highway 52 is a major route bisecting Geneva County leading to Dothan to the east and Opp to the west. Highway 167 is a main route from the Florida Gulf Coast to the south to Enterprise, Troy, and Montgomery to the north.

According to the U.S. Census Bureau, Geneva County’s 2010 population is 26,790, an increase of 3.83% from the 2000 Census population of 25,764. The population density is 46.7 persons per square mile. Geneva County’s population is spread throughout the county, with Geneva having the largest population of 4,452 people. Geneva County’s racial composition shows 84.7% of the population is White Non-Hispanic and 9.5% is Black. Approximately 3.4% of Geneva County residents are of Hispanic origin.
County’s population of persons 60 years old and over is 24.3%, which is higher than the Alabama average of 19.5%. According to the 2000 Census (the most recent disability data available), the percentage of Geneva County residents that are classified as disabled is 26.3%, which is higher than the Alabama average of 21.3%.

Geneva County had a June 2011 unemployment rate of 10.3%. Geneva County’s estimated 2009 median household income was $31,347, which is 77.3% of Alabama’s average. Geneva County residents have a mean travel time to work of 24.2 minutes, which is slightly more than the Alabama average of 23.7 minutes.

The Geneva State Forest is located in the western portion of Geneva County. The confluence of the Choctawhatchee and Pea rivers is in Geneva, which has a levee system to assist in protecting the city from flooding.

Geneva County has no public transportation system within the county, even though there is significant need for transportation for individuals without their own means of transportation. Given this situation, coordination is not a particular priority nor does it occur at any significant level. This dynamic has changed slightly within the past few years. Geneva County (DHR) has recently agreed to partner with the Wiregrass Transit Authority to provide Job Access and Reverse Commute (JARC) services to eligible citizens. Wiregrass Transit is brokering this service through the use of private (for profit) vendors. Initial indications are that this program is being well accepted and is providing a needed service to qualified individuals.

Geneva County has five Senior Centers, one each in Coffee Springs, Geneva, Hartford, Samson and Slocomb. There is a potential for some coordination between these centers, SARCOA and social service agencies within the county. Because of very constrained resources, however, questions dealing with operating funds for Senior Center vehicles (Section 5310) and local matching funds must be addressed first.

The highest concentrations of the studied regional origination indicators exist within Geneva and in the areas immediately surrounding Hartford and Samson. Smaller significant clusters exist around Slocomb. Primary destinations are clustered in Geneva. Dothan is a significant destination for health care, shopping and employment opportunities. Enterprise is also a secondary destination.
Henry County is located in the eastern portion of the Southeast Alabama region. It is bordered by the State of Georgia to the east, Houston County to the south, Dale County to the west, and
Barbour County to the north. There are four municipalities in Henry County: Abbeville, Haleburg, Headland, and Newville. Henry County, along with Geneva and Houston counties, comprises the Dothan, AL Metropolitan Statistical Area. Henry County has an area of 568 square miles, of which 562 square miles is land. There is one federal highway in Henry County: U.S. 431 (north-south). U.S. 431 is the major route between Atlanta, Georgia to the north and Dothan and the Florida Gulf Coast to the south.

According to the U.S. Census Bureau, Henry County’s 2010 population is 17,302, an increase of 6.08% from the 2000 Census population of 16,310. Henry County is the least populous county of the Southeast Alabama region. The population density is 30.8 persons per square mile. Headland, adjacent to Dothan, is the most populous city in Henry County with population of 4,510. Besides Headland and the county seat of Abbeville, the remainder of Henry County is primarily rural. Henry County’s racial composition shows 67.8% of the population is White Non-Hispanic and 28.6% is Black. Approximately 2.2% of Henry County residents are of Hispanic origin. Henry County’s population of persons 60 years old and over is 25.5%, which is substantially higher than the Alabama average of 19.5%. According to the 2000 Census (the most recent disability data available), the percentage of Henry County residents that are classified as disabled is 27.7%, which is higher than the Alabama average of 21.3%.

Henry County had a June 2011 unemployment rate of 10.5%. Henry County’s estimated 2009 median household income was $35,215, which is 86.8% of Alabama’s average. Henry County residents have a mean travel time to work of 21.8 minutes, which is less than the Alabama average of 23.7 minutes.

Henry County residents have access to the Walter F. George Lake, also known as Lake Eufaula, and Lake George W. Andrews along the Chattahoochee River.

Henry County has no public transportation system within the county, even though there is significant need for transportation for individuals without their own means of transportation. Given this situation, coordination is not a particular priority nor does it occur at any significant level. This dynamic has changed slightly within the past year. Henry County (DHR) has recently agreed to partner with the Wiregrass Transit Authority to provide Job Access and Reverse Commute (JARC) services to eligible citizens. Wiregrass Transit is brokering this service through the use of private (for profit) vendors. Initial indications are that this program is being well accepted and is providing a needed service to qualified individuals.

Henry County has four Senior Centers, one each in Abbeville, Haleburg, Headland and Newville. There is a potential for some coordination between these centers, SARCOA and social service agencies within the county. Because of very constrained resources, however, questions dealing with operating funds for Senior Center vehicles (Section 5310) and local matching funds must be addressed first.

The highest concentrations of the studied regional origination indicators exist within the Cities of Headland and Abbeville. Smaller significant clusters exist around Newville. Primary
destinations are clustered in Headland and Abbeville. Dothan is also a primary destination for health care, shopping and employment opportunities.

Houston County

Houston County is the southeastern corner of Alabama. It is bordered by the State of Georgia to the east, the State of Florida to the south, Geneva County to the west, Dale County to the northwest, and Henry County to the north. There are twelve (12) municipalities in Houston County: Ashford, Avon, Columbia, Cottonwood, Cowarts, Dothan, Gordon, Kinsey, Madrid, Rehobeth, Taylor, and Webb. Houston County, along with Geneva and Henry counties, comprises the Dothan, AL Metropolitan Statistical Area. Houston County has an area of 582 square miles, of which 580 square miles is land. There are three federal highways in Houston County: U.S. 231 (north-south), U.S. 431 (north-south), and U.S. 84 (east-west). U.S. 231 is the major route between Montgomery to the north and the Florida Gulf Coast to the south. U.S. 431 provides a major link between Houston County and Atlanta, Georgia. U.S. 84 provides the main route to Enterprise to the west and southern Georgia to the east.
According to the U.S. Census Bureau, Houston County’s 2010 population is 101,547, an increase of 14.37% from the 2000 Census population of 88,787. Houston County is the most populous county of the Southeast Alabama region. The population density is 175.1 persons per square mile. Dothan is, by far, the most populous city in Houston County and is the regional center for Southeast Alabama. The remainder of Houston County is interspersed with small towns and rural communities. Houston County’s racial composition shows 68.7% of the population is White Non-Hispanic and 25.8% is black. Approximately 2.9% of Houston County residents are of Hispanic origin. Houston County’s population of persons 60 years old and over is 20.3%, which is higher than the Alabama average of 19.5%. According to the 2000 Census (the most recent disability data available), the percentage of Houston County residents that are classified as disabled is 20.2%, which is slightly less than the Alabama average of 21.3%.

Houston County had a June 2011 unemployment rate of 9.9%. Houston County’s estimated 2009 median household income is $38,751, which is 95.6% of Alabama’s average. Houston County residents have a mean travel time to work of 21.8 minutes, which is less than the Alabama average of 23.7 minutes.

Houston County borders on the Chattahoochee River, which gives residents quick access to Lake George W. Andrews and Lake Seminole for fishing and other forms of recreation. Houston County also operates the former Chattahoochee State Park, located in the southeastern corner of Houston County.

