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America at a glance: How do working-age adults with travel-limiting disabilities get around?

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America at a glance: How do working-age adults with travel-limiting disabilities get around?

May 2020

SUMMARY:

• Using data from the 2017 National Household Travel Survey, we explored travel behaviors and characteristics of rural and urban people with disabilities.

• Rural people report a slightly higher rate of travel-related disability, and are also more likely to report being a driver.

• Urban people with disabilities are more likely to use other transportation options, like special transit services, reduced-fare taxi, or public transit.

• Overall, people with disabilities who are drivers report higher rates of employment and lower rates of poor health.

Introduction

People with disabilities, especially in rural areas, still report transportation as a significant barrier to full inclusion and participation in community life, nearly 30 years after the Americans with Disabilities Act was signed into law (National Council on Disability, 2015). Understanding the travel behaviors of these individuals is important for improving transportation options for people with disabilities.

We used data from the 2017 National Household Travel Survey (NHTS) to explore the travel behaviors, worker status, and health of people with disabilities.

Previous analyses have described travel behaviors based on comparisons between those with and without disabilities (e.g., Henly & Brucker, 2019). This report explores similar patterns for specific subgroups, such as those living in rural and urban places.

Rural individuals with disabilities face unique transportation challenges such as inaccessible, inadequate, inappropriate, or simply non-existent public transit. Additionally, rural residents (with and without disabilities) usually have to travel further to access services, such as Centers for Independent Living or medical appointments. This means that being able to drive can be an important element of community participation for people with disabilities living in rural areas.
Methods

The NHTS is conducted every 5 to 7 years by the Federal Highway Administration to collect information about the travel behavior of the American public. The NHTS is an address-based sample survey designed to yield an equal probability sample of households. This survey does not sample individuals who live in group housing and institutions (e.g., prisons, dormitories). The NHTS is a household survey that asks all individuals in a selected household to answer questions about a specific day (called the diary day).

The 2017 NHTS sampled 129,696 households which include 264,234 persons. Data from the NHTS are sorted into four distinct files, each representing different levels of observations: households, vehicles, persons, and trips. We used the person-level data for these analyses because it contains information about disability as well as individual travel behavior. We restricted our analyses to working aged individuals 18-64 to control for variations in travel related behaviors.

Disability

The NHTS asks respondents if they have “a condition or handicap that makes it difficult to travel outside of the home.” Individuals who indicate “yes” are regarded as having a travel-related disability (Brumbaugh, 2018).

Though disability is not a medical condition, the NHTS uses the presence of a medical condition as an indicator of disability. For the purposes of this report, we consider individuals with a travel-limiting disability as a person with a disability.

Rural

The NHTS uses the U.S. Census Bureau’s urban-rural classification system which identifies “rural” as any population, housing, or territory not included in, or surrounded by, an urbanized area (containing 50,000 or more people) or an urban cluster (containing 2,500-49,999 people).

According to this system, rural areas consist of open countryside with population densities less than 500 people per square mile and places with fewer than 2,500 people (see the USDA’s What is Rural? for more information).

Transportation

Individuals who indicate a travel-related disability are also asked about how their “medical condition” impacts their travel. For these analyses we investigated individuals who reported asking others for rides, using special transportation services (e.g., Dial-A-Ride), and using reduced-fare taxis.

The NHTS also asks respondents if they used public transit on their diary day, if they are a driver, and the number of trips they took throughout the day. For these analyses, we dichotomized the number of trips into a dummy variable creating two groups: those who traveled and those who did not.

Other Demographic Variables

The NHTS also asks respondents about their health and working status. For the health variable, people rated their health as one of the following: “excellent,” “very good,” “good,” “fair,” or “poor.” For comparisons, we only analyzed the “poor” health category.

The NHTS classifies individuals as “workers” if they are 16 or older and their primary activity in the last week was either “working” or “temporarily absent from work.”
Findings

We computed crosstabs using Pearson’s chi-squared tests to explore the travel behaviors and characteristics of people with disabilities. All reported differences are statistically significant to p < 0.001.

Disability/No Disability

Table 1 compares working age adults with and without disabilities and shows their driver status, if they took a trip, use of public transit, worker status, and self-rated health.

- **People who report a travel limiting disability are less likely to drive, less likely to take a trip, but more likely to use public transportation.**

- **Fewer people with disabilities report working.** Only 21.8% of people with disabilities report working, compared to 76.2% of people without disabilities.

