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 Section 5310 program, improves mobility for seniors and individuals with disabilities nationwide by removing barriers to transportation services. A requirement to receive federal funding is the creation of a Coordinated Public Transit-Human Services Transportation Plan (HSTP). The answers received from this survey will directly shape how the updated HSTP will improve transportation services in our region.

All survey repsonses are optional and anonymous.		vey repsonses are optional and anonymous.	*If you select other for any of the questions, please specify.
1. What best describes you?			
(\bigcirc	Current Transportation Rider	
(\bigcirc	Caregiver	
(\bigcirc	Service Organization	
(\bigcirc	Other	
2. \	Wha	at county do you live in?	
(\bigcirc	Cumberland	
(\bigcirc	Dauphin	
(\bigcirc	Perry	
(\bigcirc	Other	
3. \	Wha	at is your home zip code?	

4.	4. What is your age?		
	\bigcirc	Under 18	
	\bigcirc	18-34	
	\bigcirc	34-64	
	\bigcirc	65-84	
	\bigcirc	85+	
	\bigcirc	Prefer not to say	
5.		you a person with a disability, defined as a physical or mental impairment that substantially sone or more major life activities.	
	\bigcirc	Yes	
	\bigcirc	No	
	\bigcirc	Prefer not to answer	
6.		you have accessibility requirements (i.e., walker, wheelchair, etc.) that require assistance in sportation?	
	\bigcirc	Yes	
	\bigcirc	No	
	\bigcirc	Prefer not to answer	
7.	Doy	ou have access to a car, truck, van, or other passenger vehicle to get around?	
	\bigcirc	Yes	
	\bigcirc	No	

8.	8. 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		
9. 1	lf yo	ur 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		
10.	Ranl	the following factors when deciding how to get around		
		Cost (Total out of pocket expenses for trip)		
		Safety		
		Convenience (Ease of access to transportation)		
		Duration of trips (Total Travel Time)		

11. 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			
12. How often do you currently use the transportation options in question #11?			
O Daily			
Weekly			
Monthly			
A few times a year			
Never			

	ou have never used or no longer use public transportation, please indicate the reasons. Check hat 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
Wila	t are your trip purposes? Please select all that apply.
	Medical appointments
	Education Education
	Education
	Education Employment/training
	Education Employment/training Religious
	Education Employment/training Religious Senior services
	Education Employment/training Religious Senior services Grocery
	Education Employment/training Religious Senior services Grocery Shopping
	Education Employment/training Religious Senior services Grocery Shopping Family/friend visits
	Education Employment/training Religious Senior services Grocery Shopping Family/friend visits Recreation/Entertainment

15. Are there any additional locations that you need to or would like to travel to (not noted in #14) so, please specify below.		
16.	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	
17.	When do you feel transportation options are limited or not available? Please select your top two.	
	Please select at most 2 options.	
	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	

the	ere are many strategies to improve public transportation with a limited amount of funding. Of e following improvement strategies, please choose the top three that are most important to u pertaining to public transportation.
Ple	ase 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
	hat suggestions do you have to improve existing fixed route and/or shared ride services? ease provide 1-3 suggestions)
20. Do	you have a smartphone?
C) Yes
C) No

21.	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.		en scheduling a ride or finding information about public transportation, which of the owing 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.		se tell us about a time when transportation was a challenge for you or those you assist. ude where your trip started, where you were going, and why this trip was a challenge.		
24.	Wha	at is your gender?		
	\bigcirc	Male		
	\bigcirc	Female		
	\bigcirc	Non-binary/non-conforming		
	\bigcirc	Prefer not to answer		

25. What best describes your race?		
\bigcirc	American Indian, Alaska Native or First Nations	
\bigcirc	Asian	
\bigcirc	Black or African American	
\bigcirc	Hispanic or Latinx	
\bigcirc	Native Hawaiian or Pacific Islander	
\bigcirc	Middle Eastern or North African	
\bigcirc	White/Caucasian	
\bigcirc	Other	
26. What is your ethnicity?		
20. VVII	at is your etrinicity?	
20. *****	Hispanic	
O	Hispanic	
0	Hispanic	
0	Hispanic Non-Hispanic	
0	Hispanic Non-Hispanic v well do you speak English?	
0	Hispanic Non-Hispanic v well do you speak English? Extremely well	
0	Hispanic Non-Hispanic v well do you speak English? Extremely well Somewhat well	
0	Hispanic Non-Hispanic v well do you speak English? Extremely well Somewhat well Neutral	

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	

28. What is your annual household income?