Houston County has an established public transportation system that operates countywide. The Wiregrass Transit Authority is a combined Section 5307 (urban) and 5311 (rural) provider with local matching funds provided by the City of Dothan and by Houston County. This system operates with finite resources and within a fairly constrained schedule. Coordination is ongoing between the various social service agencies within Houston County and the transit system. Local social service agencies are frustrated by coordination efforts, due in large part, to a lack of transit resources available at the times required (most often nights and weekends). Additionally, high expectations for extraordinary service by passengers tend to create additional coordination challenges for the system. In spite of this, coordination has been successful where resources have been available.

The City of Dothan has recently funded and concluded a feasibility study on the provision of fixed route transit service within Dothan. This study determined that a need existed. An analysis of the costs associated with implementation of a fixed route service led the Dothan City Commission to defer any decision about implementation until such time as the local economy improved or a funding source for this activity could be indentified.

Houston County has had one very “bright spot” in the realm of coordinated transportation. The Job Access and Reverse Commute Program, managed by the Wiregrass Transit Authority, has been a major success. It has been heralded as one of the best programs of its type within the State of Alabama. This program has expanded to provide service 24/7 within Dothan and Houston County as well as in the surrounding/contiguous counties of Henry, Geneva, Dale and Coffee.
Houston County has nine Senior Centers, one each in Ashford, Columbia, Cottonwood, Madrid, Taylor, Webb and three in Dothan (Baptist Village, Dorothy Quick and Rose Hill). The Southeast Alabama Regional Council of Aging (SARCOA) is also physically located in Dothan. There is a potential for expanded coordination between these centers, SARCOA, social service agencies within the county and the transit system. Because of very constrained resources, however, questions dealing with operating funds for Senior Center vehicles (Section 5310) and local matching funds must be addressed first.

The highest concentrations of the studied regional origination indicators exist within the City of Dothan and to its south (to include Cottonwood) and west. Smaller significant clusters exist around Webb, Ashford and Columbia. Primary destinations are randomly scattered throughout Dothan. Healthcare destinations tend to be on the east and west sides of the city while primary educational destinations are either in the middle of town or to the north.

D. Transit potential

Our analysis of all of the data reviewed and all of the inputs considered suggest a huge potential for expanding transit within the region. There is an almost universal desire for transit in our four counties without any. There is also a significant desire for expanded transit within our three counties where some transit already exists. While significant vocal demand exists within certain portions of the community this vocal support has not manifested itself into any tangible support (public or political) or additional resources. Some of the challenges, as demonstrated by the demographic data in part A of this chapter, are the low densities of population and the distances involved to primary destinations. As discussed in other portions of this study, there is great potential to provide additional transit services within the region with the implementation of corridor routes along the major corridors within the region with Dothan as the nexus. This is a technically achievable outcome given the provision of adequate and stable resources.

E. Transit opportunities

In conjunction with D. above, there are some opportunities though they are somewhat limited. This constraint is largely a function of limited resources. Some opportunities that may present themselves in the near future are:

a. Once the new reauthorization bill is passed, it will be possible to see if the implementing language for Section 5317 (New Freedoms) has been changed to a point where this service can be provided in partnership with local 5310 providers. This would provide a significant opportunity for elderly and disabled passengers to access transportation services that had not previously been available to them

b. Again, with passage of the new reauthorization bill, a detailed analysis of both the Section 5310 (Elderly and Disabled) and Section 5316 (JARC) programs may afford localities with more flexibility in providing these services and opening up new transportation alternatives to a broader segment of our populations. Interesting to note
will be how purchase of service issues are addressed for our 5310 programs. The requirements for local match will also be critical for the future success of these programs.

c. There also exists a significant opportunity to tie the region together with a regional web of transit and disparate transportation providers. Assuming that our existing transit providers are able to establish transit service along the major corridors within the region (as discussed in detail in other portions of this plan), feeder services can then be provided by an eclectic mix of 5310 providers, social service agencies, private for profit providers, churches and any other group that can provide some but not all of the transportation needs of its client base. This undertaking will only be constrained by the availability of resources, the imaginations of those implementing the service and those bureaucratic hurdles that will inevitably surface.

F. Other transit needs

This is a difficult area to discuss. Without exception, every consumer, advocacy group, social service agency, health care provider and many others will confirm that their community or agency or facility needs more or better transit services than it currently has. Many of these discussions are couched in terms of a desire for a “real” transit system as opposed to what currently exists. Needless to say, this particular expression of need is not constrained by such impediments or realities as the availability of resources.

Within the region, however, there do exist some valid needs that require addressing. A more detailed discussion of these needs can be found in Chapter 4 of this study. One can, in chapter 5 of this study, also review strategies that have been developed to address these needs and issues. Beyond what is discussed in the following chapters, there are three needs that are worthy of discussion:

a. Establish a presence of reliable and accessible taxi cabs in all of our communities. Because cabs are a for profit business, transportation planners have little voice in compelling them to offer service. Where possible, the region (SEARP&DC) should work with aspiring or established cab companies and with local municipalities to investigate creating a business friendly environment for cab companies to offer service within these communities. It must be understood that available transportation does not always equate to inexpensive transportation. Many of our citizens do not use cabs because of the cost associated with this service. That is beyond the scope of this analysis. This study attempts to identify opportunities rather than direct outcomes.

b. Establish feeder routes that work in concert with Greyhound to reestablish connectivity for our isolated communities to the Greyhound network. Several years ago Greyhound abandoned many of its under-performing rural routes. Under the provisions of Section 5311(b) [intercity transportation], there is an opportunity to work with Greyhound to resurrect some of these routes and rebuild these connectors.
c. In conjunction with the Medicaid, Veteran’s Administration, DHR, the DAV, and other local health care providers explore opportunities to provide fully accessible transportation to individuals to specialty and specialist health care venues in locations such as Tuskegee, Montgomery, Birmingham, Mobile and even potentially Columbus and Atlanta.
Chapter 4
Needs Assessment

The Region (and those communities and citizens) served by the Southeast Alabama Regional Planning & Development Commission clearly needs additional transit service and resources. Within Coffee, Dale, Geneva and Henry counties those needs are modest (at least initially). Some framework needs to be established and resources identified so that some level of transit service (beyond that provided by Sec 5316 [JARC]) can be extended to their populations.

Within Covington and Barbour counties, additional resources need to be identified to expand service to those under served portions of the population. Within Houston County and the City of Dothan resources exist. This system must strive for greater efficiencies and seek means to better utilize existing resources. This is not to say that additional resources are not needed by Dothan and Houston County. Rather, it acknowledges that in a resource constrained environment there are enough resources, currently, to “get by”.

Section 5310 providers exist throughout the region. Most of their efforts are “stove piped” to provide services only for their specific supported populations. This is, in large part, a by product of the manner in which these agencies are funded and the lack of any operating funds for these organizations. While all of these organizations represent a significant pool of capital resources for expanded transportation services, the lack of any viable or reliable funding mechanism to address operational costs mitigates against utilizing these assets to provide general public transportation services.

Throughout the region, Mobility Management does not exist as a formal process. Given the paucity of resources and the scarcity of transportation providers, this has not been of particular concern within the region. In the absence of any brokerage arrangements, this “management” function is a predominantly internal process that occurs within each transit system and is a function of day-to-day and operational coordination with local consumers, resources and agencies. Funding is available for Mobility Management (Mobility Managers) through the Section 5316 program. Programmatically, this is considered a capital expense and federal funds are available to cover 80% of the costs associated with this activity. There is a requirement that the local community provide the 20% local match.

As this study has identified the “need” for transit services within the region, it has developed a series of issues that, if resolved, would assist in filling the void identified by these needs. All of the needs/issues identified in this matrix are subsets of the strategies identified in Chapter 5 of this plan. These issues (in no particular order of priority) are listed below.