- **People with disabilities also report worse health, with 19.2% reporting poor health compared to 0.5% of people without disabilities.**

Rural/Urban

We compared rural and urban residents with a travel-related disability. Overall, rural residents report a slightly higher rate of travel-related disability than urban residents (7.3% vs. 6.6%). Of those, rural people report lower rates of employment (17% vs. 23.2%) and higher rates of poor health (20.9% vs. 18.7%) than their urban counterparts. Figure 1 compares rural and urban people with disabilities in terms of their transportation use.

- **A larger proportion of people with disabilities in rural areas report being a driver.**

- **A larger proportion of urban residents with disabilities report using transportation accommodations such as asking others for rides, using special transportation services, using reduced-fare taxis, and using public transit.**

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<thead>
<tr>
<th>Table 1: People with and without disabilities, ages 18-64</th>
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<tbody>
<tr>
<td><strong>Driver</strong></td>
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<tr>
<td>Disability (n = 10,670)</td>
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<tr>
<td>No Disability (n = 146,417)</td>
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<table>
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<tr>
<th>Figure 1: Travel behaviors of people with disabilities by rural and urban, ages 18-64</th>
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<tbody>
<tr>
<td><strong>Driver</strong></td>
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<td>Urban</td>
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<td>Rural</td>
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Driver/Non-Driver

Driving a personal vehicle is how the vast majority of rural residents with a travel-related disability get around. Driving status is associated with both employment and health outcomes. Drivers report higher rates of employment than non-drivers (25.9% vs 11.6%), and lower rates of poor health (17.7% and 22.9%). Figure 2 compares drivers and non-drivers with disabilities in terms of trips and use of alternate transportation methods.

- People with disabilities who do not drive are more likely to: rely on asking others for rides, use special transportation services, use a reduced-fare taxi, or use public transit.

- People who drive are also more likely to take at least one trip during the day.

Discussion

Rural/Urban

Disability rates from the NHTS are lower than rates reported in other national surveys, especially for rural areas. For example, analyses using American Community Survey (ACS) data and Office of Management and Budget (OMB) county classifications show that approximately 11.3% of residents in metropolitan countries report a disability compared to 15.2% in micropolitan counties and 17.4% in non-core counties (von Reichert, Greiman, & Myers, 2014), while rates reported in the NHTS are 6.6% in urban areas and 7.3% in rural areas. The ACS asks respondents about difficulty seeing, hearing, walking, doing errands, self-care, and remembering, regardless of impact on travel whereas the NHTS is specifically related to travel and thus may not capture the full range of disabilities, possibly resulting in lower estimates. Differences in how rural is defined could also contribute to these observed discrepancies.

Driver/Non-Driver

People with disabilities are much less likely to drive than those without disabilities (see Table 1). As a result, it makes sense that they use alternatives such as rides from other people, and public transportation options.

However, these services are not available in all areas, especially rural areas. Urban residents with disabilities are more likely to use public transit...
or other special transportation services than rural residents with disabilities, perhaps because these services are often lacking or non-existent in rural areas (Gonzales et al., 2006), which may also explain why rural individuals are more likely to report driving.

Finally, a significant proportion of individuals who do not drive also do not work. Going to work is often a major reason for driving, so it follows that without the ability to drive it may also be difficult to hold a steady job.

Limitations
There are several limitations that accompany NHTS data:

- First, the survey only asks about travel-limiting disabilities which excludes individuals who experience difficulties unrelated to traveling.
- Second, the survey does not ask about trips that an individual does not take, which can obscure barriers to transportation.
- Third, there is no information about difficulties while traveling that may have impacted other outcomes, for example, having difficulty navigating fixed-route buses.
- Finally, the NHTS does not ask respondents if they have modified their vehicle to accommodate their impairments, which would be important for understanding how individuals with disabilities drive themselves.

Conclusion
These findings demonstrate the importance of transportation, and specifically, being able to drive. Without the ability to drive, individuals with disabilities are more likely to report not working and poorer health.

While using other forms of transportation (i.e. public transit or rides from other people, other services) seem to help, they do not fully account for the differences between individuals who drive and those who do not drive.

This is especially relevant for rural communities that lack adequate public transportation options. Overall, these findings indicate that more work is necessary to accommodate people who cannot or do not drive.
References


Photos

Unless otherwise noted, all photos are from Healthy Community Living (www.HealthyCommunityLiving.org) under which people from around the country have sent in photos of “Real People, Real Places” that have to do with living with disability in America.

Suggested Citation


For Additional Information

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