

Access For All: Capital Region Mobility Plan

The **Harrisburg Area Transportation Study (HATS)** is updating its **Coordinated Public Transit–Human Services Transportation Plan**, and we need your input to make transportation safer, easier, and more accessible for seniors, individuals with disabilities, and everyone in our community.

Why Should You Take the Survey? This is your transportation system — and your experiences can directly shape how local and federal funding is used to improve it. Whether you're a rider, a caregiver, or part of a service organization, your feedback helps.

What it is and why it matters: The *Enhanced Mobility of Seniors and Individuals with Disabilities Program*, commonly referred to as the *Federal*

All survey responses are optional and anonymous.

*If you select other for any of the questions, please specify.

1. What best describes you?

- ☐ Current Transportation Rider
- ☐ Caregiver
- ☐ Service Organization
- ☐ Other

2. What county do you live in?

☐ Cumberland

☐ Dauphin

☐ Perry

☐ Other

3. What is your home zip code?

4. What is your age?

☐ Under 18

☐ 18-34

☐ 34-64

☐ 65-84

☐ 85+

☐ Prefer not to say

5. Are you a person with a disability, defined as a physical or mental impairment that substantially limits one or more major life activities.

☐ Yes

☐ No

☐ Prefer not to answer

6. Do you have accessibility requirements (i.e., walker, wheelchair, etc.) that require assistance in transportation?

☐ Yes

☐ No

☐ Prefer not to answer

7. Do you have a smartphone?

☐ Yes

☐ No

8. Do you have access to a car, truck, van, or other passenger vehicle to get around?

☐ No

☐ No, but I have friends or family nearby who drive me

☐ Yes, I have a car and can drive

9. For the majority of your local trips, how do you travel most often? Check all that apply.

- ☐ Drive alone
- ☐ Ride with a spouse or other family member
- ☐ Ride with volunteers/carpool
- ☐ Use public transportation
- ☐ Take a taxi/Uber/Lyft
- ☐ County or human service agency provides transportation
- ☐ Walk
- ☐ Bike
- ☐ Other

10. If your primary source of transportation is not available, how do you travel? Check all that apply.

☐ Walk

☐ Bus

☐ Taxi/Uber/Lyft

☐ Bicycle

☐ Drive with a spouse/other family member

☐ Drive alone

☐ Other

11. Rank the following factors when deciding how to get around

Cost

Safety

Convenience

Duration of trips

12. What transportation service do you normally ride/use in the region? Select all that apply.

☐ Fixed Route Transit (i.e., rabbittransit services, Lebanon Transit)

☐ Senior Shared Ride/Paratransit

☐ Share Ride/MATP

☐ Veterans Transportation

☐ rabbitWORKS Vanpool (Commute w/ Enterprise)

☐ Commute PA

☐ Community based volunteer transportation providers

☐ Uber/Lyft

☐ Bike

☐ None

☐ Other

13. How often do you currently use the transportation services in question #12?

- ☐ Daily
- ☐ Weekly
- ☐ Monthly
- ☐ A few times a year
- ☐ Never

14. If you have never used or no longer use public transportation, please indicate the reasons. Check all that apply.

- ☐ Service is not frequent enough
- ☐ Travel takes too long
- ☐ Service is not offered to the locations I need
- ☐ Service is not reliable
- ☐ Fares are expensive
- ☐ Too far to walk to a bus stop
- ☐ I prefer to drive
- ☐ I am not aware of the public transportation services available
- ☐ Not applicable (I currently use public transportation)
- ☐ Other

15. If you currently use public transportation (or expect to use public transportation in the future), what are your trip purposes? Please select all that apply.

- ☐ Medical appointments
- ☐ Education
- ☐ Employment/training
- ☐ Religious
- ☐ Senior services
- ☐ Grocery
- ☐ Shopping
- ☐ Family/friend visits
- ☐ Recreation/Entertainment
- ☐ Governments offices/services
- ☐ N/A
- ☐ Other

16. Are there any additional locations that you need to or would like to travel to (not noted in #14), if so, please specify below.

17. What is the most you are willing to pay for a one-way public transportation trip?

- ☐ Nothing (\$0)
- ☐ Less than \$1
- ☐ \$1.00 to \$2.00
- ☐ \$2.00 to \$3.00
- ☐ \$3.00 to \$4.00
- ☐ \$4.00 to \$5.00
- ☐ More than \$5.00

18. During which of the following time periods do you MOST need transportation services?

- ☐ Monday through Friday, daytime (6 am to 6 pm)
- ☐ Monday through Friday, evenings (6 pm to 10 pm)
- ☐ Monday through Friday, nights (10 pm - 7 am)
- ☐ Weekends (Saturdays and Sundays, anytime)
- ☐ N/A

19. There are many strategies to improve public transportation and a limited amount of funding. Of the following improvement strategies, please choose the top three that are most important to you.

Please select at most 3 options.

- ☐ Improve information about available public transportation services and routes
- ☐ More service in rural areas
- ☐ More service during evenings and weekends
- ☐ More out of county/out of region service
- ☐ Lower the cost of public transportation
- ☐ Improve comfort of ride/bus
- ☐ Provide immediate information if ride will be late
- ☐ Shorten wait times for return trips
- ☐ Prioritize medical appointments
- ☐ Expand Paratransit service
- ☐ Increase reliability

20. What suggestions do you have to improve existing fixed route and/or shared ride services? (please provide 1-3 suggestions)

21. How do you hear about transportation services available to you? Check all that apply.

- ☐ Word of mouth
- ☐ Social media
- ☐ Newspaper or other advertising
- ☐ County Assistance Office
- ☐ Senior Center Case worker or other government referral
- ☐ Internet Search
- ☐ PA 211 or PA 511
- ☐ Find my Ride PA
- ☐ Other

22. When scheduling a ride or finding information about public transportation, which of the following do you use. Check all that apply.

- ☐ Internet search through a smartphone
- ☐ Internet search through a computer
- ☐ Through an app on a smartphone
- ☐ Calling the service provider directly
- ☐ Other

23. Please tell us about a time when transportation was a challenge for you or those you assist. Include where your trip started, where you were going, and why this trip was a challenge.

24. What is your gender?

- ☐ Male
- ☐ Female
- ☐ Non-binary/non-conforming
- ☐ Prefer not to answer

25. What best describes your race?

- ☐ American Indian, Alaska Native or First Nations
- ☐ Asian
- ☐ Black or African American
- ☐ Hispanic or Latinx
- ☐ Native Hawaiian or Pacific Islander
- ☐ Middle Eastern or North African
- ☐ White/Caucasian
- ☐ Other

26. What is your ethnicity?

- ☐ Hispanic
- ☐ Non-Hispanic

27. How well do you speak English?

- ☐ Extremely well
- ☐ Somewhat well
- ☐ Neutral
- ☐ Somewhat not well
- ☐ Extremely not well

28. What is your annual household income?

- ☐ Less than \$15,000
- ☐ \$15,001 to \$25,000
- ☐ \$25,001 to \$40,000
- ☐ \$40,001 to \$75,000
- ☐ \$75,001 to \$100,000
- ☐ Over \$100,000