<table>
<thead>
<tr>
<th>Issue:</th>
<th>Lack of state funding</th>
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<tbody>
<tr>
<td>Needed/Proposed Action:</td>
<td>Some form or source of state funds dedicated to transit operations</td>
</tr>
<tr>
<td>Affected Counties:</td>
<td>All</td>
</tr>
</tbody>
</table>
Discussion: The State of Alabama has a Constitutional prohibition on the use of gas tax dollars for anything other than “roads & bridges”. Consequently, no gas tax money may be spent on public transportation. Because of competing demands for general fund dollars, the likelihood of state funding from the general fund is virtually nonexistent. This lack of state funding places a real burden on local government to fund public transportation. It also has the effect of limiting growth and innovation within our existing public transportation systems. Expansion of new transit systems is similarly limited. There has been almost no interest or political will to identify a dedicated funding source for public transportation such as a special tax or fee on some related commodity or service. Lack of state funding, coupled with the paucity of local funds discussed below creates a very stagnant, no growth environment for public transportation within the state, especially in our rural and small urban areas.

| Timeframe, Priority & Proponent Agency: | This is a political issue and requires a political decision and action. Local transit providers are virtually powerless to effect any real funding changes in the state. A champion within both the legislature and the executive branch must be found and supported. This is a very high priority if public transportation is to move to the “next” level. |
| Status: | Unresolved |

**Issue:** Lack of local match funding

| Needed/Proposed Action: | Appropriate more local match dollars from local government or find additional funding from local governmental agencies |
| Affected Counties: | All – especially Dale, Coffee, Covington, Geneva, Henry, Barbour |
| Discussion: | Operating funds for all FTA grant programs require 50% local match. Capital funds require 20% local match. Without cash match, transit providers cannot access all of their federal dollars. Local contract revenues may be used to offset local match. It is beneficial to expand local contracting opportunities to use these types of dollars. |
| Timeframe, Priority & Proponent Agency: | Predominantly a political decision. The local community must be committed to the idea of investing in transit in their communities and... |
must perceive a value for doing so.

<table>
<thead>
<tr>
<th>Issue:</th>
<th>Lack of full financial participation in public transportation by State of Alabama Medicaid Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Needed/Proposed Action:</td>
<td>Medicaid pay allocated rate for nonemergency medical transportation rather than the current fare box rate</td>
</tr>
<tr>
<td>Affected Counties:</td>
<td>All – statewide</td>
</tr>
<tr>
<td>Discussion:</td>
<td>Alabama Medicaid is the only state agency that does not reimburse public transportation providers at their allocated costs rate for nonemergency medical transportation. Medicaid also does not enter into vendor arrangements with transit providers for the provision of these services. Every other state agency that contracts for transportation pays either the fully allocated or a negotiated rate. Instead Medicaid insists on paying only the fare box rate for this transportation while concurrently having very high expectations of highly tailored and responsive service. This is most notable in the reimbursement of dialysis transportation costs. The net effect of this policy is that very scarce local dollars are used to subsidize these Medicaid trips. This diminishes the local dollars available to support the general public.</td>
</tr>
<tr>
<td>Timeframe, Priority &amp; Proponent Agency:</td>
<td>This is a bureaucratic and political issue. Someone in the executive branch needs to direct that Medicaid pay their fair share. This is a high priority issue.</td>
</tr>
<tr>
<td>Status:</td>
<td>Unchanged</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Issue:</th>
<th>Limited service hours (no night, evening or early morning service)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Needed/Proposed</td>
<td>Expand hours of service</td>
</tr>
<tr>
<td>Action:</td>
<td>Affected Counties: Houston, Barbour, Covington</td>
</tr>
<tr>
<td>---------</td>
<td>-----------------------------------------------</td>
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</tbody>
</table>

**Discussion:** This is very difficult to do without additional funding as discussed above. Every hour a bus is on the road/in service costs approximately $35 to $40. To expand service hours requires an additional expenditure of funds and a requirement for additional revenue streams to offset these costs. Additionally, dispatch and management capabilities must be expanded to cover these additional hours. This also has an additive cost.

**Timeframe, Priority & Proponent Agency:** Predominantly a political decision. The local community must be committed to the idea of investing in transit in their communities and must perceive a value for doing so.

**Status:** This issue has been slightly relieved by the provision of JARC service within Houston, Henry, Geneva, Dale and Coffee counties. While of limited scope and with a narrow service population, this provides some service where none had existed before.

<table>
<thead>
<tr>
<th>Issue:</th>
<th><strong>Limited service days (no weekend service)</strong></th>
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<table>
<thead>
<tr>
<th>Needed/Proposed Action:</th>
<th>Add additional service days</th>
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<table>
<thead>
<tr>
<th>Affected Counties:</th>
<th>Houston, Barbour, Covington</th>
</tr>
</thead>
</table>

**Discussion:** This is very difficult to do without additional funding as discussed above. Every hour a bus is on the road/in service costs approximately $35.00 - $40.00. To expand days of service requires an additional expenditure of funds and a requirement for additional revenue streams to offset these costs. Additionally, dispatch and management capabilities must be expanded to cover these additional days. This also has an additive cost.

**Timeframe, Priority & Proponent Agency:** Predominantly a political decision. The local community must be committed to the idea of investing in transit in their communities and must perceive a value for doing so.

**Status:**
This issue has been slightly relieved by the provision of JARC service within Houston, Henry, Geneva, Dale and Coffee counties. While of limited scope and with a narrow service population, this provides service where none had existed before.

<table>
<thead>
<tr>
<th>Issue:</th>
<th>Inefficient usage of existing busses and routes.</th>
</tr>
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<tbody>
<tr>
<td>Needed/Proposed Action:</td>
<td>Increase ridership and sharing of assets and resources between all of the various local providers</td>
</tr>
<tr>
<td>Affected Counties:</td>
<td>Houston, Barbour, Covington</td>
</tr>
<tr>
<td>Discussion:</td>
<td>Demand Response (DR) is, by its very nature, highly inefficient. Optimizing scheduling processes and procedures (scheduling software) and greater liaison between various providers may allow some success on this item. Passengers who consistently schedule and then do not ride or who cancel at the last minute add to this inefficiency.</td>
</tr>
<tr>
<td>Timeframe, Priority &amp; Proponent Agency:</td>
<td>This is a high priority and is at least partially achievable by increased coordination and communications between transit provider, service agencies and other transportation providers. A state sponsored acquisition of very good dynamic scheduling software would also greatly enhance this solution.</td>
</tr>
<tr>
<td>Status:</td>
<td>Unchanged except in Houston County. Procurement of scheduling software has increased scheduling efficiencies and has created additional opportunities for persons to schedule rides.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Issue:</th>
<th>Limited or no same day service for Demand Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Needed/Proposed Action:</td>
<td>Allow same day scheduling for Demand Response riders</td>
</tr>
<tr>
<td>Affected Counties:</td>
<td>Houston, Barbour, Covington</td>
</tr>
</tbody>
</table>
| Discussion: | a. Transit providers look at processes that will allow them to dispatch vehicles on a same day basis given availability.  
b. Explore charging a premium for this service so that it does not |
become abused.

c. Review existing agreements with other agencies to optimize use of all assets and resources.

| Timeframe, Priority & Proponent Agency: | Medium priority. All involved individuals will need to work together to clearly communicate capabilities and limitations. 

Again, good dynamic scheduling software could aid this process. Dothan/Houston county (wiregrass Transit Authority) has fielded Route Match software and is experiencing some improvements and efficiencies. |
<table>
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<tbody>
<tr>
<td>Status:</td>
<td>Unchanged, very difficult to do with existing resources and funding</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Issue:</th>
<th>Unrealistic expectations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Needed/Proposed Action:</td>
<td>Better understanding of transit capabilities and limitations by the public. Better understanding of public needs by the transit agency.</td>
</tr>
<tr>
<td>Affected Counties:</td>
<td>Houston, Barbour, Covington</td>
</tr>
</tbody>
</table>
| Discussion:                     | Both sides of the equation have, at times, skewed views and expectations of the other. For example, transit operators are constantly confronted with several major misperceptions:

1. Limousine service
2. Immediately responsive to any and all needs
3. Disabled individuals receive extraordinary consideration and accommodation.
4. Service is free
5. Health care providers assume that transit exists solely for the benefit of their patients and that their patients should receive an absolute priority

Many riders do not understand operational limitations on the service offered or differences such as:

1. curb to curb
2. door to door
3. door through door

Many social service agencies share these same misperceptions as some of the riders. |
Transit providers also share some misperceptions. Typically, many providers have an incomplete understanding of what constitutes an appropriate or reasonable accommodation. They also, on occasion, lose patience with certain “difficult” passengers.

Providers sometimes fail to exercise sufficient flexibility when dealing with passengers of lesser capacity, patience or understanding.

**Timeframe, Priority & Proponent Agency:**
This is a medium priority issue. The resolution to which is continuous and ongoing. Transit systems and consumers must communicate often and completely with each other in order to overcome any misunderstandings or ambiguities that may exist. Both sides must accept the reality that they must be flexible and that accommodation, in both directions, will become the hallmark of success.

**Status:**
Ongoing struggle to communicate effectively

<table>
<thead>
<tr>
<th>Issue:</th>
<th>No public transportation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Needed/Proposed Action:</td>
<td>Either establish or expand public transportation services into the counties where no service currently exists</td>
</tr>
<tr>
<td>Affected Counties:</td>
<td>Barbour, Dale, Henry, Coffee, Geneva</td>
</tr>
<tr>
<td>Discussion:</td>
<td>With the exception of Barbour County, none of these counties have any public transportation services. Barbour County has a limited service within the City of Eufaula. We have seen steady increases in the need for these types of services within these counties. Federal dollars are available, but require local matching funds. The “hard nut to crack” has always been the availability of local funds to match federal dollars. Senior Center vehicles offer an excellent nucleus of resources to begin slowly and deliberately expanding service into these counties. The issue remains one of operating dollars and the match for federal operating funds.</td>
</tr>
<tr>
<td>Timeframe, Priority &amp; Proponent Agency:</td>
<td>County Commissions &amp; SEARP&amp;DC along with SARCOA.</td>
</tr>
</tbody>
</table>
Given the expertise and resources available within these agencies, they provide a real resource to the county commissions should they commit to identifying and committing the necessary local funds.

| Status: | Henry, Coffee, Geneva and Dale have joined the Wiregrass Transit Authority network based in Houston County and are now providing JARC and some New Freedom service. “Normal” transit service is still not provided in these four counties. |

| Issue: | Expand JARC |
|        | {This issue is basically resolved with the exception of Barbour and Covington County} |

| Needed/Proposed Action: | Allow existing providers of JARC services to expand service to surrounding counties where practicable. |

| Affected Counties: | All |

| Discussion: | JARC currently operates only in counties with existing public transportation systems. Some systems utilizing third party contracting have the ability to expand into surrounding counties (where no service provider exists). Given the concurrence of the affected county and its local DHR, these JARC services have been expanded. Especially those that are matched with DHR funds. Given the finite nature of DHR provided matching funds, it is essential that all involved parties identify additional partners that can provide the requisite match to expand this program and to serve additional segments of the population. Given the pending transportation reauthorization bill within the Congress, the future of JARC is uncertain until such time as this legislation is passed and the contents are known. |

| Timeframe, Priority & Proponent Agency: | This is an issue of high importance that should be addressed immediately. |

| Status: | JARC now provides service in Houston, Geneva, Dale, Henry and Coffee counties and is slowly gaining traction and providing |
increased employment and training opportunities for qualified individuals.

DHR match with TANF funding has stabilized

This is a mature and highly functioning program

There is no need to carry this issue forward in subsequent revisions of this plan unless the situation with this program drastically changes.

<table>
<thead>
<tr>
<th><strong>Issue:</strong></th>
<th><strong>Lack of a quantitative analytical tool or instrument to accurately quantify and assess need within the state</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Needed/Proposed Action:</strong></td>
<td>Develop/Procure/Distribute an appropriate user friendly analytical instrument for use by transit providers, local government, ALDOT, other state agencies and social service providers</td>
</tr>
<tr>
<td><strong>Affected Counties:</strong></td>
<td>All</td>
</tr>
<tr>
<td><strong>Discussion:</strong></td>
<td>In order to accurately quantify the need for transit services as well as to quantify the impact to the local community that transit services can provide, a viable, user friendly quantitative analysis tool must be developed or procured that will allow local leaders and agencies to analyze the needs within their areas of cognizance. This tool must be procured so as to be available to any agency or unit of government within the state that desires to use it. This would be an excellent candidate for development by an institution of higher learning with all of the work product then being the property of the state.</td>
</tr>
<tr>
<td><strong>Timeframe, Priority &amp; Proponent Agency:</strong></td>
<td>This is medium to high priority and should be accomplished as soon as an appropriate funding stream can be identified. Lead could easily be taken by UTCA in the College of Civil Engineering at the University of Alabama.</td>
</tr>
<tr>
<td><strong>Status:</strong></td>
<td>Unchanged</td>
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</table>

| **Issue:** | **Insufficient or no information technologies to facilitate the scheduling and dispatch of transit vehicles and other** |
Transportation Resources

{Wiregrass Transit Authority in Dothan has subsequently procured scheduling and dispatching software as well as Mobile Data Terminals and AVL systems for all of its vehicles to resolve a portion of this issue. Covington and Barbour Counties are still dependent on manual solutions as are all 5310 providers.}

<table>
<thead>
<tr>
<th>Needed/Proposed Action:</th>
<th>Procure a statewide, interactive, relational database Scheduling software package that is capable of “handling” automated vehicle locator (AVL) systems. Procure training and software maintenance and upgrade as part of the total package.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affected Counties:</td>
<td>All (with priority to Covington and Barbour counties)</td>
</tr>
<tr>
<td>Discussion:</td>
<td>In order to facilitate coordination of transit assets throughout the regions and, potentially, across the state, ALDOT should take the lead and procure a scheduling and dispatching software package that is user friendly, robust and adaptable. For purposes of example only, Route Match and Trapeze are two industry leaders. This approach has been successfully taken in South Carolina. Because several transit systems have undertaken this project locally, any state initiative must also guarantee that interfaces exist so that all systems can communicate with each other and can exchange data.</td>
</tr>
<tr>
<td>Timeframe, Priority &amp; Proponent Agency:</td>
<td>This is a low priority item with resolution resting predominately with ALDOT. Current budget issues preordain that funding will not be available at the state level to conduct a state-wide implementation.</td>
</tr>
<tr>
<td>Status:</td>
<td>Wiregrass Transit Authority in Dothan has subsequently procured scheduling and dispatching software as well as MDTs and AVLs to resolve a portion of this issue. Covington and Barbour Counties are still dependent on manual solutions.</td>
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Issue: No regional approach to public transportation

<table>
<thead>
<tr>
<th>Needed/Proposed Action:</th>
<th>In conjunction with the MPO and RPO conduct a study and develop recommendations for various regional solutions within southeast Alabama.</th>
</tr>
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<tbody>
<tr>
<td>Affected Counties:</td>
<td>All</td>
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</table>
| Discussion: | Currently, planning for public transportation within the region is done in a piece meal fashion within each of the counties and municipalities. A consolidate approach using methodology that would encompass the entire region would allow for optimum use of existing resources, the most efficient use of existing and planned assets and a potentially more user friendly travel environment for our citizens.

Options to be reviewed and studied should include (but not be limited to):

a. Fixed route service within the greater Dothan metropolitan area
b. Deviated corridor routes originating in Dothan and serving major population centers in each county
c. Consolidation of all publicly funded transportation resources under a single entity to provide service for the entire region. |
| Timeframe, Priority & Proponent Agency: | This is a long range/long term project. It will require significant planning dollars to accomplish and implementation of whatever findings are developed will require a stable source of local funding.

Implementation of this project is contingent upon a political decision by all of the governmental bodies within the region. |
| Status: | Dothan MPO has recently concluded a study on the feasibility of providing fixed route service within the Dothan Metropolitan area.

One of the challenges was to provide fixed route service without degrading the current demand response service offered in the outlying areas of the city and within Houston County. This study has been presented to the Dothan city Commission. Based on an analysis of demand and the resources required to implement a fixed route service, the Dothan City Commission determined that the cost of such a system outweighed those perceived benefits of such service.

Under the umbrella of the RPO process, discussions of regional transportation solutions have also been instigated. |
<p>| Issue: | Limited access and transportation opportunities exist for various target groups (elderly, disabled, economically disadvantaged, at risk youth) attempting to access and utilize various social service delivery agencies, job training and education facilities, |</p>
<table>
<thead>
<tr>
<th><strong>nontraditional educational opportunities, “latch-key” programs, rehabilitation opportunities, etc.</strong></th>
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</table>
| **Needed/Proposed Action:**
| Local transit systems and transportation service providers must coordinate with local agencies and advocacy groups to optimize access/transportation opportunities for the clients that they serve.

Existing providers must also take advantage of every opportunity to incrementally and selectively expand this service into contiguous counties where the need exists.

Review feasibility of Sec 5316 and Sec 5317 programs to support some of these transportation needs.

Implement Sec 5316 and Sec 5317 in counties that show a willingness to participate and where partners can be found.

| **Affected Counties:**
| All, with priority to Barbour, Covington and Houston counties.

Focus on service expansion in Dale, Coffee, Henry and Geneva counties.

| **Discussion:**
| County DHRs, local GED training facilities, job training workshops and regional agencies such as (but not limited to) Wiregrass Rehabilitation Center, Inc., The Vaughn Blumberg Center, Vivian B. Adams School, Spectra Care, County Mental Health and Mental Retardation Boards, Boys and Girls Clubs of America (and similar local organizations), local agencies serving at risk children; all serve various categories of “in need” and “at risk” populations. There exists a constant demand for the individuals using these agencies and services to be transported from multiple and varying pick up points throughout our service areas to single, or limited, “points of service” or “nodes of opportunity”.

By utilizing existing transit resources (and other federally funded vehicles), we can optimize the use of existing resources and specifically tailor our service model to provide the specific, unique and accessible transportation support that these agencies require to perform their mission and offer their services within the various communities.

This service is best provided through a service agreement/contract with each of these agencies for the specific level of service that their clients require.
Alternatively, where these agencies have some transportation resources, it may be appropriate to enter into purchase of service agreements with them to provide otherwise unavailable transportation services to the individuals for which they have proponency.

**Timeframe, Priority & Proponent Agency:**

This is a high and ongoing priority and should be accomplished immediately. Transit systems have the lead, but must partner with their respective local social service agencies.

Transportation budgets must be carefully evaluated at each of these local agencies to ensure optimum delivery of service.

**Status:**

Fairly robust within Houston County. Functional within Covington and Barbour counties.

Dale, Coffee, Henry and Geneva counties are woefully underserved and show no immediate promise of relief.

JARC has been implemented in Dale, Coffee, Geneva, Houston and Henry counties with significant effect.

**Issue:**

Limited access to “out of region” or “out of service area” health care facilities for “fragile” and “at risk” populations and aging, disabled or wounded veterans

**Needed/Proposed Action:**

Transit providers, in coordination with local health care providers must identify and safely transport nonemergency patients from their home areas to regional health care providers in areas such as (but not limited to) Birmingham (UAB & VA), Montgomery, Mobile, Dothan and Tuskegee (VA Hospital)

This service should also be extended to rural dialysis patients requiring transportation to Dialysis Centers in more populated areas.

**Affected Counties:**

All

**Discussion:**

Our aging population, with their associated health problems and with advances in health care, has created a dilemma. They are living longer with more health care issues. This dilemma has created a significant need for access to these regional facilities by many of our more fragile citizens. Additionally, Korean War, Persian Gulf, Cold War and Iraqi Freedom Veterans, as well as surviving WWII veterans, have significant requirements to access VA medical
facilities at the VA regional facilities within the state.

The artificial constraints of geography and political boundaries should not limit access for these individuals, most especially when one considers that all transportation is provided intrastate.

In conjunction with health care providers, advocacy groups and veteran’s organizations, local transit providers should be able to tailor specific levels of service to provide healthcare access and transportation to these individuals without fear of consequence or censure.

ALDOT should craft a blanket exemption or protocol for services of this specific nature that are provided outside of the traditional and grant approved service areas for local transit providers.

Though tailored around the needs of these fragile populations, this service would be open door and available to any individual requiring transportation to a health care facility in these locales.

It is envisioned that VA and Medicaid would be significant “players” in this service model and would provide much of the requisite “purchase of service” funding for these trips.

Given the recent demise of many rural Greyhound routes throughout the state, this need becomes even more critical.

Timeframe, Priority & Proponent Agency:

This is a high priority. It should be implemented immediately and limited only by the availability of resources within the various transit systems to provide this service.

Local transit systems, ALDOT and health care/advocacy groups have a shared responsibility for implementation.

Status: Ongoing and still unresolved

<table>
<thead>
<tr>
<th>Issue:</th>
<th>Increased operating costs (fuel, personnel, insurance)</th>
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<tbody>
<tr>
<td>Needed/Proposed Action:</td>
<td>Operating costs must be controlled while continuing to offer the same level of or even more service.</td>
</tr>
<tr>
<td>Affected Counties:</td>
<td>All</td>
</tr>
<tr>
<td>Discussion:</td>
<td>Recent rise in fuel costs, increases in insurance premiums and the 40% increase in minimum wage have all had a significant impact on the ability of transit operators to continue their levels of service unabated. This rise in prices has increased demand for transit services while at the same time making the provision of these services more difficult. Allocated costs are escalating and the agencies with whom transit providers contract are finding it more and more difficult to afford essential transportation services. This creates the very real problem of potentially reduced revenue and cash flow while attempting to cover ever increasing costs.</td>
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<tr>
<td>Timeframe, Priority &amp; Proponent Agency:</td>
<td>This must be addressed immediately and is of the highest priority</td>
</tr>
<tr>
<td>Status:</td>
<td>Unresolved</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th><strong>Issue:</strong></th>
<th><strong>Mobility Management</strong></th>
</tr>
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<tbody>
<tr>
<td><strong>Needed/Proposed Action:</strong></td>
<td>A regional assessment should be made to identify those opportunities to implement a functional and formal mobility management process</td>
</tr>
<tr>
<td><strong>Affected Counties:</strong></td>
<td>All</td>
</tr>
<tr>
<td><strong>Discussion:</strong></td>
<td>Throughout the region, Mobility Management does not exist as a formal process. Given the paucity of resources and the scarcity of transportation providers, this has not been of particular concern within the region. In the absence of any brokerage arrangements, this “management” function is a predominantly internal process that occurs within each transit system and is a function of day-to-day and operational coordination with local consumers, resources and agencies.</td>
</tr>
<tr>
<td><strong>Timeframe, Priority &amp; Proponent Agency:</strong></td>
<td>This is a low priority task that will be accomplished over time as each agency reviews and evaluates their need to coordinate, optimize and facilitate transportation needs and resources</td>
</tr>
<tr>
<td><strong>Status:</strong></td>
<td>Ongoing and still unresolved</td>
</tr>
</tbody>
</table>
As can be inferred from a review of the various issues and needs detailed above, most of the issues within this region are fairly universal in nature and are primarily driven by resource availability or more critically by a lack of resources. Those social and political issues listed above defy solution at the system and local level but are offered to provide a more complete picture of the day to day environment in which coordination and transportation must occur within the region.
Chapter 5
Strategies and Recommendations

It is clear from an analysis of input received as a result of the stakeholders meeting and public involvement processes, as well as the demographics of the region that the issue of coordinated transportation covers almost the entire spectrum.

Clear opportunities for coordination exist, with many having been identified and implemented, throughout the region and within each county. In virtually every instance the framework for coordination already exists. Lines of communications are essentially established in each county and within the region. Where these lines of communication and coordination exist, transit providers are willing and eager to provide service; they merely lack the resources to meet these increased or special demands. Where transit systems do not exist, the communities and the agencies within them are willing to implement transit services; they simply do not have the means or the wherewithal to do so.

Based on this analysis, the following recommendations and priorities have been developed. The implementation of any of these is solely contingent upon the availability of the requisite political support, funding and resources. Not only is federal operating assistance critical but also federal capital funds to expand and modernize fleets is essential. These funds, however, are of no use unless and until stable sources of local funding can be identified to match the operating and administrative costs of the Section 5311 and Section 5307 providers. Section 5316 and Section 5317 services are also competing for these scarce local matching dollars. Key to all of this is to additionally identify operating funding for our Section 5310 vehicles located in the 38 senior centers and various other non-profit and social service agencies throughout the region.

These strategies listed below offer a framework of activities and services that, if implemented, would provide for enhanced and expanded access, mobility and transportation across the region. Additional strategies (secondary and tertiary) may be inferred from the issues discussed in chapter 4 of this Plan.

1. Establish rural public transportation systems in Coffee, Dale, Geneva and Henry Counties. This has been partially accomplished through the provision of Section 5316 service in Coffee, Dale, Geneva and Henry counties.

2. Expand/enhance the Eufaula Barbour County Transit Authority to include the entire county and to enable it to expand service and service hours.

3. Provide additional operating funds and vehicles to the Covington Area Transit System (CATS) to enable it to expand service and service hours.

4. Resource a deviated route system for Wiregrass Transit Authority that will tie the surrounding counties into Dothan. Procure sufficient busses to provide several round trips a day along the following corridors:
a. US431 N between Dothan and Eufaula (serve Headland and Abbeville as well)
b. US231 N between Dothan and Ozark (potentially extend as far north as Brundidge)
c. US84W between Dothan and Enterprise (possibly extend as far west as New Brockton)
d. US52W between Dothan and Geneva (CATS could interface in Geneva with passengers from Covington County)

The Dixie Depot will serve as the terminus for these routes.

5. In 2010 the Southeast Wiregrass MPO completed its evaluation of the need and efficacy of establishing a fixed route system within the greater Dothan Metropolitan Area. This study was completed and presented to the Dothan City Commission. Several points were generated by this study:
   a. Demographically, Dothan has the demand and the population to provide some level of support for a fixed route bus system
   b. Supporting infrastructure such as side walks, bus shelters, turnout lanes, etc. would add significant cost to this project and would have to be addressed concurrently with implementation.
   c. Fixed route service and its attendant complimentary para-transit service would require additional resources and assets beyond those already operated by Wiregrass Transit Authority.
   d. The cost to implement fixed route service was not warranted based on an analysis of the benefits that it would provide and the number of riders that would use the system.
   e. The study remains “active” as a planning document but the implementation of fixed route service in Dothan has been determined to be too large of a financial burden at this particular juncture.

6. As a joint project between the Southeast Wiregrass MPO and the Regional Planning Organization located within the Southeast Alabama Regional Planning & Development Commission conduct a study evaluating the need and efficacy of establishing a regional transportation system that will serve the entire region and serve as the broker for all publicly funded transportation assets within the region.

7. Across the region, increase/expand access and transportation opportunities for various target groups (elderly, disabled, economically disadvantaged, at risk youth) attempting to access and utilize various social service delivery agencies, job training and education facilities, nontraditional educational opportunities, “latch-key” programs, rehabilitation opportunities, etc.

8. Across the region, increase/expand/provide access to “out of region” or “out of service area” health care facilities for “fragile” and “at risk” populations and aging, disabled or wounded veterans.
9. Continuously monitor the needs addressed in Chapter 4 of this plan and determine if and when incremental changes can be implemented that will allow for greater access to public and social service transportation for our citizens as well as greater flexibilities and resources for our transit and transportation providers.

10. Work with local and regional 5310 and social service providers to sustain, and where possible expand, their existing transportation capabilities. Until such time as many of the needs addressed in Chapter 4 of this plan are addressed, these agencies must be able to maintain and sustain at least a modicum of service for their supported populations. Should a regional transportation system grow from these efforts then the assets and resources controlled by these various 5310 and social service providers will/could provide a foundation for and an instant influx of transportation resources to support the region.

11. Much has been made of the concept of Mobility Managers and Mobility Management. Based on this Regions understanding of the concept (after extensive research) this concept is not currently well suited for this region. Mobility Management is a viable and worthwhile undertaking is an area where there is a transportation brokerage or where there are multiple providers whose services are best optimized by a single entity. None of these conditions exist within this region. Transit systems and scattered transportation providers continue to coordinate directly and work closely with groups and agencies requiring their services. Some “stove piping” continues to exist. This is primarily evident where agencies own their own resources and provide service only to their consumers. Absent some form of viable revenue stream for these agencies to provide additional services, this phenomenon will continue and would probably be unaffected by a mobility management structure. Should the “landscape” change and either brokerage or multiple providers begin to proliferate, then this operational concept may have utility. Until that occurs, however, mobility management would consume more resources than it would generate transportation opportunities.

As we developed this update, one stark economic reality continued to surface. Recent economic conditions have caused operating costs to increase dramatically. The primary causes for this are increased fuel costs, increased insurance premiums and increases in personnel costs. Additionally, local communities are more and more challenged to identify and collect general fund revenues. As existing transit providers and transit systems are asked to provide more and more service, it becomes increasingly difficult without additional financial resources. This particular dynamic will require some very difficult business decisions over time. The bottom line is that additional revenue must be found or services will be curtailed. This certainly adds to an already gloomy picture. To further exacerbate this financial outlook, the current world wide economic situation has affected our local governments. Tax revenues are “down” at both the state and local levels. Deficit spending at the federal level has become a significant and divisive political issue. What was perceived as an undesirable and untenable financial status quo two years ago may be fondly remembered as a financial “good time”. All transit systems will be seriously challenged to exploit all funding opportunities that present themselves. We would hope that an opportunity will arise that will allow transit providers to work with ALDOT to review current processes and practices and identify areas where change may be implemented in
order to optimize these decreasing dollars. Reauthorization will shape the future for our smaller systems. We must see what trends in funding and political support develop for the next decade for our smaller systems. Whatever the future brings, it is highly unlikely that increased federal funding will occur. Consequently, all involved and interested agencies must look inward, develop new local relationships and make every effort to optimize existing resources.
In those counties and cities within our region where public transportation systems do not exist, most other forms of reliable and accessible transportation are generally not available either. This is an extraordinarily difficult problem to solve. It requires a significant investment in political will and long term stable financial resources by local government. While the will (or desire) may well exist, the financial reality is that many of our rural, agrarian counties do not have the financial resources to meet the match requirements to implement transit service. In our more sparsely populated counties, opportunities for contract revenue from local social service agencies are also extremely limited.

No discussion of public transportation in the region is complete or honest without some mention of prevailing stereotypes and misconceptions. The existence of these stereotypes does not bode well for transit providers. In a world of limited budgets and constrained spending, citizens across the region must be convinced that they are receiving value for money for programs funded with tax payer dollars. The existence and perpetuation of these stereotypes undermines that local support which is essential for the future of transit. In no particular order, some of the more blatant are listed below. Please note that none of these widely held misconceptions are true:

a. *Transit is the – welfare bus, disabled bus, old folk’s bus, mentally retarded bus:* This is blatantly untrue. Transit providers are Public Transportation and their doors are open to all. The reality in an automobile centric society is that few people with cars ride the bus. This, however, is a matter of personal choice not policy or program design.

b. *Transit is a social service delivery system:* Again untrue. Transit is an integral part of the transportation infrastructure. Transit is not, as alleged by some, the “enemy” of roads and bridges. Not a single transit bus is an all terrain vehicles nor do they have 4-wheel drive. They are not amphibious either. Transit Providers desperately need the best possible roads and bridges to be able to operate their vehicles safely and efficiently. The “elephant in the room” is the hard fact that the WWII generation and their children (the Baby Boomers) are both reaching ages where their requirements for transportation infrastructure are changing. Just as they expected the transportation infrastructure to provide them the means to travel efficiently in the past, they expect it to continue to provide the same access. The difference is that the required/desired means of access is drastically shifting as they get older and can no longer drive. Public transit provides that access.

c. *“They” ride the bus – “We” don’t:* This is pernicious. I have no idea who we or they are. I do know that this type of social commentary is all too prevalent in discussions of public transportation.

d. *Transit has limited value to the community – It is a financial drain:* This is the great lie. Not only does public transportation provide needed and necessary services within their communities but they are by their very nature small businesses. With budgets ranging from a few hundred thousand to several million dollars, public transportation providers...
employ people, buy local goods and services and return significant dollars (directly and indirectly) to their communities. By getting people to jobs they help them become taxpayers. By getting people to routine outpatient healthcare, transit contributes significantly to lessening health care costs. By providing transportation to quality of life destinations, transit allows individuals to spend money with local retailers.

This Plan recognizes that transportation (a lack there of) can be a major obstacle for people with disabilities, older adults, children and youth, and other at risk populations that need various quality of life, social and health services. This lack/dirth/shortage of transportation also has a limiting effect on access and mobility for certain portions of the general population. Interagency partnerships are essential to increase coordination and collaboration among transit, human services transportation and mobility services providers. While we address implementing/improving/enhancing these interagency partnerships, this should not be construed as a statement that they do not currently exist. While there may not be stylized, formal processes or coordination activities, these actions occur on a daily basis across the region. Given the intimate nature of the service offered by the transit systems within our region, one-on-one and agency-to-agency coordination occurs on a continuous and an almost daily basis. One should not assume that the lack of a structured environment suggests a lack of communications and coordination. In fact, this daily coordination and communication is the framework for the mobility management functions that do occur within the region. It is neither formal nor fancy, it just works to the best of the involved parties abilities.

It is also important that service providers continue to coordinate and collaborate with funding and planning agencies and with special needs populations and organizations. Coordination and collaboration are central considerations to any recommendations and strategies. In response to the need for coordination and collaboration, and in recognition of the planning area’s large geographic range and specific demographics, this Plan’s recommendations and strategies are broad in scope. This is intended to allow agencies flexibility for funding and provide creativity in suggesting programs and services. The Plan’s primary strategies and recommendations are discussed in chapter 5 of this plan. By inference, one may assume that the resolution of specific issues identified in Chapter 4 of this plan are secondary or tertiary strategies to achieve more limited objectives.

We recognize that this is a dynamic document. As the political landscape, at all levels, changes; as new laws are enacted; as resources become either available or unavailable; or as other variables change; the findings in this study may change and evolve. We also recognize that transportation and the coordination for transportation has an impact on many segments of our society and population across the region. Each of these elements has a different perspective on the problem and potentially different ideas on how to improve or enhance that which is currently in place. This agency would encourage any interested or involved citizen, agency, group or entity to provide comments as they see fit. These comments will be evaluated, assessed, prioritized, incorporated in future updates to this plan and implemented where possible or feasible. Where incorporation or implementation are not feasible, those factors mitigating against this will be discussed and highlighted.
The cooperative effort that resulted in this Human Services Coordinated Transportation Plan will guide the future of human services transportation and public transportation programs and planning within this Region, both at the MPO and RPO levels. It is hoped and anticipated that this plan’s strategies and recommendations will:

a. Help ensure that transportation services are consumer-driven, and that consumers are afforded every opportunity to be included in the planning, development, implementation and evaluation of human service transportation;

b. Guide the coordination and cooperation between private and public transportation providers, human service agencies, consumers, and others to improve the efficiency and quality of service provision;

c. Improve coordination and planning at the administrative and organizational level among different agencies, organizations, and stakeholders;

d. Allow existing providers to continue to maintain, upgrade and replace their fleets until such time as a fully integrated regional service is implemented;

e. Continue to evaluate means and methods to implement regional transportation services;

f. Improve effectiveness, efficiency, and accountability; and

g. Help automate or simplify administrative processes and procedures.
Southeast Alabama Regional Planning & Development Commission

Resolution Number ____________

WHEREAS, the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU) requires the development of a coordinated human services transportation plan in order to be eligible for Section 5310 (Elderly Individuals and Individuals with Disabilities), Section 5316 (Job Access and Reverse Commute), and Section 5317 (New Freedom) funds, and

WHEREAS, the Southeast Alabama Regional Planning & Development Commission in cooperation with the Alabama Association of Regional Councils and the Alabama Department of Transportation developed the Human Services Coordinated Transportation Plan for Southeast Alabama, and

WHEREAS, the Board of the Southeast Alabama Regional Planning & Development Commission has reviewed the plan and have passed recommendations in support of adopting the plan,

NOW THEREFORE BE IT RESOLVED, this 22nd day of September 2011, that the Southeast Alabama Regional Planning & Development Commission does hereby adopt the Human Services Coordinated Transportation Plan for Southeast Alabama.

___________________________
Chairman

___________________________
Attest:

___________________________
Secretary
Community/Public/Stakeholder Involvement

An initial/inaugural stakeholders meeting was held on August 23, 2006 at the Wiregrass Rehabilitation Center in Dothan, Alabama to gather initial public input from which to base the original plan. Attendees came from across the region and represented state, county and local governments, social service providers, health care and mental health care providers, consumer advocates, and consumer groups. Virtually every issue and challenge identified and addressed five years ago remains viable today.

Subsequent to that initial effort, this Commission has attempted to use a variety of different venues to increase both the ease of public involvement as well as the quality of the input provided by the public. Historically, formal public meetings are not well attended and serve little utility except to achieve an administrative or bureaucratic requirement. In an attempt to reverse this historic trend we have attempted to use a more robust, dynamic, innovative and reliable data collection and feedback process. The more significant efforts are listed below:

1. **Rural Planning Organization (RPO)** – SEARP&DC has proponency for this effort within our seven county region. Under the aegis of this ALDOT sponsored activity we have actively and consistently participated in the RPO and have used this forum to both advise interested parties of ongoing activities and to solicit member identified problem areas as well as inputs and recommendations for their desired outcomes.

   The RPO began including discussions regarding the update to the Human Services Coordinated Transportation Plan during Fiscal Year 2010 in Policy and Technical committee meetings. In Fiscal Year 2011, discussion and solicitation of comments concerning the update to the Human Services Coordinated Transportation Plan continued through two semi-annual meetings in each regional county, as part of discussions about rural transportation issues, as well as two meetings with the Policy and Technical committees of the RPO. All of these meetings were conducted in a public setting and advertised regionally in order to involve the public in the decision making process. Overwhelmingly, the response from participating citizens was the need for a transportation resource to support transportation disadvantaged disabled and seniors in trips to common destinations, such as physician offices and the grocery store. The lack of service for this population group is well known throughout the region.

2. **Envision** – as a sitting member of the quality of life committee of the Dothan Envision process, this Commission has constantly kept this committee informed of public and coordinated transportation activities throughout the region. We have also used this forum to solicit and process recommendations from this body. This body was the genesis of the effort to conduct the recently concluded fixed route feasibility study for the Dothan metropolitan area.
3. **SEARP&DC Board Meetings** – we have used these quarterly events to keep our board members from all 7 counties informed of activities relating to coordinated transportation and to solicit their advice and counsel. We also consistently remind them that staff is available to discuss transit related issues with them as it relates to their communities and to assist them as feasible. These venues have engendered numerous interactions, whereby ideas have been exchanged, advice has been offered, opinions have been sought and assistance has been rendered.

4. **Wiregrass Regional Summit (sponsored by Dothan Envision Effective Regionalism Task Force)** – This event was hosted at Wallace Community College on June 13, 2008. As part of this activity, two separate break-out sessions were held on public transportation and coordinated transportation. Approximately 10 – 15 participants availed themselves of this opportunity. All of the issues discussed centered around the lack of service in Dale, Coffee, Henry and Geneva counties and the limited service in Houston County as well as Covington and Barbour counties.

5. **Dothan/Houston County Association of Service Agencies** – On 1 June 2011, Manager, Wiregrass Transit Authority attended this meeting and gave a detailed presentation on the efforts of SEARP&DC to update the existing Human Services Coordinated Transportation Plan. This group represents an eclectic mix of social service providers and advocacy groups from many different agencies and covers all disciplines and strata. All attendees were invited to review the existing plan on the SEARP&DC web site and to provide comments back to either Manager, WTA or to the SEARP&DC Webmaster. A lively and wide ranging discussion occurred subsequent to this presentation. Many/all of the issues surfaced were issues that had already been identified as part of the original undertaking. SEARP&DC is a member of this organization and attends regularly. Transit related issues are regularly relayed by our attendees to Manager, Wiregrass Transit Authority. Our Commission representative acts as a conduit for information and feedback between this group and the transit system.

6. **“Backyard Fence”** – Every member of this agency’s staff interacts with innumerable individuals on a daily basis. Whether this interaction occurs in the course of normal working environments or in our daily lives; we interact with family members, with neighbors, with civic groups, with social service agencies, with health care professionals, with mental health professionals, with membership organizations, at church and at myriad other venues. Invariably one is the target for and the recipient of comments and observations as well as suggestions from these groups and individuals. Merely because the venue is nontraditional and very informal does not mean that the comments and observations received lack validity. As we receive these comments as they relate to transit and transportation coordination they are shared with the appropriate and proponent staff individual and are incorporated or considered in the preparation of this study or are “held” for inclusion in subsequent studies.
7. Public Notice - On 19 August 2011, SEARP&DC ran a public notice in the Dothan Eagle. This notice advised the general public that the draft updated plan was available for review on the SEARP&DC web site. Potential respondents were encouraged to respond electronically to Webmaster, SEARP&DC. This agency received no responses as a result of this effort.

8. Grant Applications – Every time this agency makes application for a transportation related grant we conduct a public hearing. This hearing is announced in the newspaper, data is developed and held available for the public and the meeting place is prepared and held open for that meeting. Historically, these public meetings have neither been attended nor has data been requested. This single phenomena has caused this agency to seek and develop the more innovative approaches described above.

We have had two interrelated events that have borne out the efficacy of the overall approach outlined above. As a result of citizen input through a survey sponsored by Envision, public transportation and the lack of transportation was identified as the top area of concern in the community (Dothan). Consequently, the Dothan City Commission charged the Wiregrass Area MPO, in conjunction with Wiregrass Transit Authority, to perform a study on the applicability and feasibility of fixed route service in Dothan. At about the same time a concerned group of citizens presented a petition to the Dothan City Commission requesting their support for increased/enhanced public transportation. This was widely interpreted to be a solicitation for fixed route service. As a result of this citizen involvement a feasibility study for fixed route public transportation service was conducted, completed and presented to the Dothan City Commission. While determined to be feasible, the costs associated with establishing a fixed route system were considered more than our political leadership wanted to assume given current economic circumstances. A decision was made to “table” the study until such time as adequate funding for this undertaking could be identified.

This agency has also maintained close and routine liaison and communications with the original group of stakeholders. Many of these stakeholders perform multiple functions as stakeholders, consumers, advocates and providers. These we have especially cultivated so that the lines of communication and coordination consistently remain open. Chief among these are:

1. County DHRs and their JOBS programs
2. Wiregrass Rehabilitation Center
3. Vivian B. Adams School
4. Vaughn Blumberg Services
5. Local, Public Service Commission certified, cab companies
6. Regional Hospitals (Southeast Alabama Medical Center and Flowers Hospital)
7. Dialysis Clinics
8. Alabama Institute for the Deaf and Blind – Dothan Regional Center
9. SARCOA
10. Alabama Medicaid
11. County Health Departments
12. Mental Health providers

Through our liaison with these organizations and the various public venues that we continue to exploit, we firmly believe that we can consistently get valid inputs from the region as a whole in a timely and accurate manner.

Listed below is a synopsis and synthesis of comments received primarily from consumers / citizens and from smaller social service agencies that consume but do not provide transportation services. These comments came from all of the various venues discussed above. If we were able to “fix” or accommodate all of these issues, one can observe that the solution to some would actually cancel out the solution to others. One can infer from these comments that their resolution would be challenging and that we have received input from across the spectrum.

1. Our community/region needs a “real” transit system. This is popularly defined as a fixed route system that passes within 1 block or less of both the individual’s origin and destination point. Desired headways are generally in the 15 to 30 minute range. 24/7 service is the baseline expectation and “fare free” service is preferred.

2. Consumers of senior center services should be able to use those senior center busses for quality of life and medical appointments as well as for program purposes. As a corollary to this issue, many citizens (who do not participate in the programs offered by the senior centers) want access to the vehicles at senior centers to provide for their transportation needs, most especially medical and quality of life.

3. The bus should come when I call. Why is an advanced appointment (demand response) system necessary?

4. Drivers should function as personal attendants and physically escort individuals into the doctor’s office, help load and unload groceries, go into homes to assist passengers, etc.

5. Many consumers do not understand that transit systems are limited to their defined service areas.

6. There is a great demand/desire for immediately responsive service on nights and weekends. See 3. above.

7. For many consumers accessible and available transportation is automatically assumed to be low or no cost. The presence or availability of taxi cabs is not considered available or accessible transportation because of the costs.
8. Why don’t I have an absolute priority because I am elderly, disabled, a minority, economically disadvantaged, a veteran, on dialysis, going to the doctor, going to work, etc.?

9. Why aren’t the busses full of passengers when they operate? Why do they carry so few passengers at one time?

10. Why can’t transit pay for itself? Why are “we” paying for another “give away” program!?

11. Why does it seem that the busses only operate in certain sections of town?

12. Why won’t the transit busses come to my (or a family member’s) address? I only live a “little way” outside of the service area.

As can be inferred from this synthesis of comments, concerns and issues are far ranging across the community. While we certainly understand and appreciate the concerns expressed, we equally understand that there is no good way to resolve all of these issues. Across the region, transit providers, local agencies and this agency work diligently to address the most pressing needs, address local concerns, extract the greatest efficiencies and improve, to the best of our abilities, the transit situation within the region.